
QHSLab (USAQ): The Profitability Engine for Primary Care

Digital Health | Recurring Revenue | Proven ROI For Our Customers | Enhanced Patient Outcomes

A provider-lite, low-overhead platform designed to create high-return outcomes for both medical practices and QHSLab.

March 31, 2026



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Proven, Repeatable Operating Performance.

2025 Audited Financial Highlights

- Revenue of **\$2.69 million, up 26 percent** year over year
- Gross profit of **\$1.81 million, increasing 33 percent year over year**
- **Gross margin expansion** from 64.7 percent in 2024 to **67.3 percent in 2025**
- **Net income** improved to **\$457,417** for the full year, compared to a net loss of (\$259,239) in 2024.
- **Balance sheet simplification and capital structure improvements were** completed to support long-term scalability and future growth
- **Current liabilities were significantly reduced** from **\$2.4 million at December 31, 2024** to **\$450,000 at December 31, 2025** following debt repurchases and restructuring.

These results reflect disciplined execution in 2025 and position the Company for continued revenue growth, margin expansion, and increasing cash flow in 2026.

Primary Care is Financially Broken.

- **The Squeeze:** Reimbursement rates have fallen by ~30% over the past 10 years, while demand has risen.
- **The Bottleneck:** The average appointment is <20 minutes—no time for complex diagnoses.
- **The Cost:** Many chronic conditions are going overlooked—a missed opportunity to improve patient outcomes and for practices to grow their income.

A Supply-Demand Imbalance Hiding in Plain Sight.

- **The Demand:** Mental health demand is up 50%; 60M Americans suffer from allergies.
- **The Shortage:** The mental health workforce is not growing fast enough, and they are already overwhelmed. There are fewer than 3,000 allergists to care for the growing allergic population.
- **The Opportunity:** PCPs must fill this gap profitably.

Conclusion: With demand far outpacing the available specialty workforce, primary care has become the front line for both mental health care and allergy management, not by choice, but by necessity. The practices that adopt scalable, reimbursable screening and care pathways will be the ones able to meet patient needs while growing their business.

We Turn *Loss of Time* into *Found Revenue*.

- **Automated Detection:** Engage patients digitally before the visit.
- **Zero Friction:** Integrates into workflows with no extra staff.
- **Immediate ROI:** Providers are more efficient and increase the number of reimbursable services they provide per encounter.

Designed for Primary Care Workflows



Before the Visit

- Adaptive digital assessment sent automatically using existing patient communication channels
- Screens across physical, behavioral, and lifestyle risks
- Captures both risk and patient intent

During the Visit

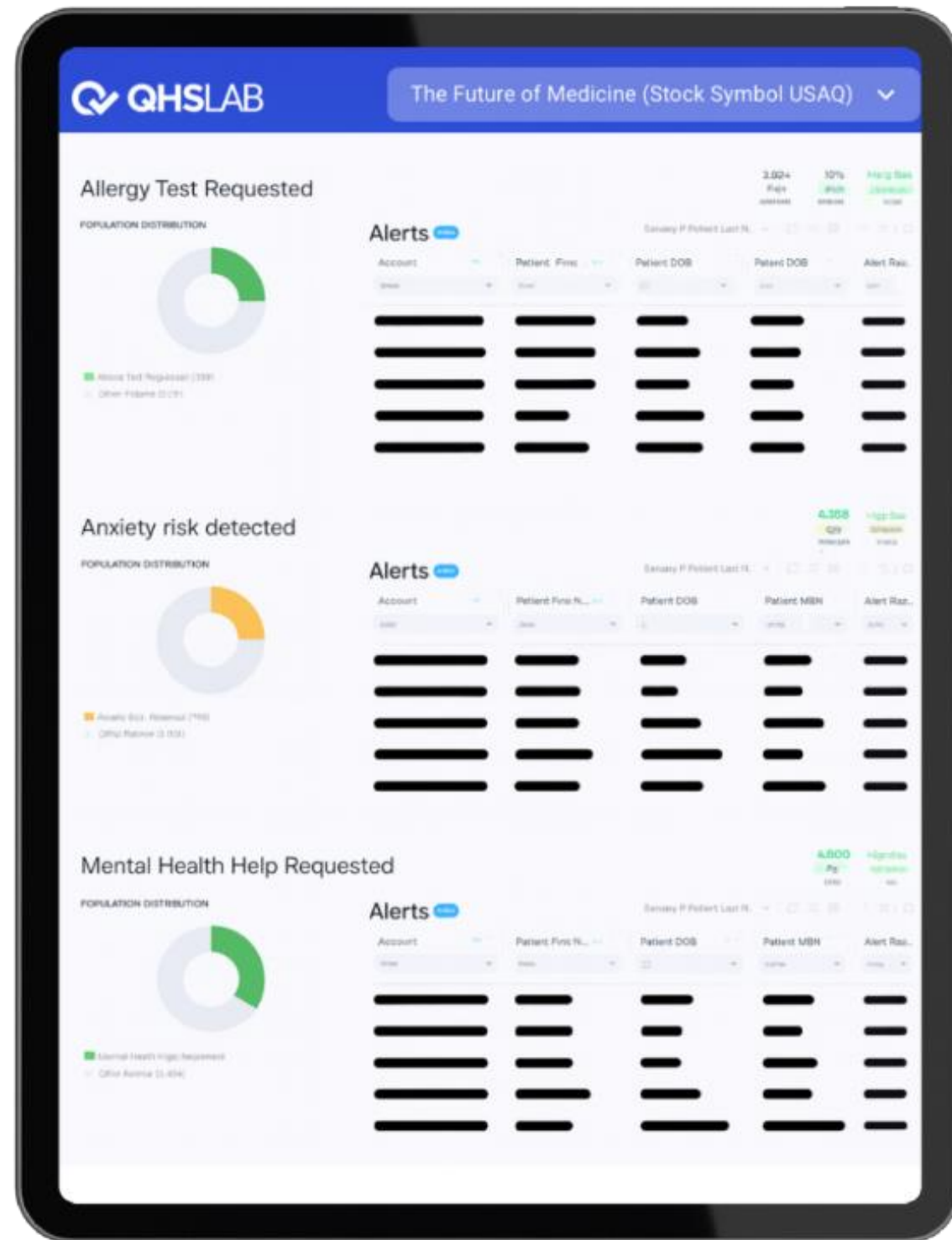
- Provider-ready report delivered directly into the EHR
- Visit starts informed, not investigative
- No added workflow or staff burden

After the Visit

- Personalized education and digital follow-up
- Asynchronous care and structured check-ins
- Care managers engage when appropriate

Built to work within existing staffing and reimbursement models

Closed-Loop Care Platform with Economic Benefits



System:

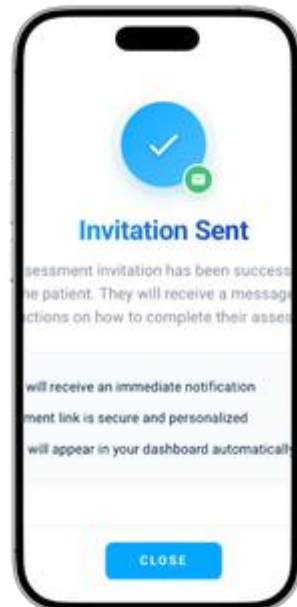
- Screening leads to detection
- Detection produces structured reporting
- Reporting enables follow-up
- Follow-up creates ongoing monitoring
- Ongoing check-ins and care adjustment

Economics:

- Practices bill reimbursable services enabled by the platform
- QHSLab charges flat per-patient and monthly fees
- Revenue grows with engagement, not headcount

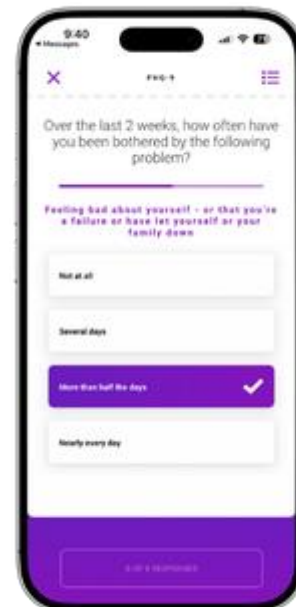
Clinical continuity enables economic continuity

Seamless Workflow Integration



Automated Delivery

Patient receives a secure link via text or email to complete assessments before an office visit



Digital Completion

Patient completes the assessment remotely at their convenience



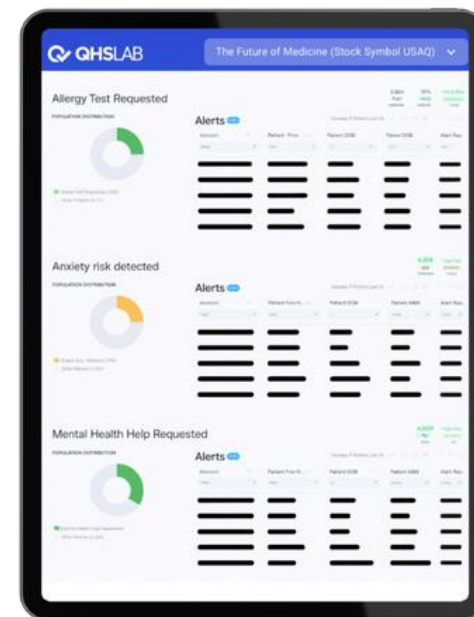
Clinician Review

Automated clinical analysis is generated for provider review and clinical decision making



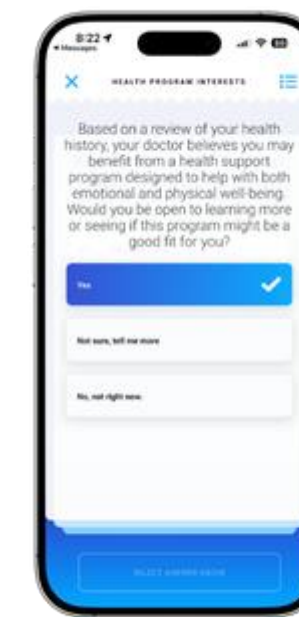
Chart Integration

Documentation automatically syncs to the patient chart



Billing Enablement

Supported workflows allow for accurate billing and revenue capture



Ongoing Patient Care

Follow-up creates ongoing monitoring, e-visits, care adjustment, and recurring income



QHSLab Digital Platform Lifecycle

Once implemented, this cycle repeats automatically for engaged patients.

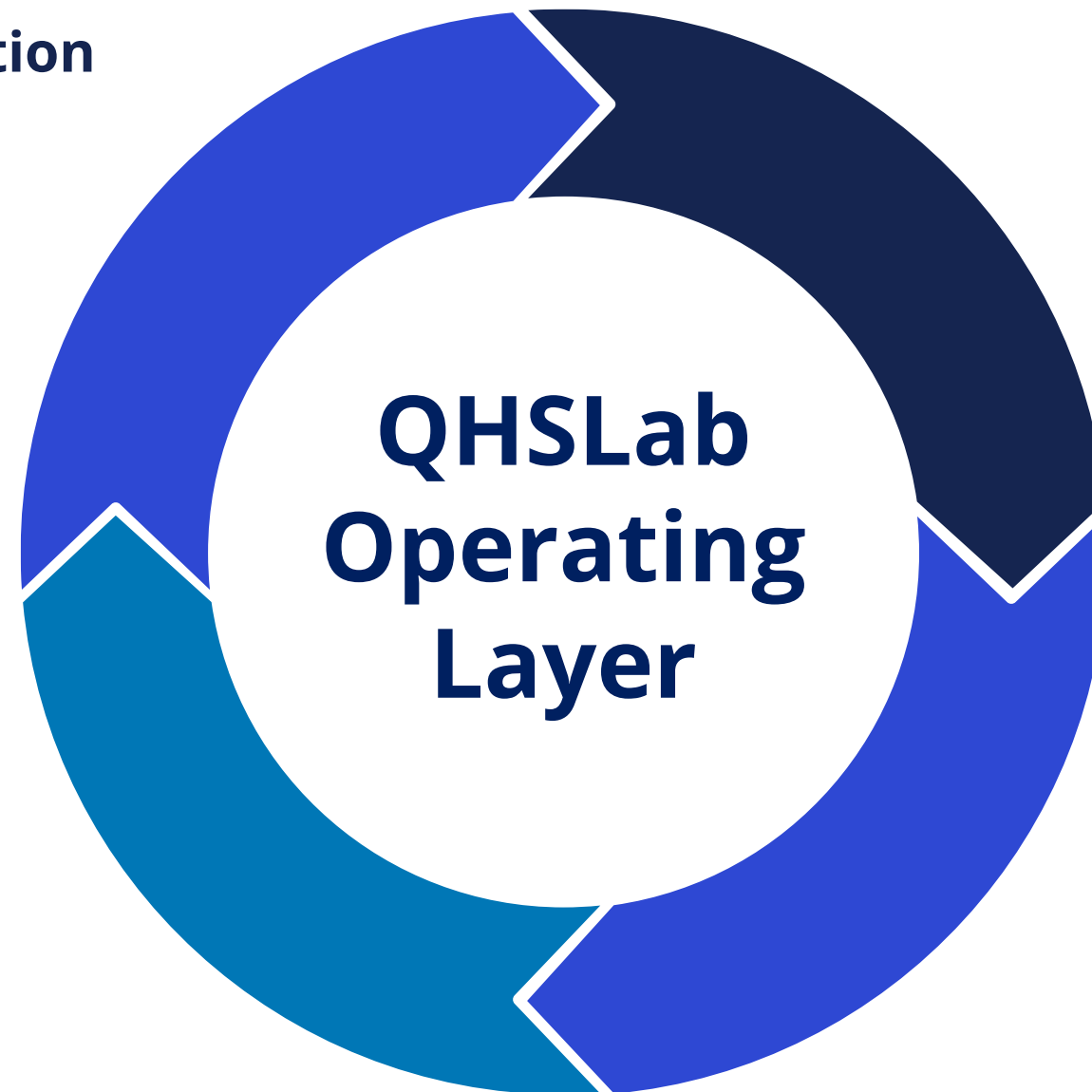
Continuous Monitoring & Optimization

Care pathways adjust based on patient responses and provider input

“Ongoing monitoring and follow-up for patients on chronic therapies. Eg GLP-1’s”

Ongoing Care Delivery

Provides education, self-management, asynchronous care, and care-manager support.



Adaptive Digital Screening

Screens patients across multiple conditions and identifies risk and interest in care

Automated Clinical Reporting

Generates provider-ready reports delivered to the EHR and patient-friendly summaries

“Continuous care, not episodic visits”

How One Patient Generates Revenue for the Practice and QHSLab

Repeatable, reimbursable, and scalable: QHSLab enables care that practices already provide, but historically could not scale or monetize



Before the Visit

- Patient completes adaptive digital assessment
- Risks and interests in help identified
- Reports auto-generated
- **Practice: ≈ \$60**
- **QHSLab: Platform fee ≈ \$24**



During the Visit

- Provider receives report in EHR
- Focused, informed visit
- Preventive counseling when appropriate
- **Practice: ≈ \$42**
- **QHSLab: Support fee ≈ \$25**



After the Visit

- Education sent to patient's phone
- Digital follow-up & check-ins
- Patient-requested e-visits
- **Practice: ≈ \$60**
- **QHSLab: Digital care fee ≈ \$25**



Ongoing Care

- Monitoring & care plans
- Non-face-to-face clinical work
- Behavioral health integration
- **Practice: ≈ \$95 ≈ \$60/month**
- **QHSLab: Monthly fee ≈ \$25**

Recurring revenue per patient, per month, per practice.

Evidence That the Model Works

These real-world numbers, based on trailing twelve months performance and a gross profit margin of approximately 66% at current revenue levels, anchor our scale model and allow investors to evaluate the operating leverage potential as we scale toward \$10 million in annual revenue.



- 40 active, paying providers
- Average revenue per practice: \$3,000 per month
- Range: \$500 to \$15,000 per month
- Consistently high retention and engagement



- About 100 active primary care clients
- Average revenue per practice: \$12,000 per year
- Range: \$3,500 to \$50,000 per year
- Growing demand due to allergist shortages

These programs share the same customer base and operating infrastructure.

Built with Discipline. Ready to Scale.

With the model validated, we are expanding our reach and accelerating growth.

- Years of focused development have created our purpose-built platform and operating model.
- Our foundation is proven. Our capabilities are repeatable.
- We are now expanding into a significantly larger market opportunity.

The next chapter is defined by scale.

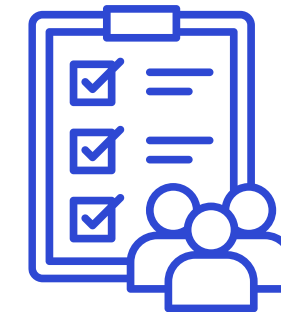
Why Invest Now: The Right Solution at the Right Time in Primary Care



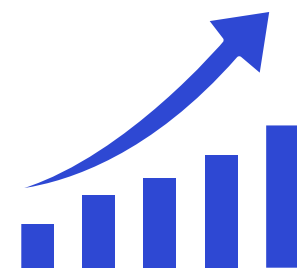
Moved beyond concept and now scaling a proven operating model in primary care.



Clear and achievable path to \$10M in annual recurring revenue



Highly scalable platform with minimal operational friction for providers



Executing against a repeatable model with clear unit economics and disciplined growth.



Early-stage public company with established operating traction



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