



Cognitive Function in Routine Healthcare: Don't Leave Out the Brain

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Important Information Before You Read This Document

Creyos Health provides a scientifically validated and objective measure of an individual's cognition; however, it is not a diagnostic tool. Creyos Health should be used in conjunction with other information and clinical judgment to reach conclusions regarding an individual's health. Ultimately, Creyos Health does not replace the judgment of a practitioner, and Creyos does not assume responsibility for the outcome of decisions made based on Creyos Health data.



For years, healthcare has been moving toward a more proactive, individualized approach to assessing and treating patients.^{1,2} The rise of telehealth and remote monitoring has encouraged this shift across many specialties—but such positive changes in the cognitive care realm have lagged. Despite increasing awareness about mental health and cognitive care, there has been a lack of meaningful evolution in technology and attitudes supporting a more proactive care approach.

A large part of the problem lies in the nature of our healthcare system. By design, it tends to be reactive instead of proactive, and patients often only visit their doctors when they have health problems to address. On the surface, the reactive approach seems less costly: Healthcare services are only administered when needed, saving limited resources. However, this reactive approach actually has the opposite effect and typically results in increased healthcare costs.^{3,4} When taking a reactive approach to brain health, action may not be taken until symptoms are obvious. Unfortunately, by the time a diagnosis is finally made, it's often too late to reverse the condition.

In contrast, a proactive approach may identify potential problems before a patient's quality of life is impacted. And that doesn't just apply to cognitive decline and neurological disorders—a proactive approach may also get ahead of mental health issues, which often impact cognition. A proactive healthcare stance gives clinicians the tools they need to measure and compare cognitive functioning to determine if there is a significant change over time.

Clinicians have embraced early-detection measures like cancer screening and longitudinal methods like heart disease monitoring, which have proven to be far more successful at saving lives than most reactive treatments. When it comes to the brain, though, it is rare to take measurements to assist in early detection, despite evidence that warning signs of cognitive decline woven into routine healthcare can dramatically improve patient outcomes.⁵

Many patients and clinicians expect an annual checkup and blood tests for general well-being, so why are brain health and cognitive function exempt from this proactive approach?

¹Clinical Pharmacology & Therapeutics, <u>Health Care Evolves from Reactive to Proactive</u>, Jan 2019 ²Annals of Internal Medicine, <u>Patient-Centered Decision Making and Healthcare Outcomes</u>, Apr 2013 ³Summit Chiropractic & Pain Relief, <u>Proactive vs Reactive Healthcare</u>: <u>What's the Difference</u>?, Jul 2015 ⁴MaRS, <u>Transforming Health: Shifting from Reactive to Proactive and Predictive Care</u>, Mar 2016 ⁵EMBO Molecular Medicine, <u>A MicroRNA Signature That Correlates with Cognition and Is a Target</u> <u>against Cognitive Decline</u>, Nov 2021

What Does Routine Healthcare Mean for Brain Health?

Currently, clinicians provide many services that can be considered routine healthcare—for example, vital sign measurements, blood work, and preventative screenings are all part of routine physicals.

Brain health doesn't receive this same type of treatment, and the tools to establish a cognitive function baseline are not commonplace. Physicians often only take action when a patient has suffered a traumatic event or is experiencing obvious cognitive impairment. However, when we look at today's evolving patient populations, there's no question that standard healthcare practices should include the brain:

Brain health concerns increase with age, and between 2015 and 2050, **the proportion of the world's population over 60 will nearly double from 12% to 22%**. As a result, healthcare worldwide needs to prepare its systems to handle an aging population.⁶ Brain health is impacted by common diseases, including COVID-19. In one post-COVID study, a year after an infection, over 60% of patients experienced cognitive problems like trouble with short-term memory and planning.⁷ Brain injuries are not confined to athletes, and, in fact, most concussions are a result of falls, car accidents, and other common mishaps. One study found that 6% of the population (both athletes and non-athletes) show signs of chronic traumatic encephalopathy.

There are a wide range of situations in which otherwise healthy people would want to establish a baseline and monitor cognitive function:

- You suspect your patient is at risk for mild cognitive impairment (MCI), Alzheimer's, or other types
 of dementia
- Your patient has experienced, or is at risk for, brain injuries resulting from activities such as sports and physical labor, or they have a family history of stroke
- You want to help your patient keep their brain healthy as they age, and optimize their everyday performance
- Your patient is recovering from treatments that affect the brain, such as chemotherapy, anesthesia during surgery, or hormone therapy
- You want to ensure your patient's cognitive capacity is sufficient or has returned to an acceptable level in areas where function is critical, such as working at dangerous job sites, making key decisions about finances, or getting back behind the wheel after an accident

In each of these cases, patients benefit from regular brain health assessments as part of their regular health checkups—in other words, expanding routine healthcare to include cognitive care.

Making a Case for Cognitive Assessments in Routine Healthcare

IMPROVE ROUTINE HEALTH PRACTICES

Implementing cognitive care protocols as part of standard practice provides long-term insights that can only be seen if they're measured in the first place. For example, patients can be monitored for:

- General brain and mental health, as you would other annual assessments like blood tests and physicals
- Long-term follow-up, for people who have experienced cognitive issues due to a past event—like with concussion recovery, chemotherapy-related "chemo brain," or "pumphead" issues after cardiac surgery—or whose treatment is ongoing, such as when taking medication for mental health conditions
- · Post-treatment monitoring to ensure a return to a stable baseline
- Early warning signs, for those with a family history of conditions like Alzheimer's or other cognitive impairments

It's hard to determine if there is a problem without a baseline measurement to compare to. Establishing a reliable baseline for a patient's cognitive function allows clinicians to easily perform all of the above and take a proactive approach to care.

By objectively measuring cognition regularly, clinicians can use active patient monitoring to offer better proactive care.



IMPROVE MENTAL HEALTH DIAGNOSIS AND TREATMENT

It is abundantly clear that mental health conditions have significant impacts on cognitive function. Nearly every psychologist, psychiatrist, and neurologist hears patients complain of "brain fog," but these cognitive changes are sometimes subtle, often ill-defined, and rarely measured. Increased awareness about the tools that can support the public's mental health needs can help clinicians generate additional insights to provide the best possible diagnoses and treatments.

Furthermore, there's been a growing need for better mental health solutions:

Through the 2020 pandemic, the percentage of US adults experiencing **anxiety or depressive disorders increased from 36.4% to 41.5%**, and those reporting an unmet mental healthcare need increased from 9.2% to 11.7%.⁹ Between 2009 and 2015, mental healthrelated emergency department visits increased by 56.4% for pediatric patients and 40.8% for adults.¹⁰

The prevalence of children ever diagnosed with ADHD increased by 42% between 2003 (7.8%) and 2011 (11.0%).¹¹ For US adults aged 18 to 44, the estimated lifetime prevalence of ADHD is 8.1%.¹²

Patients typically see a clinician when an event or episode has occurred, so clinicians do not have the data to determine if cognitive function has changed or is at its baseline levels—data that could be crucial for a confident diagnosis. Once a patient has returned to a previously established level, the clinicians' goals may change: Now they need to ensure the patient is remaining stable, ensure medications are not having undesirable side effects, or look for early objective signs that the patient needs more care, and proactively engage them as required to help further support recovery. In all of these cases, cognitive monitoring can improve diagnosis of mental health conditions with cognitive symptoms, then give clinicians more confidence that their patient's mental health is stable or improving, or the data needed to take action should the patient experience a decline.

Clinicians need modern tools to evaluate patients and provide the mental healthcare they need.

¹² JAMA Psychiatry, Lifetime Prevalence and Age-Of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication, June 2005

⁹ Centers for Disease Control and Prevention, <u>Symptoms of Anxiety or Depressive Disorder and Use of Mental Health Care Among Adults During the COVID-19 Pandemic — United States, August 2020–February 2021, April 2021</u>

¹⁰ The American Journal of Emergency Medicine, <u>National Trends in Mental Health-Related Emergency Department Visits by Children and Adults, 2009–2015</u>, December 2020 ¹¹ Journal of the American Academy of Child and Adolescent Psychiatry, <u>Trends in the Parent-Report of Health Care Provider-Diagnosed and Medicated Attention-Deficit/Hyperactivity Disorder:</u> ¹⁰ United States, 2003-2011, November 2013

IMPROVE EARLY DETECTION OF MCI

Historically, early detection of mild cognitive impairment (MCI) has been challenging. Generally, it is only once symptoms have advanced that an MRI, MoCA, or MMSE for dementia screening is done. Tracking patient status is complex, and MCIs often goes undetected until it has progressed to the point of a serious concern. In addition, it is rare for physicians to collect a personalized baseline for their patients, so tests can often only detect a severe deficit relative to the general population. How do you determine what's "normal" for each patient? Start by establishing a baseline, which makes future assessments more relevant as personalized results can be compared to the patient's previous scores.

Establishing a reliable baseline for each patient allows clinicians to catch early warning signs and easily detect meaningful changes in cognition before it's too late.

Track the Long-Term Impacts of COVID

Over the years, cognitive impairment and mental health diagnoses have steadily grown in prevalence, and even more so as the COVID-19 pandemic has disrupted life as we know it. The pandemic has placed an extraordinary amount of stress and uncertainty on the world. It's currently estimated that one in three survivors of COVID-19 suffer from a neurological or psychiatric disorder within six months of contracting the virus.¹³

Many people have reported experiencing brain fog throughout the pandemic, either from contracting the virus or from mental health decline brought on by isolation and anxiety from quarantine. Additionally, there have been reports of decreased gray brain matter in those recovering from COVID-19.¹⁴

A cognitive care protocol that includes periodic testing is vital for effectively treating mental health conditions and neurodegenerative disorders. With COVID-19 potentially increasing the need for both, it is more important than ever to introduce brain health assessments into routine healthcare.

While the full impact of the pandemic on mental health and cognition cannot be quantified at this time, monitoring cognitive function over time may help glean valuable insights into the long-term effects of COVID-19.

¹³ The Lancet Psychiatry, <u>6-month neurological and psychiatric outcomes in 236, 379 survivors of COVID-19: a retrospective cohort study using electronic health records</u>, May 2021 ¹⁴ The Neurobiology of Stress, <u>Alterations of frontal-temporal gray matter volume associate with clinical measures of older adults with COVID-19</u>, May 2021

The Current Standard of Cognitive Care

It's challenging to evaluate the current standard of care when it comes to cognition in regular healthcare, because the care simply doesn't exist. There is no standard of practice that clinicians are expected to implement. Cognitive health assessments are only performed when there is a suspected problem, which often means it is too late to provide a solution. Part of the reason for this gap is that there have been no tools to easily and effectively perform regular cognitive assessments. In addition, the existing tools are not sensitive or reliable enough to detect changes that may signal early warning signs of decline.

Comprehensive cognitive assessments are costly, resource intensive, and time consuming, and therefore not sustainable or necessary to perform regularly if not needed.

The currently available instruments (e.g., the MMSE and MoCA) can help clinicians come to the conclusion that a patient is cognitively impaired, but it is typically in a binary manner—yes, they are impaired or no, they are not impaired. However, cognition is much more nuanced than that, as there is a broad spectrum of outcomes and varying levels of impairment. Cognition should be assessed and treated in accordance with each patient's personal baseline and domains that are showing signs of impairment. By taking a proactive approach to cognitive care, clinicians can easily establish that baseline, identify specific cognitive domains of concern, monitor the patient over time, and enact a more comprehensive cognitive assessment when required.



Can you draw simple objects and identify common animals? For healthy people, traditional instruments are easy to achieve a perfect score on, which does not provide useful information about cognition.

BRAIN HEALTH IS HEALTH: WHY COGNITIVE ASSESSMENTS SHOULD BE PART OF A REGULAR HEALTH MAINTENANCE PROTOCOL

People are told that they should visit their dentist, optometrist, and general practitioner annually. They run a battery of tests at these appointments to ensure patients are in good health and there are no noticeable changes since the previous checkup. However, there is no equivalent when it comes to cognition or mental health, even though baselining and ongoing tracking can help many patient groups.

There is a need for regular cognitive assessments—so why aren't they happening?

- There is a lack of awareness when it comes to the value that regular cognitive assessments can bring to patient outcomes.
- Patients have subjective cognitive symptoms (e.g., brain fog) or worry about future cognitive issues as a result of aging or injury but have not asked about or are not even aware of objective cognitive measurements, so there is no push to provide periodic assessments.
- There are concerns about costs for both clinicians and patients. The way the model works today, mental health professionals typically cannot obtain reimbursement for assessments of generally healthy people. As a result, there would be a charge associated with these services, and, unfortunately, many patients cannot or will not pay for them.



Now Is the Time for Cognitive Assessments as Part of a Routine Healthcare Standard

Technological advances in healthcare have given clinicians new ways to proactively assist patients. Innovations across telehealth and remote monitoring have made it easier than ever to address problems before they become detrimental. The healthcare industry has been trending toward remote technology for years. The 2020 pandemic ushered in a new era of virtual care tools, and clinicians across every specialty are now heavily adopting remote solutions.

Consumers using virtual visits rose from 15% to 19% from 2019 to early 2020; this jumped to 28% in April 2020. On average, 80% said they would likely continue with virtual visits, even after COVID-19 restrictions have ended.¹⁵

Leveraging telehealth and virtual solutions has changed the doctor-patient model. These advances reduce wait times when making appointments and are more convenient as patients can see a doctor without even leaving their homes. It is more helpful for clinicians in managing care, but it also allows for proactive and personalized care as patients show more agency and take control of their health. With the ability to track their own vitals and critical health information from anywhere—even on the go—patients are now empowered by data to make decisions about their health, and they expect more from their healthcare providers.

When consumers started spending more time at home during the pandemic, many started using wearable devices to monitor their health and seek medical treatment. These trends continue, with the use of wearables in the US increasing from 9% to 33% in just four years.¹⁶

As more virtual monitoring tools become available, patients and clinicians can realize earlier and more accurate detection through regular cognitive evaluations. In addition, as the industry discovers more about cognitive decline and the risk factors for MCI and dementia, it becomes critical to proactively track and detect early warning signs to slow progression.¹⁷

Proactive cognitive monitoring is beneficial for a range of patient use cases, such as those at risk for mild cognitive impairment (MCI), recovering from recent mental health treatments that affect the brain, or at risk for brain injuries.

¹⁵ Deloitte Insights, <u>Are Consumers Already Living the Future of Health?</u>, August 2020

¹⁶ Insider Intelligence, <u>The Top Medical Monitoring and Healthcare Wearable Device Trends of 2021</u>, August 2021 ¹⁷ The Lancet, *Dementia, Prevention, Intervention, and Care 2020*, July 2020

Most specialists insist on an annual wellness checkup, so why should brain health be different? Clinicians can provide improved patient care through quick but powerful cognitive assessments that:





Cognitive Assessments Made Easy with Creyos

Creyos (formerly Cambridge Brain Sciences) offers a scientifically validated and easy-to-use digital platform for assessing cognitive and behavioral health, giving clinicians the additional insights they need to deliver superior patient care. Over 25 years of research have led to the creation of the Creyos cognitive tasks and the Creyos Health online cognitive assessment platform.

Rooted in Academia

The Creyos cognitive tasks were developed in the lab of Dr. Adrian Owen, former Canada Excellence Research Chair in Cognitive Neuroscience and Imaging and now Professor of Neuroscience at Western University, Canada. Dr. Owen is a pioneer in neuroscience, having combined neuroimaging and neurophysiological studies to unravel the secrets of the human brain over the last 25 years. He was one of the first clinicians to develop digital versions of decades-established and trusted neuropsychological tasks to evaluate reasoning, memory, attention, and verbal ability. His work has been published in numerous academic and medical journals, including The Lancet, The New England Journal of Medicine, Science, and Nature, covering topics ranging from focal lesions to awareness in persistent vegetative states to mental health.



The tasks have been scientifically validated and repeated over 12 million times to create an extensive normative database of over 85,000 people aged 6 to 99—and these numbers continue to grow. The tasks are proven to be efficient and provide accurate measures of cognitive capacity based on validation from:

- Patient behavioral studies
- Brain imaging studies of healthy volunteers and patients
- · Large-scale public studies using tens of thousands of volunteers

The tasks themselves have been modified over time to take advantage of newly available technologies, like brain scanning and internet-based assessments. However, every iteration is designed to maintain neuroscientific validity.

Creyos by the Numbers: Backed by Over 12 million tasks 25+ years (and counting) of scientific research completed globally Tasks used in more than **References a normative 300 peer-reviewed** database of 85,000 participants (ages 6-99) studies

COMPREHENSIVE ASSESSMENTS TO EVALUATE BRAIN HEALTH

Creyos Health allows clinicians to administer 12 core tasks of cognitive function as well as many standard health questionnaires such as the Patient Health Questionnaire (PHQ-9), Generalized Anxiety Disorder 7-item (GAD-7) scale, Perceived Stress Scale (PSS), Rivermead Post-Concussion Symptoms Questionnaire (RPQ), and many more.

Creyos Health is an online brain health assessment platform that takes seconds to set up, is engaging and enjoyable for patients, and produces a reliable and scientifically validated cognitive assessment report in as little as 15 minutes.

Assessments are easy to administer and don't require clinical supervision. This means they can be performed in the traditional clinic setting or sent electronically to be self-administered by the patient in the comfort of their home. The tasks are highly gamified and engaging and take only 1.5 to 3 minutes to complete. They also adapt to the patient's abilities, becoming easier or harder depending on patient performance. In addition, there are near-infinite problem sets within each task such that no attempt is ever the same, leading to strong test-retest reliability metrics and minimal practice effects.¹⁸

With a set baseline, clinicians can monitor patients consistently for performance stability and begin to track an objective indicator for cognitive change. In addition, numerous brain imaging studies have directly linked neural activity in specific regions with each task, giving clinicians the tools needed to connect performance with brain disorders and deficits.



LONGITUDINAL MONITORING WITH A RELIABLE BASELINE TO IMPROVE ONGOING CARE

It is common for clinicians and patients to monitor health conditions with regular checkups and annual screenings. Brain health should be no different. With the Creyos Health Schedules feature, clinicians can easily and automatically administer assessments at predetermined intervals as part of a telehealth cognitive care protocol.

As the industry shifts toward leveraging remote monitoring capabilities, it is easier than ever to administer quick, regular assessments to proactively track cognition. For patients with a family history or risk factors for dementia or Alzheimer's, early detection of warning signs is critical to slow progression.¹⁹ By starting with a personalized baseline and using longitudinal monitoring, data for these patients can easily be compared over time to detect changes and begin interventions sooner.



Meaningful Change Indicator

Steady cognitive function can be a good sign, but sometimes clinicians need to know if a change from one time point to another has meaningfully decreased or increased.

The Creyos Meaningful Change Indicator highlights results that would be highly unusual for someone who is not experiencing any disruption to their cognition. By comparing to a database of over 85,000 healthy people who took the same tasks multiple times, Creyos Health calculates how rare a particular patient's change in score is and flags results that have changed more than would be expected due to everyday variation.

The latest scores are compared both to the previous score and to baseline, to better understand short-term and long-term trends.

Healthcare providers can use the Meaningful Change Indicator to quickly identify sudden changes to brain health in patients they are monitoring—and take action if necessary.

With unlimited problem sets within each task, the sensitivity to change in performance is high. The Creyos Health normative database helps interpret any differences through the "Meaningful Change" feature that alerts clinicians to a degree of change from baseline that would not be expected by chance. This information may assist in understanding the need for a more comprehensive evaluation or other specific cognitive measures.

Clinicians can now easily and consistently monitor for stability or changes in performance to get early indications of cognitive decline as patients age. By establishing a reliable, comprehensive baseline of cognition for each patient, clinicians can track any signals associated with mental health disorders like depression and anxiety.

Baseline measures combined with longitudinal monitoring give clinicians new insights into brain health—the previously undervalued component of standard health.

SIMPLE REPORTING TO IMPROVE PATIENT COMMUNICATION

Upon completing an assessment, a comprehensive report is immediately generated. These easy-to-read reports are valuable tools in understanding a patient's brain health and facilitating conversations with patients, family members, or caregivers. Creyos Health is designed with accessibility in mind. Clear reports ensure that lay audiences or staff who are not well versed in the details of cognitive function can understand the results.

A measu and upda	y Ladder re of visuospatial working memorythe ability te memory based on changing circumstance	BRAIN HEALTH CO.	creyc	DS g memorythe ability to remember information about objects in spr anging circumstances.
ABOVE AVERAGE	Result is in the ABOVE AVERAGE associated with visuospatial work - Following step-by-step instructions to carry - Viewing a route on a map, then following to	Assessment Details ID: 574983 Gender: Female	Tasks Completed: 12 Completion Date: 03/19/2019	2019 Descripted change) and Bacessed by 5 compared to province must an 01555209.
	Understanding positioning in sports, and ca Viewing a document, then carrying out the	Date of Birth: 02/19/1967	Comparative Group: Females, 35-44	84)
A measu correct r	• Trouble are of response inhibitionthe ability to conce esponse despite interference.	Monkey Ladder Visuospatial Working Memory	(13)	n-the ability to concentrate on relevant information in order to mak rence.
AVERAGE	Result is within the AVERAGE ra associated with response inhibition	Double Trouble Response Inhibition	120	12019 (meaningful change) and decreased by 10 compared to previous result on 1504/2019.
101 Percentile	Keeping your eyes on the road when drivin Blocking out background conversations with	Feature Match	112	mar m mar m mar m mar m m m m m m m m m m m m m m m m m m m
Inhibiting your er Ignoring attention	Inhibiting your emotional gut reaction to a s Ignoring attention-grabbing buzzwords on	Odd One Out Deductive Reasoning		- 84 86 93 0 m
		Paired Associates Episodic Memory Potations	108	09/13/2019 09/27/2019 10/07/2019 15/2/2019 15/04/2019 15/16/2019
A measu	e Match ire of attention—the ability to focus on relevan	Mental Rotation	105	ty to focus on relevant details or differences.
AVERAGE 107 67th Percentile	Result is within the AVERAGE ran associated with attention include: - Staying focused on a task when it counts, s	Verbal Reasoning Digit Span Verbal Short-Term Memory	92	on 98/91/2019 and did not change compared to previous result on 1504/2019.
he	 retensiving similarities and dimerences when household product. Noticing small interpersonal details, like a p that somebody is upset or bored. 	Polygons Visuospatial Processing	89	107 - 107 -
		Spatial Short-Term Memory	84	09/13/2019 09/27/2019 10/07/2019 10/21/2019 11/04/2019 11/18/2019

Clinicians use Creyos Health to complement patient self-reporting, serving as an additional tool to validate or rule out the need for further investigation, rather than as a replacement for a complete neuropsychological evaluation.

Your Practice as a Business

With Creyos Health, clinicians can offer a new service to patients that improves cognitive care using an individualized approach without additional administrative burden.

REDUCED ADMINISTRATIVE BURDEN

The Creyos Health approach offers automated follow-ups so clinicians can continue to add new patients while tracking existing patients long term. Automation rules make it easy for care teams to schedule cognitive assessments and automatically email questionnaires based on an established schedule. The long-term follow-up results will automatically appear in the provider portal, ready for review at the patient's next scheduled appointment.

EASY-TO-USE PROVIDER PORTAL

Clinicians who use Creyos Health gain access to a secure HIPAA-compliant and easy-to-use platform. Clinicians can add patients, administer assessments, and create pre-saved configurations of cognitive assessments and/or questionnaires for easy one-click administration. Protocols are easy to administer and can be completed by the patient in the office or sent via email for the patient to complete in the comfort of their own home. These telehealth options allow clinicians to optimize and modernize their practice, saving valuable time for specialists and staff. In addition, with the rise of telehealth, Creyos Health offers an opportunity for specialists to continue business operations even when patients cannot be seen in person. The tests have been validated for in-person and at-home administration—with no significant difference detected in the results.²⁰

SIMPLE PRICING AND REIMBURSABLE ASSESSMENTS

Creyos Health makes it easy to add new services and reach new patients. Most clinicians receive reimbursement for services, including:

- Establishing a reliable baseline by leveraging assessments for patient intake and treatment planning
- Determining a diagnosis to begin establishing an appropriate treatment plan
- Telehealth services to provide consultations and other remote services
- Add-on services like rehabilitation programs and lifestyle optimization follow-up services

Creyos Health is a subscription-based platform with a flat annual fee that works whether operating a small private practice or an extensive group practice. There are no additional fees to add practitioners, so colleagues and other people in the clinic can use the same subscription. Plus, cognitive testing through the Creyos Health platform is reimbursable through various CPT testing codes (96132, 96133, etc.) for administering the assessment and interpreting the results, where deemed medically necessary by the clinician. Thus, by combining the benefits of reimbursement and the reduced administrative burden associated with cognitive testing, implementing Creyos Health has the potential to be a revenue generator.

Making Brain Health a Standard Part of Healthcare

In the modern healthcare era, clinicians should be taking advantage of advanced technologies that enable them to provide proactive, individualized care to their patients beyond a standard physical. It's time to give brain health the attention it deserves.

Creyos Health makes it easy to incorporate cognitive care as a standard part of your healthcare practice. The platform streamlines care with comprehensive, easy-to-administer assessments that are automatically sent to patients without any intervention needed. Leveraging the insights of cognitive assessments, clinicians have a personalized baseline that can not only be compared to a normative database but also act as a comparative measure for longitudinal monitoring to detect change. Creyos Health gives clinicians the ability to generate critical insights and provide improved cognitive care with modern digital tools that drive practice revenue.

Are you a healthcare professional helping patients recover from neurological or mental health conditions?

Try our reimbursement calculator to calculate the potential ROI of utilizing Creyos Health.

LAUNCH NOW \rightarrow



About Creyos

Creyos (formerly Cambridge Brain Sciences) leads the field when it comes to accurately quantifying brain function and brain health. Our proprietary cognitive assessments have been taken millions of times and have been used in over 300 studies published in leading academic journals over the last 30 years. Owing to years of rigorous academic development, Creyos possesses one of the world's largest normative databases of cognitive function developed from 12+ million cognitive task scores. Our cognitive assessments and health questionnaires—all delivered and scored digitally—are used by healthcare practitioners treating mental health conditions, brain injuries, aging, and other patient populations throughout the world, as well as by leading researchers.

Our assessments were developed by Dr. Adrian Owen, chief scientific officer of Creyos, and one of the leading authorities on cognition. Professor Owen is the head of the Owen Lab at the Western Institute for Neuroscience (WIN), a cutting-edge cognitive neuroscience research center at Western University in Ontario, Canada.