



**CONSUMER DIRECT CARE NETWORK**

Exhibit 99.1

Investor Presentation  
October 2022

**Confidential**

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# Disclaimer and Forward-Looking Statements

## About this Presentation

This confidential investor presentation (this "Presentation") is for informational purposes only to assist interested parties in making their own evaluation with respect to a proposed business combination (the "Business Combination") between DTRT Health Acquisition Corp. ("DTRT") and Consumer Direct Holdings, Inc. (the "Company"). The information contained herein does not purport to be all-inclusive and none of DTRT, the Company or their respective affiliates, or any of their control persons, officers, directors, employees or representatives makes any representation or warranty, express or implied, as to the accuracy, completeness or reliability of the information contained in this Presentation. This Presentation does not constitute (i) a solicitation of a proxy, consent or authorization with respect to any securities or in respect of the proposed Business Combination or (ii) an offer to sell, a solicitation of an offer to buy, or a recommendation to purchase any security of DTRT, the Company, or any of their respective affiliates. No such offering of securities shall be made except by means of a prospectus meeting the requirements of Section 10 of the Securities Act of 1933, as amended, or an exemption therefrom. You should not construe the contents of this Presentation as legal, tax, accounting or investment advice or a recommendation. You should consult your own counsel and tax and financial advisors as to legal and related matters concerning the matters described herein, and, by accepting this Presentation, you confirm that you are not relying upon the information contained herein to make any decision.

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## Forward Looking Statements

Certain statements, estimates, targets and projections in this Presentation may be considered forward-looking statements. Forward-looking statements generally relate to future events or DTRT's or the Company's future financial or operating performance. For example, statements regarding anticipated growth in the industry in which the Company operates and anticipated growth in demand for the Company's services, projections of the Company's future financial results and other metrics, the satisfaction of closing conditions to the Business Combination and the timing of the completion of the Business Combination are forward-looking statements. In some cases, you can identify forward-looking statements by terminology such as "pro forma", "may", "should", "could", "might", "plan", "possible", "project", "strive", "budget", "forecast", "expect", "intend", "will", "estimate", "anticipate", "believe", "predict", "potential" or "continue", or the negatives of these terms or variations of them or similar terminology. Such forward-looking statements are subject to risks, uncertainties, and other factors which could cause actual results to differ materially from those expressed or implied by such forward-looking statements.

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Nothing in this Presentation should be regarded as a representation by any person that the forward-looking statements set forth herein will be achieved or that any of the contemplated results of such forward-looking statements will be achieved. You should not place undue reliance on forward-looking statements, which speak only as of the date they are made. Neither DTRT nor the Company undertakes any duty to update these forward-looking statements.

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The historical financial information and data contained in this Presentation has not been audited in accordance with the standards of the Public Company Accounting Oversight Board and does not conform to Regulation S-X under the Exchange Act. Such information and data may not be included in, may be adjusted in or may be presented differently in the registration statement to be filed by DTRT relating to the Business Combination and the proxy statement/prospectus contained therein.

This Presentation also includes certain financial measures not presented in accordance with generally accepted accounting principles ("GAAP"), including Adjusted EBITDA and certain ratios and other metrics derived therefrom. The Company defines Adjusted EBITDA as net income (loss) adjusted for (i) interest expense, net; (ii) income tax expense; (iii) depreciation and amortization expense; (iv) amortization of capitalized cloud computing implementation costs (v) amortization of contract fulfillment costs (vi) PPP loan forgiveness; (vii) Provider relief funds; and other non-recurring adjustments. Non-GAAP financial measures are not measures of financial performance in accordance with GAAP and may exclude items that are significant in understanding and assessing the Company's financial results. Therefore, these measures should not be considered in isolation or as an alternative to net income, cash flows from operations or other measures of profitability, liquidity or performance under GAAP. You should be aware that the Company's presentation of these measures may not be comparable to similarly-titled measures used by other companies. DTRT and the Company believe these non-GAAP measures provide useful information to management and investors regarding certain financial and business trends relating to the Company's financial condition and results of operations. DTRT and the Company believe that the use of non-GAAP financial measures provides an additional tool for investors to use in evaluating ongoing operating results and trends in comparing the Company's financial measures with other similar companies, many of which present similar non-GAAP financial measures to investors. These non-GAAP financial measures are subject to inherent limitations as they reflect the exercise of judgments by management about which expenses and income are excluded or included in determining these non-GAAP financial measures. Differences between non-GAAP financial measures and comparable GAAP financial measures are reconciled at the end of this presentation.

This Presentation also includes certain projections of non-GAAP financial measures. Due to the high variability and difficulty in making accurate forecasts and projections of some of the information excluded from these projected measures, together with some of the excluded information not being ascertainable or accessible, DTRT and the Company are unable to quantify certain amounts that would be required to be included in the most directly comparable GAAP financial measures without unreasonable effort. Consequently, no disclosure of estimated comparable GAAP measures is included and no reconciliation of the forward-looking non-GAAP financial measures is included.

## Industry and Market Data

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### *Appendix*

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# Today's Presenters



## Consumer Direct Care Network



**Ben Bledsoe**  
Chief Executive Officer

Joined CDCN in 2004

Background / Experience



Education



**Daryl Holzer**  
Chief Financial Officer

Joined CDCN in 2003

Background / Experience



Education



## DTRT Health Acquisition Corp.



**Mark Heaney**  
Chairman & CEO

Joined DTRT in 2021

Background / Experience



Education



**Arion Robbins**  
Chief Operating Officer

Joined DTRT in 2021

Background / Experience



Education



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# Section 1

Executive Summary  
and Proposed  
Transaction

E V E R Y   L I F E .                      E V E R Y   M O M E N T .                      E V E R Y   D A Y .

## Transaction Summary



- ❖ Consumer Direct Care Network (“CDCN” or the “Company”) is a **leading provider of self-directed personal care solutions** across 14 U.S. states
  - The Company was founded in 1990, growing under its current management team to become **one of the largest providers in the home care market**, and has developed into a platform with a large number of strong payor / government contracts resulting in a predictable, recurring core revenue base
  - Due to its strong reputation and the inclusion of strong local partnerships in our procurement response, **in February 2022 CDCN began a 7-year contract with a 5-year renewal in Washington State**, which has materially improved the financial profile of the business
- ❖ DTRT Health Acquisition Corp. (“DTRT”), a healthcare-focused special-purpose acquisition company, agreed to invest in the Company in a transaction implying a **pro forma enterprise value of \$691 million**, and is expected to raise debt financing of up to \$150M in support of the transaction
  - **Values CDCN at 10.2x 2023E Adjusted EBITDA of \$67.5M** assuming \$10.20 per share; for comparison, Addus, the only comp concentrated in personal care, currently trades at approximately 14.8x 2023E Adjusted EBITDA
  - Transaction will be funded through a **combination of debt, available cash from CDCN balance sheet, and cash in trust post-redemptions**
  - Transaction proceeds used to repay existing debt, pay transaction expenses, provide for a combination of cash and stock to existing CDCN shareholders, and provide for cash to balance sheet
  - Sources of capital are expected to provide a sufficient amount of cash to complete the transaction, **regardless of the amount of redemptions**
- ❖ CDCN to combine with DTRT to become **the only public company focused on the high growth self-directed home care market**
  - Senior CDCN leadership team, with an average tenure of 11 years, to continue to run the business post-close
  - Existing ownership group to own 61.1% of the company after the transaction assuming no redemptions
  - Mark Heaney of DTRT to assume board role post transaction



# DTRT (“Do The Right Thing”) Snapshot

## DTRT Working Group and Board of Directors



**Mark Heaney**  
Chief Executive Officer  
**ADDUS**  
(Former CEO)



**Jeanee Martin**  
Board Member  
**LeadingAge**  
California  
**Corridor**



**Arion Robbins**  
Chief Operating Officer  
**REVELSTOKE**  
CAPITAL PARTNERS  
**BARCLAYS**



**Dipa Mehta**  
Board Member  
**Advocate**  
Aurora Health  
**SANDBOX**  
INDUSTRIES



**Don Klink**  
Chief Financial Officer  
**VNA Health Care**  
**ADDUS**



**Mary Christopher**  
Board Member  
**Horizon**  
**NYC**



**Tim Sheehan**  
Advisor  
**BPOC**  
**MDP**



**Bob Ciardi**  
Advisor  
**Provident**

## DTRT Profile

- Healthcare specialist SPAC **focused on home and community based healthcare services**
- DTRT was formed to generate superior returns through a strategic integration with a public-ready company in the home care market.
- Management team with decades of experience investing in operating and growing healthcare businesses
- Extensive track record of creating value for stockholders by acquiring strong businesses at disciplined valuations, investing in growth while fostering financial discipline, and ultimately improving financial results
- DTRT’s team brings **200+ years of collective healthcare leadership, along with over 150 closed deals totaling >\$3B in acquired enterprise value**
- The team set out to find a large, growing, profitable, public-ready business providing direct care or operating an ancillary service (software, technology, transportation, in-home meals, adult day, etc) in support of home-based care

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## There has Never Been a Better Time to Invest in Home Care



- ❖ **\$110B+ addressable market** for home care, expected to grow at a **4.7% CAGR from 2021 – 2027**
- ❖ Long term fundamental demand tailwinds: aging demographics, market share gain vs. institutional settings, importance to chronic care management and value-based care
- ❖ Preferred care delivery setting for a must-serve population and the lowest-cost treatment setting
- ❖ Model intended to defer and deflect from hospitalization / nursing homes
- ❖ Evolving reimbursement landscape, with **increased 10% match, incentivizing states to initiate or expand their self-directed programs**
- ❖ Fragmented landscape with competitive moat and consolidation opportunities at scale
- ❖ Easy-to-understand business model with high free cash flow
- ❖ Well-established public companies like AMED and ADUS

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## Overview of Investment Thesis



- ❖ Personal care is the **fastest growing segment of the economy** with home care workers' anticipated job growth through 2029 doubling that of the next fastest growing profession
- ❖ CDCN benefits from a **first-mover advantage** in consumer-directed care and significant organic and inorganic growth opportunities
- ❖ **The cost of care at home is substantially lower than nursing home cost**
- ❖ While the aging population is the fastest growing segment of the US population, **nursing home placement has been declining every year since 1980**
- ❖ CDCN's business is overwhelmingly delivered under State government contracts where there is **guaranteed term, guaranteed rates and complete or substantial exclusivity**
- ❖ The company benefits from a simple and predictable **hour-driven** economic model which is a function of **rate charged, caregiver payment rate, and total hours**
- ❖ Self-directed care is substantially **less exposed to the labor shortage problems facing our competitors**

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# CDCN is a Mission-Focused, Values-Driven Care Network with a Vision to Help People Live On Their Terms



		
<h2>Mission</h2> <p>To provide care and support to people in their homes and communities</p>	<h2>Vision</h2> <p>To help people live the life they want</p>	<h2>Values</h2> <p>Respect, Integrity, Service, Excellence</p>
<p>EVERY LIFE. EVERY MOMENT. EVERY DAY. 10</p>		

# Consumer Direct Care Network Snapshot



## Company Overview



Leading provider of personal care solutions, primarily focused on non-medical personal care for long-term, complex clients



Pioneer in the self-directed market, where clients select their own caregiver rather than have one assigned by a staffing agency



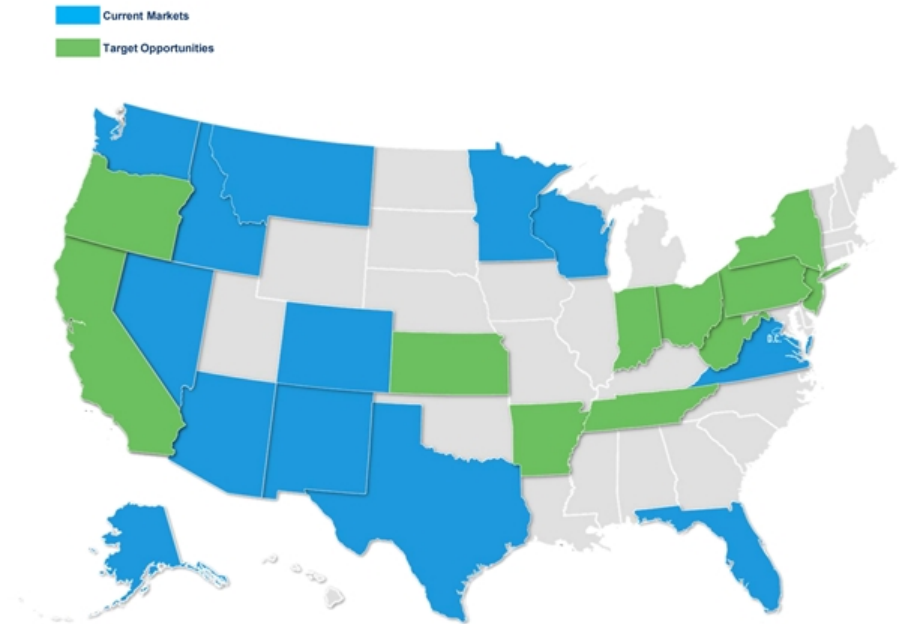
CDCN contracts with payors (e.g., States, Federal Government, Insurers, Veterans Administration) and handles direct care and administrative functions to support the provision of care

## Key Advantages of the Consumer Directed Models

- ✓ **Lowest-cost in-home care option**
- ✓ **High client and family satisfaction**
- ✓ **Less subject to staffing shortage problem**
- ✓ **Strong government and managed care support**
- ✓ **Volume contracts – sticky, certain, scalable**

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# Consumer Direct Care Network Overview



1. ~70k when measured at EOP 2022. ~75k when measured for 12 months ending August 2022.  
 2. Twelve months ended August 2022.  
 3. Including Washington D.C.

# Deep, Experienced and Passionate Leadership Team



**Ben Bledsoe**

President/Chief Executive Officer  
Joined CDCN in 2004



**Beth Peterson**

Vice President/Chief Operating Officer  
Joined CDCN in 2010



Dakota Communities



**Jeff Harriott**

Vice President/Chief Technology Officer  
Joined CDCN in 2012



**Daryl Holzer**

Chief Financial Officer  
Joined CDCN in 2003



**Mickey Ogg**

Chief Development Officer  
Joined CDCN in 2007



**Jack Nichols**

Chief Information Officer  
Joined CDCN in 2018



**Jim McInnis**

Chief Administrative Officer  
Joined CDCN in 2021



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# Section 2

## Industry Perspectives

E V E R Y L I F E .

E V E R Y M O M E N T .

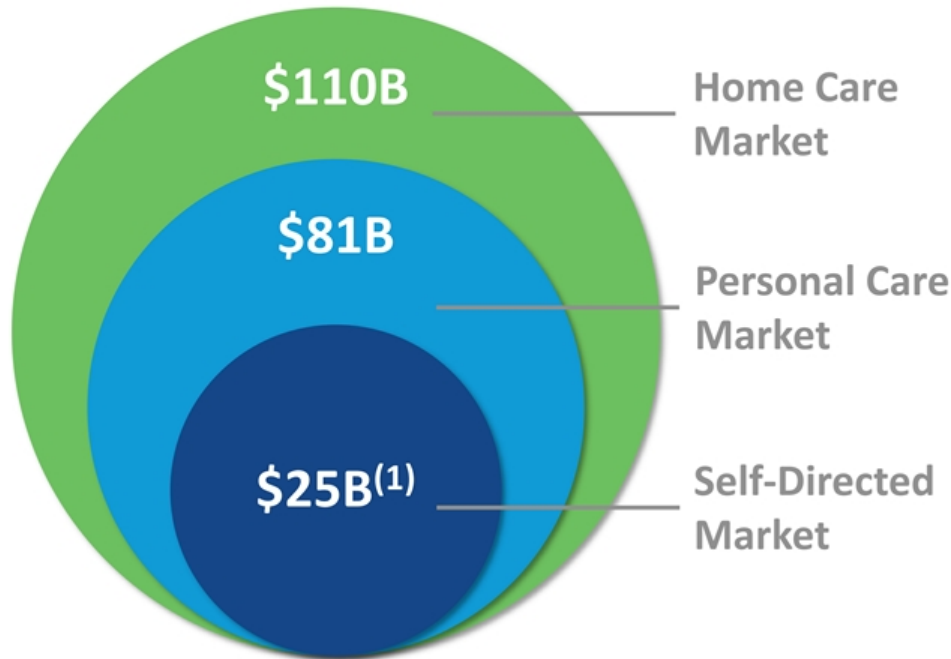
E V E R Y D A Y .



# Home Care Represents a Large and Growing Industry

~\$110B+ Total Addressable Market Expected to Grow at ~5% from 2021 to 2027

Personal Care Market Expected to See Rapid Go-Forward Growth



- 
**Favorable Demographic Trends**  
 Aging population driving market growth
- 
**Lower Cost Care Setting**  
 Driving value to payors and clients
- 
**Increasing Regulatory Support**  
 Expanding the addressable market
- 
**Diversifying Payor Profile**  
 Payor sources expected to shift towards managed care
- 
**Ripe for Disruption & Consolidation**  
 Scale is required for self-directed players to overcome barriers to entry, unlike agency-based traditional care

Source: IBISWorld, Home Care Providers in the US, 2021ed. Proprietary BRG analysis of 100% Transformed Medicaid Statistical Information System (T-MSIS) Medicaid 2019 claims data, based on DUA w/CMS. Management estimates  
 (1) Management estimate

# Personal Care is The Fastest-Growing Segment of Healthcare

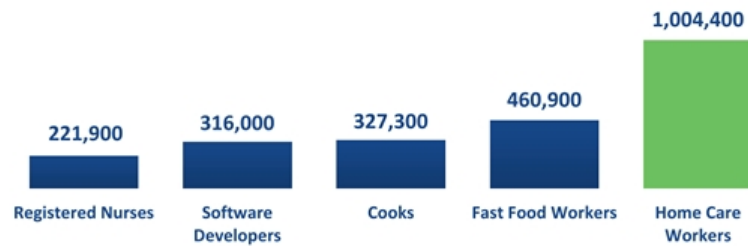


U.S. Home Health Market Growth (4.7% 2021E – 2027P CAGR)

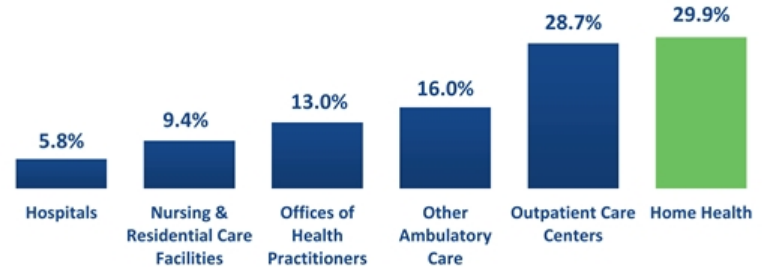
(\$ in billions)



2019A – 2029E Anticipated Job Growth by Occupation



2019A – 2029E Anticipated Employment Growth



Source: IBISWorld, Home Care Providers in the US, 2021ed. Center for Health Workforce Studies, Health Care Employment Projections, 2019-2029, 2021ed. PHI, Direct Care Workers in the United States, 2021ed.

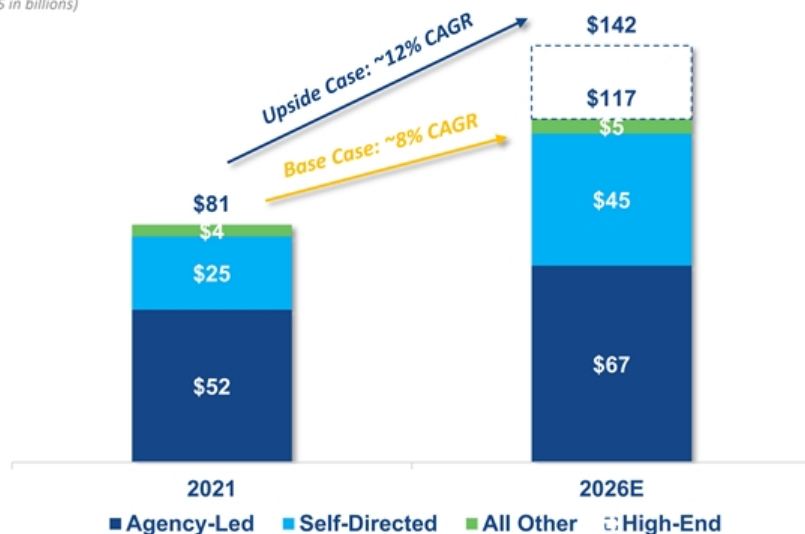


# Self-Directed vs. Agency-Staffed In-Home Care

Self-Directed Care Is Expected to Nearly Double in Five Years... and CDCN is Positioned to Play a Big Part!

## Personal Care Market Opportunity

(\$ in billions)



### Client

Clients benefit from comfort-level and ease-of-living made possible by self-directed in-home care run through a full-service platform. **Self-directed care has the highest client satisfaction due to increased choice and control.** CDCN supports clients to understand their role in self-direction including recruiting and training their caregivers.



### Caregiver

Within self-directed in-home care models, caregivers work closely with clients ensuring the highest level of care. **CDCN accurately pays caregivers, handles benefits functions, ensures compliance** with program requirements, and provides additional caregiver training and support as necessary.



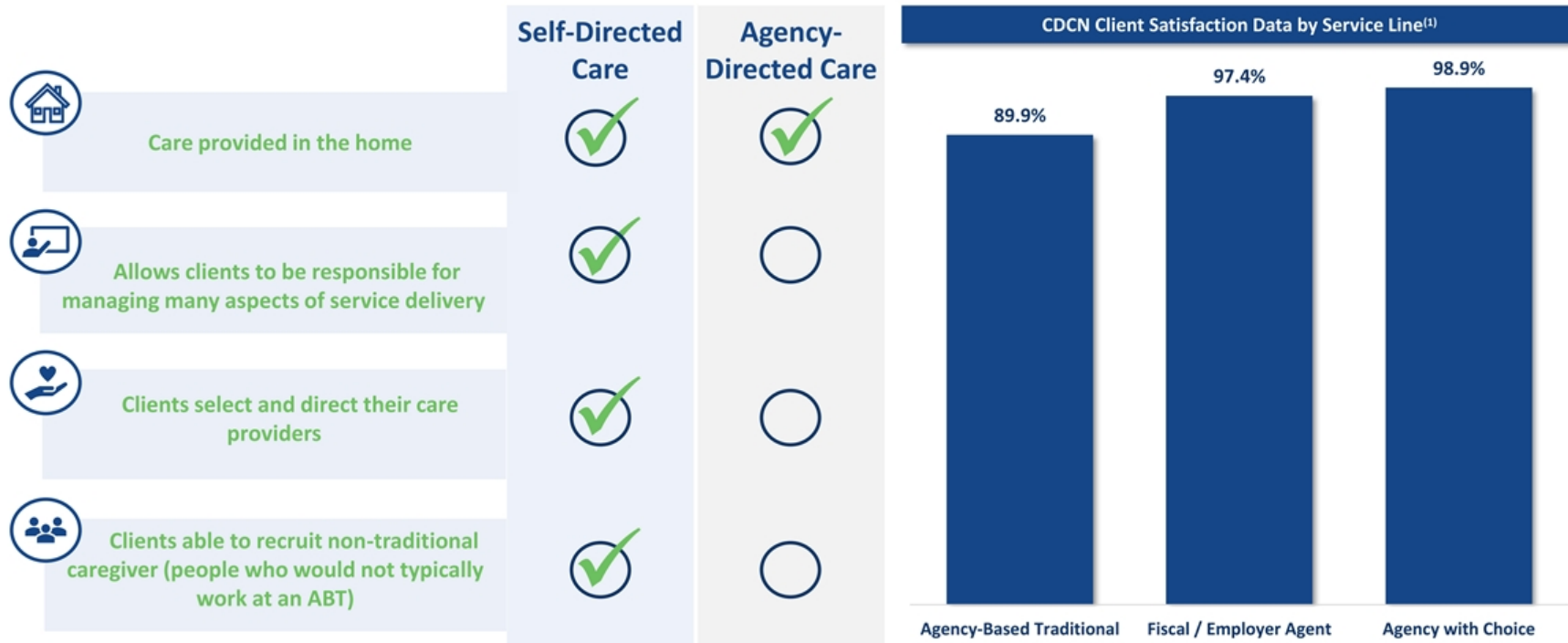
### Payor

Self-directed in-home care is attractive to payors versus facilities-based and agency-based traditional care, due to **reduced cost burden across payor types** and higher client satisfaction. CDCN handles payor relations, acting as the liaison among payor, caregiver, and client.

Source: Proprietary BRG analysis of 100% Transformed Medicaid Statistical Information System (T-MSIS) Medicaid 2019 claims data, based on DUA w/CMS; CDCN data

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# Offering a Comprehensive Suite of Personal Care Solutions





# Section 3

Company Overview &  
Growth Profile

E V E R Y L I F E . E V E R Y M O M E N T . E V E R Y D A Y .

## Scalable Platform with a Strong Infrastructure



### Contract-Driven

Contract-driven approach secures **large blocks of clients**, with ample room to grow within each contract

### Low Staffing Dependency

Model results in **low levels of staffing dependency**, shielded from the industry's acute labor problem, lessening the overhead and inefficiencies involved in recruitment, churn and staffing agency models

### Robust Team

**Deep bench of experienced operating talent** with the capacity to support considerable growth, in addition to scalable, developed and central support services

### Turnkey Infrastructure

Mobile, **scalable, state-of-the-art technology and operational infrastructure** built with growth in mind, to support 200k hourly client volume and specifically designed for self-directed care

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# Developed Platform to Win Future Contracts



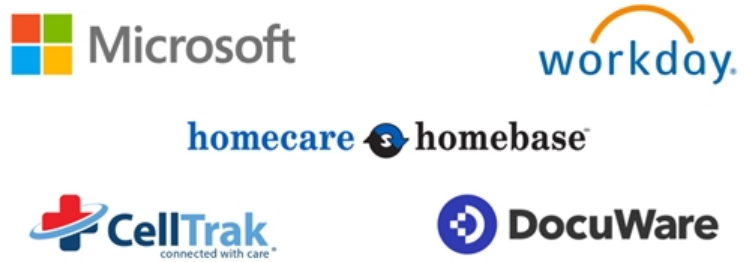
## How CDCN's Technology Platform Wins

- ✓ Integrated systems
- ✓ Designed to sustain heavy growth
- ✓ Claims system processor can be replicated
- ✓ Seamless interchangeability of EVV providers

## Claims Processed Per Year



## Representative Key Vendors



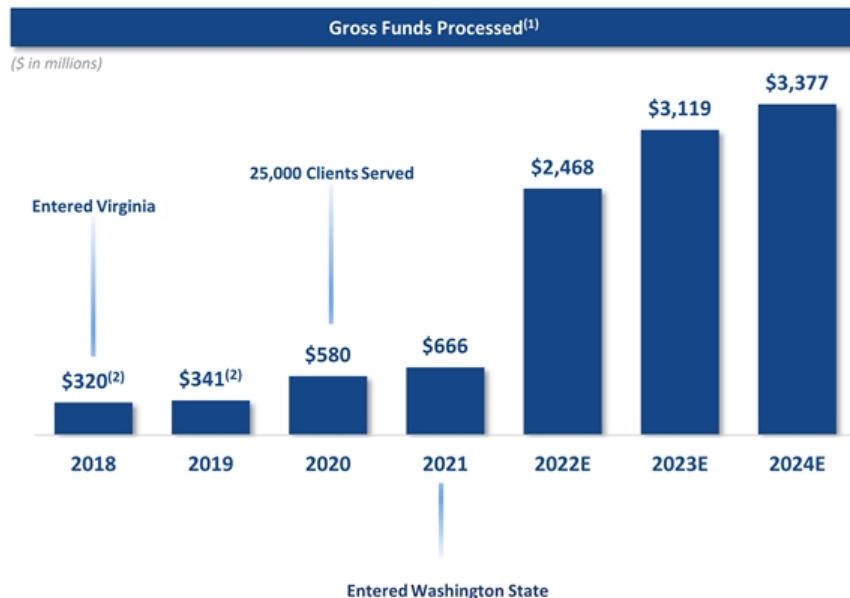
## Payroll Processing Capabilities

2012	2022E
Process payroll for 3,000 people in 24 hours	Currently process payroll for 40,000 people in one hour, with capacity to increase to 200k people per hour



# Long History of Growth through Many Strategic Avenues

Consumer Direct Care Network has grown to be a leading provider of personal care services



- CDCN is one of only a small number of national providers of home care services focused solely on personal care
- CDCN’s specialization has propelled its growth, surpassing much of the market through its ability to adapt and tailor personal care services to its clients’ and payors’ needs
- Public peers provide wider range of services, including hospice and facilities-based assisted living
- CDCN is one of the largest in-home care providers in the nation
- Personal care is a highly fragmented market, driven largely by state contracts and compliance requirements, resulting in a broad set of both organic and inorganic growth opportunities

1. Gross Funds Processed defined as system-wide collections  
 2. Represents unreviewed internal company data

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# Highly Differentiated Contract Driven Business Model



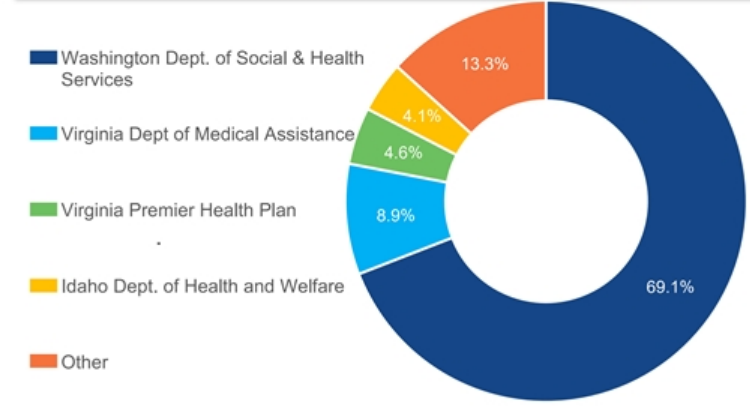
## Representative Contract Summary

Payor	Initial Term	Extension Term	Approximate Clients Served <sup>(1)</sup>
Washington DSHS	7 Years	5 years	47,000
Virginia DMAS	4 Years	2 years	6,500
Virginia Premier Health Plan	4 Years	Automatic annual renewal	5,000
Idaho DHW	Evergreen	Ongoing	3,000

## Representative Payors



## PF 2022 Payor Mix



1. Clients served in the 12 months 9/28/21-9/27/22

# Management's Near-Term Growth Strategy



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# Deep Pipeline of Opportunities

CDCN's strong mix of opportunities across the pre-contract life cycle is expected to drive growth for years to come



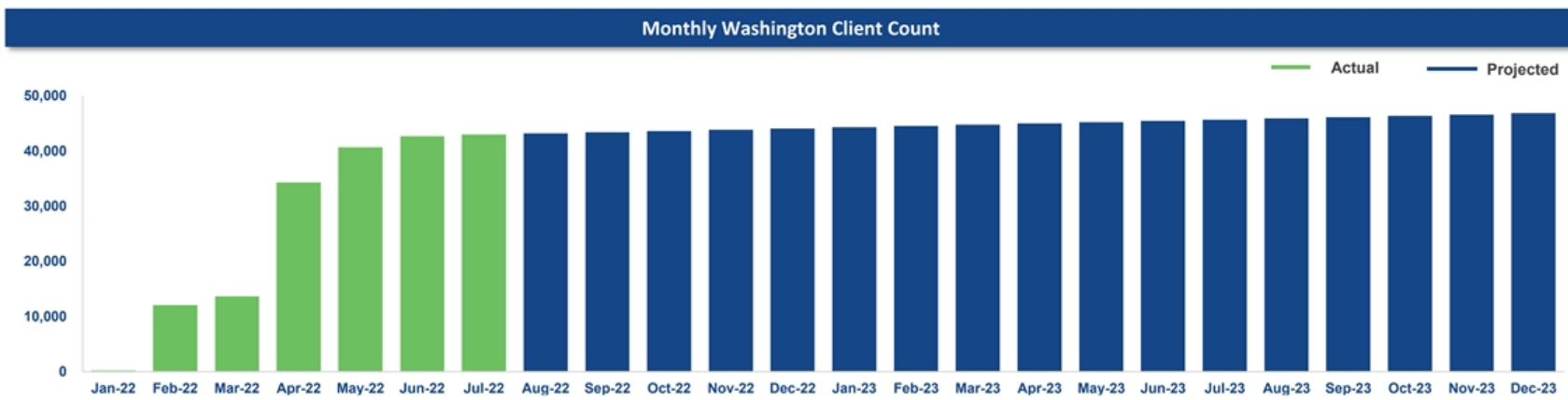
Source: Company data  
 Note: F/EA Is Fiscal/Employer Agent; AWC Is Agency with Choice

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# Expansion into Washington



- ‡ CDCN agreed to a **7-year contract with Washington DSHS which began in February 2022 and has been fully ramped since June 2022**
- ‡ The Company's contract allows it to exercise a **5-year extension option in 2029**, allowing it to service the geography until **at least February 2034**
- ‡ CDCN worked to establish strong relationships with state partners, SEIU and local leaders to ensure implementation steps operated smoothly and customer services was a top priority
- ‡ Management invested heavily in infrastructure early in the Washington onboarding process to support caregiver hiring and client enrollment, resulting in an efficient onboarding during its ramp-up
- ‡ CDCN has produced per-hour statistics since Washington ramp-up in-line with production needed to generate performance in-line with projections
- ‡ Business experiences **higher seasonal second semester (2H) and lower seasonal first semester (1H) based on timing of contractual rate increases** (annual in July) and wage increases (bi-annual in January and July)



Source: Company data

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# Section 4

## Financial Overview

E V E R Y L I F E .

E V E R Y M O M E N T .

E V E R Y D A Y .

## Overview of Key Projection Assumptions / Drivers



<b>Client Growth</b>	<ul style="list-style-type: none"> <li>• Conservatively assumes core business clients remain approximately flat from 2022E to 2024E, and no M&amp;A</li> <li>• Washington clients expected to grow at 6.3% per year in 2023E and 2024E due to organic growth</li> <li>• Projected to win contracts with &gt;3,000 clients in 2023E as the Company capitalizes on pipeline</li> <li>• Supported by industry CAGR of 4.7% from 2021E-2027E and accelerating adoption of self-directed care</li> </ul>
<b>Pricing Uplift</b>	<ul style="list-style-type: none"> <li>• Conservatively assumes core business rates decline modestly from 2021E to 2024E due to shifts in product mix / proportional growth in lower rate arrangements</li> <li>• Washington rates expected to increase at a 3.2% CAGR from 2022E – 2024E</li> <li>• Expected to be significant room for payors to increase rates due to lower cost of self-directed in-home care vs. facility-based models</li> </ul>
<b>Margin Expansion</b>	<ul style="list-style-type: none"> <li>• Gross margin to decline from 13.1% in 2022E to 9.9% in 2024E mainly due to overall product mix and absorbing Washington into the fold</li> <li>• Assumes pre-corporate expenses slightly decrease as a percent of revenue over the projection period, stabilizing in 2023E and 2024E due to business mix changes</li> <li>• Corporate expenses expected to decline from 2.9% in 2022E to 2.6% in 2024E due to operating leverage</li> </ul>

# P&L Summary



(\$ in millions unless otherwise noted)

	2020A	2021A	1H 2022A	2022E	2023E	2024E	'22-'24 CAGR	Commentary on Historical Data
<b>A</b> End of Period Clients (000s)	22	23	68	70	73	79	6.2%	<b>A</b> <b>Clients:</b> Modest year-over-year client growth given a lack of geographic expansion, new units and M&A from year-end 2020 to year-end 2021
% growth	--	4.5%	NM	NM	4.3%	8.2%		<b>B</b> <b>Revenue:</b> 2021 represents a fully ramped Virginia, in addition to the full suite of services offered by the Company today. Pricing expansion, per-client contribution and modest client expansion has contributed to growth
<b>Gross Funds Processed<sup>(1)</sup></b>	\$580	\$666	\$936	\$2,450	\$3,066	\$3,320	16.4%	<b>C</b> <b>Gross Profit:</b> Gross margin profile for the business historically has been altered materially based on service profile
% growth	--	14.8%	NM	NM	25.2%	8.3%		<b>D</b> <b>Adjusted EBITDA:</b> The Company did not see material profitability in the historical period on an Adjusted EBITDA basis, largely resulting from a lack of sufficient scale and lack of expense optimization. Significant Washington-related personnel onboarding in 2H 2021 led to decreased profitability in the period
<b>B</b> Revenue	\$93	\$94	\$597	\$1,679	\$2,266	\$2,499	22.0%	
% growth	--	1.0%	NM	NM	34.9%	10.3%		
<b>C</b> Gross Profit	\$55	\$58	\$95	\$219	\$224	\$247	6.0%	
% margin	59.1%	61.7%	15.9%	13.1%	9.9%	9.9%		
<b>D</b> Adjusted EBITDA	\$4	\$1	\$36	\$82	\$68	\$76	NM	
% margin	4.3%	1.0%	6.0%	4.9%	3.0%	3.0%		

## Commentary on Projected Data

- A** **Clients:** Projected to add ~9k clients over the projection period, with ~5k from growth in Washington contract and ~4k from new contract wins
- B** **Revenue:** Overall rates projected to remain relatively flat over the projection period, leaving room for upside. Revenue growth is largely due to an expected increase in clients supported by strong industrial tailwinds
- C** **Gross Profit:** Margin expected to remain flat (after 2022)
- D** **Adjusted EBITDA:** Decrease in Adjusted EBITDA margin is anticipated due primarily to increased corporate costs and stabilization of Washington

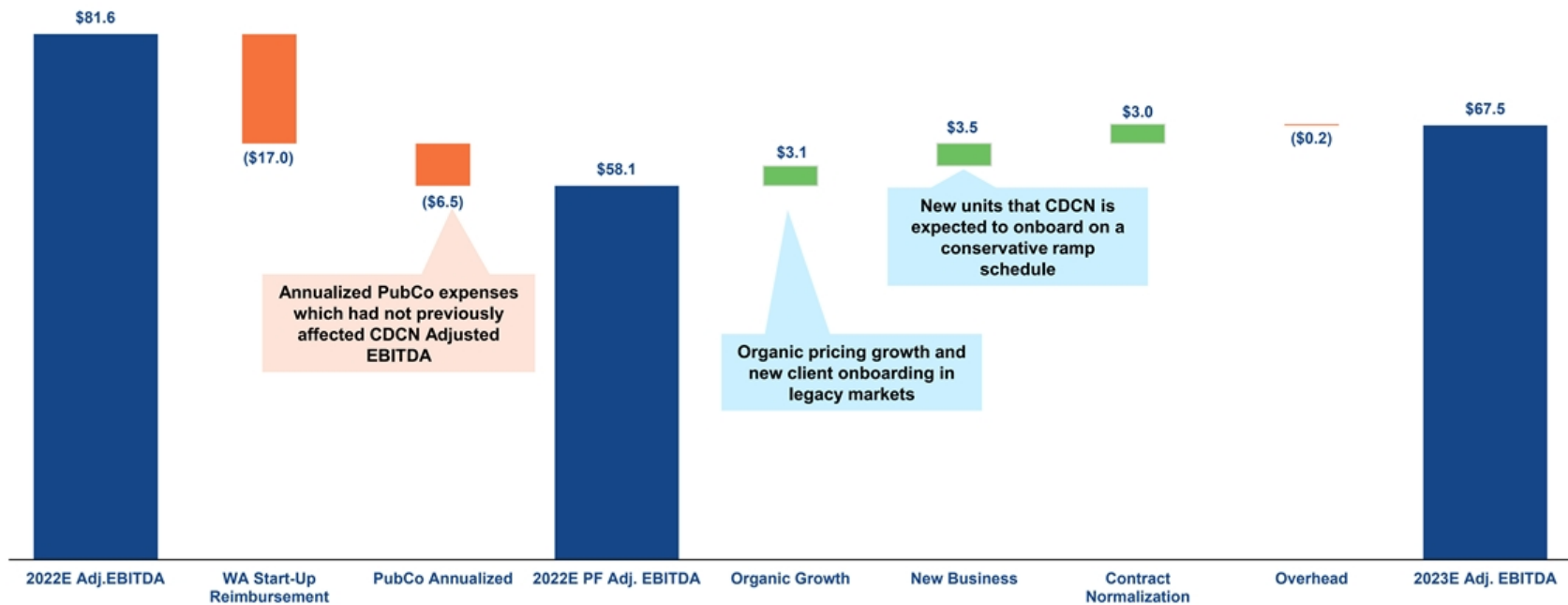
1. Gross Funds Processed defined as system-wide collections

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# Bridging Anticipated 2022 Performance to 2023 Projections



(\$ in millions)



# Transaction Overview



(\$ in millions except for per share items)

Sources & Uses <sup>(1)</sup>		
Sources	\$	%
SPAC Cash in Trust	235	26.9%
Term loan	75	8.6%
Revolving line of credit <sup>(2)</sup>	40	4.5%
Rollover Equity	525	60.0%
<b>Total Sources</b>	<b>875</b>	<b>100.0%</b>
Uses	\$	%
Cash proceeds to CDCN ownership <sup>(3)</sup>	118	13.6%
Refinancing of existing debt	20	2.3%
Rollover equity	525	60.0%
Fees & expenses	55	6.3%
Management bonuses	8	0.9%
Cash to balance sheet	148	16.9%
<b>Total Uses</b>	<b>875</b>	<b>100.0%</b>

Illustrative Valuation Overview <sup>(1)</sup>	
Illustrative Share Price	\$10.20
Total Shares	84.1
<b>Equity Value</b>	<b>\$858</b>
Plus: Pro Forma Net Debt	(\$167)
<b>Implied Enterprise Value<sup>(4)</sup></b>	<b>\$691</b>

2023E Valuation Analysis	Metric	Multiple
2023E Adjusted EBITDA	\$67.5	10.2x
2023E Revenue	\$2,266	0.3x

## Post-Transaction Equity Ownership<sup>(2)</sup>

	Shares (in M)	
CDCN	51.4	61.1%
DTRT Public Shareholders	23.0	27.3%
Sponsor	5.8	6.9%
Management <sup>(5)</sup>	3.5	4.2%
Other	0.4	0.5%
<b>Total Shares</b>	<b>84.1</b>	

1. Assumes the transaction closes on June 30, 2022 and no redemptions.  
 2. The revolving line of credit has an incremental borrowing capacity of \$35 million for a total borrowing capacity of \$75 million.  
 3. Pursuant to the Merger Agreement, the cash consideration to the CDCN Equity holders will be \$118 million, less \$18 million of fees to be paid out of such amount to the Company's financial advisor.  
 4. Implied Enterprise Value calculated using \$10.20 price of cash held in trust.  
 5. In connection with the closing of the Business Combination, the Company will adopt the Incentive Equity Plan. The Board has approved grants under the plan to certain members of management consisting of unrestricted and restricted stock unit awards. These awards vest immediately upon issuance but their issuance is subject to registration which is expected to occur 90 days following the closing.

# Comparable Public Companies Valuation Benchmarking

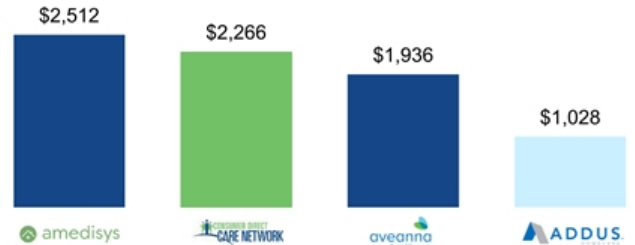


2022E 2022E PF

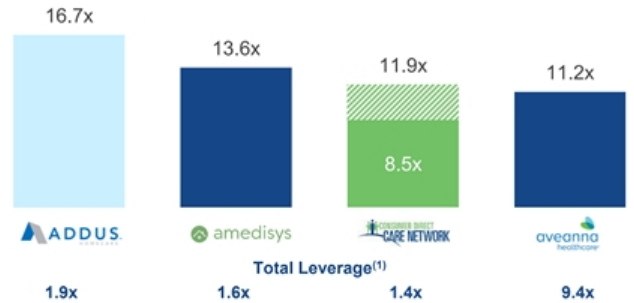
## Commentary

- ✓ One of the largest home health providers in the US
- ✓ Larger revenue and client base than closest personal care peer, Addus
- ✓ Well capitalized with attractive net leverage profile

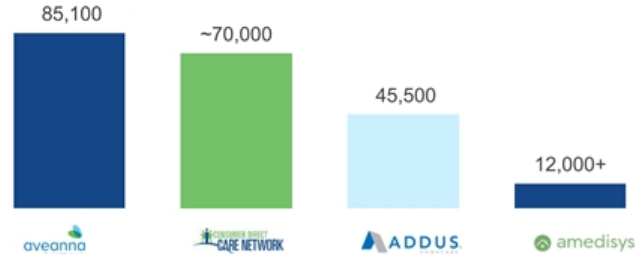
## Total 2023E Revenue



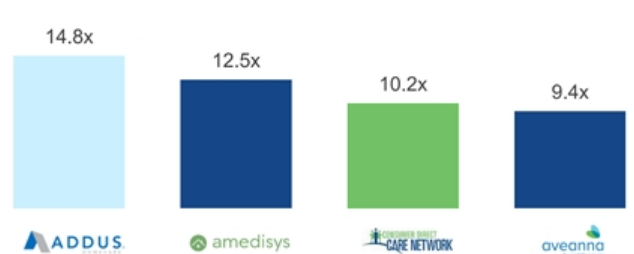
## TEV / 2022E Adjusted EBITDA



## Total EOP Clients



## TEV / 2023E Adjusted EBITDA



Most Direct Public Peer in Personal Care

Note: Market data as of 10/05/2022; CDCN data is implied based on a \$10.00 share price  
 Source: Company materials, company filings, FactSet, Wall Street research  
 1. CDCN balance sheet pro forma for transaction

# Closing Remarks



DTRT HEALTH  
ACQUISITION CORP.



Operator of Scale in the Fastest Growing Segment of the Economy

Attractively Structured Contract-Driven Business with  
Government as the Payor

Predictable, Simple Economic Model

Benefits of Personal Care With Less Exposure to Labor Shortage  
Risks



# Appendix

## GAAP Reconciliation

E V E R Y   L I F E .                      E V E R Y   M O M E N T .                      E V E R Y   D A Y .

## GAAP Reconciliation to Adjusted EBITDA



(\$ in millions unless otherwise noted)

	Six Months Ended June 30,	Year Ended December 31,	
	2022	2021	2020
Net income (loss)	\$38.7	\$1.4	\$10.8
<i>Adjusted for:</i>			
Depreciation and amortization	2.6	1.8	1.6
Interest expense, net	1.4	2.0	1.1
Amortization of capitalized cloud computing implementation costs	1.1	1.6	0.3
Amortization of contract fulfillment costs	0.7	-	-
PPP loan forgiveness	(10.0)	-	-
Provider relief funds	-	(5.8)	(10.4)
Other non-recurring adjustments <sup>(1)</sup>	1.2	0.3	0.4
Adjusted EBITDA	\$35.7	\$1.3	\$3.8

1. Represents one-time bonuses for startup of a new contract; professional fees; certain information technology costs; and other miscellaneous non-recurring costs

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