Investor Presentation

OTCQB:BICX January 2022

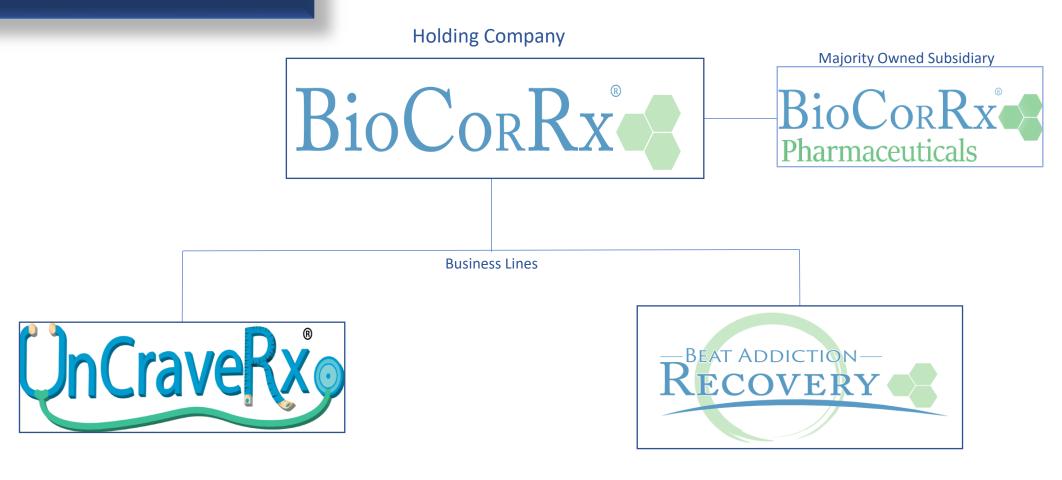


Safe Harbor Statement

- This presentation is not intended to be promotional but is intended for confidential investor and potential investor overview information only.
- In addition to historical facts or statements of current condition, this presentation, may contain forward-looking statements. Forward-looking statements provide BioCorRx' current expectations or forecasts of future events.
- These may include statements regarding anticipated scientific progress on its research programs, development of potential pharmaceutical products, interpretation of clinical results, prospects for regulatory approval, manufacturing development and capabilities, market prospects for its products, sales and earnings guidance, prospects for and the adequacy of intellectual property protection and the risks and uncertainties related to intellectual property challenges and other statements regarding matters that are not historical facts.
- You may identify some of these forward-looking statements by the use of words in the statements such as "anticipate," "estimate," "expect," "project," "intend," "plan," "become," "believe" "will" or other words and terms of similar meaning. BioCorRx' performance and financial results could differ materially from those reflected in these forward-looking statements due to general financial, economic, regulatory and political conditions affecting the biotechnology and pharmaceutical industries as well as more specific risks and from time to time.
- Given these risks and uncertainties, any or all of these forward-looking statements may prove to be incorrect. Therefore, you should not rely on any such factors or forward-looking statements. Furthermore, BioCorRx does not intend to update publicly any forward-looking statement, except as required by law. The Private Securities Litigation Reform Act of 1995 permits this discussion.
- Although the Company believes that its expectations are based on reasonable assumptions, the actual results that the Company may achieve may
 differ materially from any forward-looking statements, which reflect the opinions of the management of the Company only as of the date hereof.

Mission Statement

BioCorRx is committed to helping all afflicted by addictive disorders through comprehensive medication-assisted treatment programs designed to improve their lives as well as the lives of their loved ones. We instill hope that achieving long term success is possible.



BioCorRx -

Investment Highlights

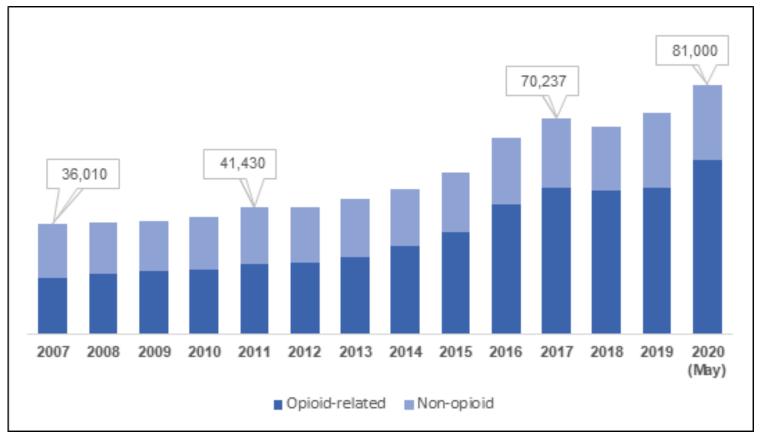
- ✓ The Company's business lines include two operational programs and one R&D subsidiary:
 - BioCorRx Pharmaceuticals, Inc. (R&D subsidiary)
 - Seeking FDA approval for BICX104, an implantable pellet of naltrexone for opioid and alcohol use disorders via abbreviated 505(b)(2) regulatory pathway
 - Received nearly **\$9.2 million** to date of non-dilutive funding from NIH/NIDA (National Institutes of Health and National Institute on Drug Abuse)
 - Received FDA clearance this year of Investigational New Drug (IND) application for BICX104
 - Preparing for human trial currently
 - Acquired patent application from Calista Therapeutics which covers solid implant formulation for drug delivery
 - Filed patent application with the U.S. Patent and Trademark Office and the Russian Patent Office for a biodegradable implant including naltrexone
 - Beat Addiction Recovery, Medication-Assisted Treatment Program
 - \$16.4 billion "addiction treatment" market
 - \$1.9 billion "medication assisted treatment" market and expected to reach \$4.5 billion by 2026
 - Combines mobile technology and live peer support with medications used to treat addiction
 - UnCraveRx®, Weight Management Program
 - ❖ \$7 billion "medically supervised" weight loss market
 - \$52 billion "corporate wellness" market
 - Exploring opportunities and partnerships to include meal options
- ✓ Intellectual Property multiple formulations of naltrexone and other delivery technology

The Addiction Epidemic

- According to the National Survey on Drug
 Use and Health (NSDUH), 19.7 million
 American adults (aged 12 and older) battled
 a substance use disorder in 2017.*
- Almost 74% of adults suffering from a substance use disorder in 2017 struggled with an alcohol use disorder.
- About 38% of adults in 2017 battled an illicit drug use disorder.
- That same year, 1 out of every 8 adults struggled with both alcohol and drug use disorders simultaneously.
- In 2017, 8.5 million American adults suffered from both a mental health disorder and a substance use disorder, or cooccurring disorders.

[*]. Substance Abuse and Mental Health Services Administration. (2018). Key Substance Use and Mental Health Indicators in the United States: Results from the 2017 National Survey on Drug Use and Health.

US drug overdose deaths 2007-2020



Source: Data from National Institutes of Health - National Institute on Drug Abuse (NIDA), 2021

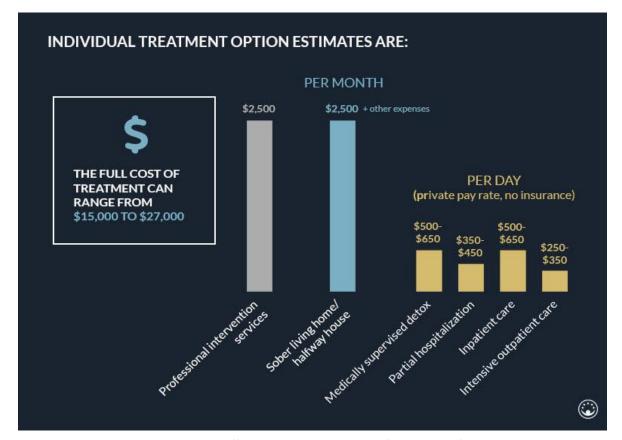
U.S. Drug Overdose Deaths Hit Record During COVID-19 Pandemic

More than 83,000 drug overdose deaths occurred during the 12 months ending in May 2020, the most ever recorded during a one-year period, according to the Centers for Disease Control and Prevention.

Addiction Treatment Market

Drug abuse and addiction cost American society more than \$740 billion annually in lost workplace productivity, healthcare expenses, and crime-related costs.*





Source: https://americanaddictioncenters.org/alcohol-rehab/cost

^{*}Source: https://www.drugabuse.gov/drug-topics/trends-statistics/costs-substance-abuse

MAT Medications

The Most Common Current MAT Medications Include:

Naltrexone

- FDA approved in 1984 long track record of safety
- Non-narcotic and nonaddictive
- NOT opioid derived (antagonist)
- Significantly blocks cravings for drugs and alcohol
- No withdrawals when ceasing use

Methadone

- FDA approved
- Narcotic and addictive significant withdrawals when ceasing use
- Daily Dose
- Opioid Derived (full agonist)

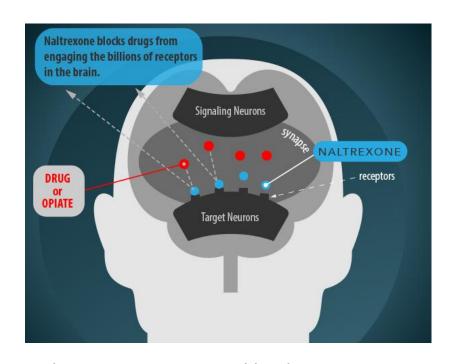
Suboxone/Buprenorphine

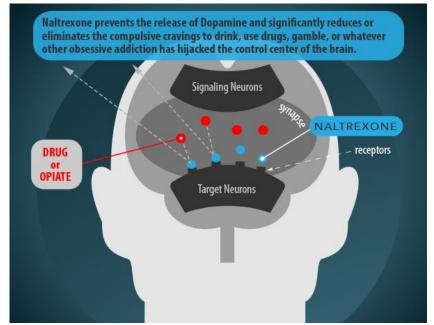
- FDA approved
- Narcotic and addictive significant withdrawals when ceasing use
- Daily Dose, monthly injectable, long-term implant
- Opioid Derived (partial agonist)

"Medication-assisted treatment (MAT) – the use of medication combined with counseling and behavioral therapies is one of the major pillars of the federal response to the opioid epidemic in this country. This type of treatment is an important tool that has the potential to help millions of Americans with opioid use disorder regain control over their lives," said former FDA Commissioner, Scott Gottlieb, M.D.

Naltrexone Science

Naltrexone is a unique medication which binds with receptors and prevents the release of Dopamine – reducing cravings for alcohol and drugs





Naltrexone was approved by the FDA in 1984, in tablet form, for opioid addiction and approved subsequently in 1994 for alcohol use disorders (AUD). It was later approved again in the injectable form around 2010.



BioCorRx® Pharmaceuticals Inc.

- Focusing on the development and regulatory approval of medications utilizing 505(b)(2) pathway and/or in the addiction treatment industry
- The lead candidate is a naltrexone pellet implanted subcutaneously being developed to address both opioid and alcohol use disorders
- Received FDA Clearance of Investigational New Drug (IND) application for BICX104
 - The first-in-human clinical trial for BICX104 is expected to start in 2022
- Seeking FDA approval for BICX104 for both alcohol and opioid use disorders
- Acquired patent application from Calista Therapeutics which covers solid implant formulation for drug delivery
 - IP complements the Company's current IP portfolio and may be used for improvements to current naltrexone formulations owned by the Company or licensed to third parties for use with other molecules where solid implant formulations are desired
- Filed a patent application with the U.S. Patent and Trademark Office and the Russian Patent Office for a biodegradable implant including naltrexone
 - Several of the claims in the application are intended to cover BICX104, an implantable biodegradable naltrexone pellet for the treatment of OUD
- Evaluating several other products in the addiction and pain management space



Key Differences of Naltrexone Pellet (Implant)*

- ✓ Being developed to address both alcohol and opioid use disorders
- ✓ Biodegrades eliminating the need to remove after implantation
- ✓ Removeable in the event narcotic pain relief is needed due to injury or elective surgery
- ✓ Naltrexone in any form is non-addictive
- ✓ Naltrexone does not cause withdrawals if discontinued
- ✓ Naltrexone in any form may be effective against other obsessive-compulsive disorders such as sex addiction, gambling, and food addiction
- √ Goal is 3 months of therapeutic release after one administration
- ✓ Addresses the very common issue of patient non-compliance with adherence to daily or monthly administration of other naltrexone products



^{*}These statements have not been evaluated by the FDA

R&D & FDA Objectives & Milestones

- > Seeking FDA approval of implantable naltrexone pellet
- Formed a Scientific Advisory board, includes Dr. David Gastfriend, Dr George Woody, and Dr. Evgeny Krupitsky Gastfriend previously served as VP of Scientific Communications for Alkermes; heavily involved with Vivitrol® and Drs. Woody and Krupitsky are frequent principal investigators for naltrexone implants
- ➤ Designed study with the help of the late Dr. Bal S. Brar over 25 years of experience for drug and device development as well as worldwide regulatory submission of 50 INDs/510K's and 505(b)(2)'s; and approval of 8 NDA's
- > Partnered with Innovative Science Solutions, LLC, a leading scientific consulting firm, to help guide the Company's regulatory strategy for FDA submission
- > Expanded development and manufacturing relationship with Recro (formerly IriSys) to support BICX104
 - To provide analytical validation services and cGMP manufacturing of registrational batches of BICX104 to support BioCorRx's potential filing of a **New Drug Application**
- > 505(B)(2) pathway deemed acceptable by FDA
 - As a result of meeting, seeking dual indication for both alcohol and opioid use disorders
 - Preclinical and clinical studies for safety, pharmacokinetics, and human factors (not planning to do efficacy studies per FDA meeting)
- > Received National Institute on Drug Abuse (NIDA) grant of approximately \$5.7 million
- > Received FDA Clearance of Investigational New Drug (IND) application for BICX104
- > Awarded approx. \$3.5 million second phase of NIDA Grant for the first in human clinical trial of BICX104 for total of nearly \$9.2 million in grant funding to date







Medication-Assisted Treatment Program

MAT programs may utilize naltrexone, or other medications such as buprenorphine and methadone.

Proprietary Cognitive Behavioral Therapy (CBT) Program

- Beat Addiction Recovery offers CBT through its proprietary 35 module curriculum that can be used by the patient's therapist.
- Each module is associated with a key area essential to treatment of substance abuse disorders.
- The modules were written by licensed addiction therapists with decades of combined experience.
- Beat Addiction Recovery's CBT modules can be used by patients that are being treated with or without MAT.

Peer Support App

- Beat Addiction Recovery offers live peer support 24/7 via a HIPAA compliant smartphone app.
- Patients are paired with peers with similar profiles, e.g. gender, age, substance of abuse.
- The app makes it convenient for patients to work on their recovery within the framework of their lives via text, phone and video.
- It is available to patients for 6 months and can be extended.

Beat Addiction Recovery Mobile App

- Available on the Apple App Store & Google Play
- "Realtime" virtual interaction with Peer Recovery Coach
- Geo Location Tracker/optional
- Mood Tracker
- Activity Tracker





UnCraveRx® Weight Loss Program







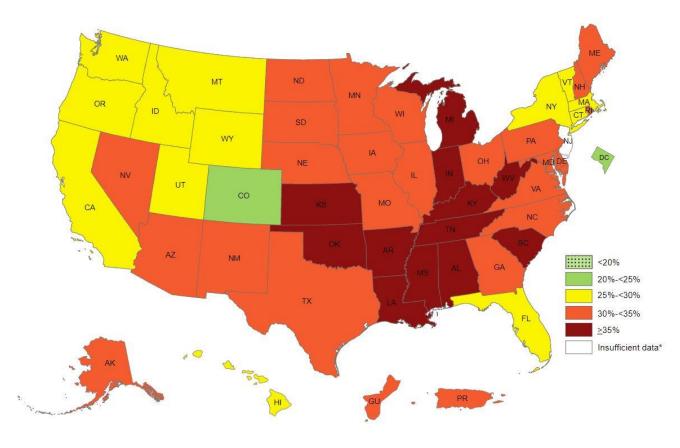




Obesity Statistics

- All states and territories had more than 20% of adults with obesity.
- 20% to less than 25% of adults had obesity in 1 state (Colorado) and the District of Columbia.
- 25% to less than 30% of adults had obesity in 13 states.
- 30% to less than 35% of adults had obesity in 23 states, Guam, and Puerto Rico.
- 35% or more adults had obesity in 12 states (Alabama, Arkansas, Indiana, Kansas, Kentucky, Louisiana, Michigan, Mississippi, Oklahoma, South Carolina, Tennessee, and West Virginia).
- The Midwest (33.9%) and South (33.3%) had the highest prevalence of obesity, followed by the Northeast (29.0%), and the West (27.4%).

Prevalence Of Obesity Among Adults By State, 2019



Source: The Behavioral Risk Factor Surveillance System (BRFSS) 2019



Weight Loss Market



Estimated \$190.2 billion

spent annually on health costs of obesity-related illnesses



Americans spend \$33 billion

each year on weight loss products



160 million Americans

are obese or overweight

UnCraveRio Medically Assisted Weight Loss Program

3-Month Weight Loss Program



Medical

- Medical evaluation and assessment
- Sustained-Release Naltrexone Pellet Therapy
- MD Involvement
- Pellets are placed subcutaneously under the fatty tissue of skin through a very small incision
- Simple outpatient procedure by licensed medical professional
- Procedure only takes 20-30 minutes and begins to work within hours
- Substantially reduces cravings
- Intended to be used as an adjunct to reducedcalorie diet and lifestyle behavioral support

On Demand Virtual Support

Virtual Health and Wellbeing emphasizing personalized human & digital support

- Participants gain access to concierge on-demand platform with:
- Nutritionists
- Fitness Coach

Behavioral Group Support

Virtual Lifestyle Group interaction

My UnCraveRx®Partners with Employers to Promote a Healthy Lifestyle for Employees

Why is it important to focus on Wellness?

- Obesity and chronic disease drives up costs medical costs, absenteeism costs, disability, and workers compensation.
 - ✓ Workers spend much of their lives at work
 - Workplace setting has a significant impact on employee behaviors, attitudes and weight

The Objective:

- ✓ Improve overall wellness of employees.
- ✓ Lead the way to a healthier lifestyle
- ✓ Increase productivity
- ✓ Reduce medical costs and prevent chronic disease







My UnCraveRx App

CONCIERGE & Personalized Virtual Support Access to Including:

LIVE SUPPORT GROUPS: patients can share their experiences, ask questions and motivate each other in real time

UNLIMITED MESSAGING: 24/7 access to nutrition specialists are available to answer questions anywhere, anytime

ON-DEMAND LIBRARY: 24/7 access to nutrition, lifestyle, and fitness classes as well as recipes and meal plans

MONITORING TOOLS: track food intake, diet adherence, and weight loss









BioCorRx® Corporate Profile



Management Team



Lourdes Felix -CEO, CFO and Director

Joined BioCorRx® Inc. in October 2012 as CFO and was promoted to CEO in March 2020. Ms. Felix is corporate finance executive with 30 years combined experience in capital markets, public accounting and the private sector. She has been instrumental in capital procurement and completing multi-million-dollar equity financings. Demonstrated expertise as a healthcare management organization (MSO) provider in aligning individual physicians and group practices with the resources and non-clinical services they need to grow and scale their practice in all phases and enhance revenues including tactical leadership in support of operational growth strategies.



Brady Granier - President and Director, CEO of BioCorRx Pharmaceuticals

Over 7 years with BioCorRx® Inc. focusing on R&D initiative, assembled a team of addiction experts worldwide, extensive experience with treatment of patients using naltrexone. Prior to joining BioCorRx, Brady spent 12 years in media sales and business development for Clear Channel Media and Entertainment; former Healthcare Category Manager. Has over a decade of experience in Healthcare and Behavioral Health Field.



Tom Welch – Executive Vice President

Tom was a founder and Director of Operations at TAK Management from 2012 until 2015. TAK Management was responsible for the streamlining of clinical and financial operations for Start Fresh Alcohol and Opioid Recovery Clinic Inc. Mr. Welch led a team that completely reorganized clinic operations. Tom's responsibilities included Implementation of policies and procedures as well as creation of standard practice protocols integrated into multiple locations. Additionally, Tom Implemented traditional media and Social Marketing strategies. Tom was also successful in negotiating reimbursement with major private insurance corporations across the U.S.

Key Advisors/Outside Directors

Kent Emry, Outside Director & Chairman

• During the past twelve years, Kent Emry has been involved in the healthcare industry. Mr. Emry has specialized in identifying and securing financing for the acquisition of troubled skilled nursing and rehabilitation facilities, which may have been in violation of federal regulations with a high probability of being closed. He was able to re-structure these facilities both on a clinical and financial level resulting in a profitable facility. His vast knowledge of operational systems and his creation and development of policies and procedures has been key to his long-term success in the healthcare industry. In addition, Mr. Emry has extensive experience in contract negotiations with public, private, federal and state healthcare reimbursement entities including HMOs, Medicare, Medicaid, VA and Military contracting and billing.

Louis Lucido, Outside Director

• Formerly Senior Advisor and Chief Operating Officer of DoubleLine Group, LP, a large investment firm with over \$100 billion in assets under management. Recently retired in December 2018 and was one of the five founding partners. He was previously at TCW, where he served as a Group Managing Director. Prior to joining TCW in 2001, Mr. Lucido was the Chief Investment Officer for Delphi Financial Group (DFG) and was on several subsidiary boards. Before DFG, he was the Chief Operating Officer and Secretary for Hyperion Capital Management and was also a member of the Resolution Trust Advisory Committee. Since February 2013, he has served as a member of the Board of Directors of CASA of Los Angeles and is the current Chairman. Additionally, he was elected in 2013 and currently serves on the Boards of Junior Achievement, Southern California, 826LA and the Lupus Research Alliance (formerly the Alliance for Lupus Research). Mr. Lucido received his MBA in Management and Finance from New York University, and was a member of the Dean's Advisory Board of the N.Y.U. Stern School of Business.

Luisa Ingargiola, Outside Director

 Presently serves as Chief Financial Officer of Avalon GloboCare, a leading global developer of cell-based technologies and therapeutics, where she helped navigate its Nasdaq uplisting in 2018. Luisa is a Board Director and Audit Chair of Electra Meccanica, a Nasdaq-listed company designing and manufacturing electric vehicles; she also serves on the board of Globe Photos, a leader in licensed sports photographic prints and iconic pop culture imagery; and she serves as director of Operation Transition Corporation, a strategic consulting and advisory firm that places ex-military special operations forces into corporate careers. Luisa holds a Bachelor of Science in Finance from Boston University, and an MBA in Health from the University of South Florida.

Joseph Galligan, Director & Senior Advisor

Mr. Joseph John Galligan, CFA was formally an Executive Vice President and Portfolio Manager at DoubleLine Capital LP, an investment firm with over \$100 billion in assets under
management, where he was one of the five founding partners. Previously, Mr. Galligan served as Senior Vice President of Apex Mortgage Capital Inc. He was also a Managing Director
and Portfolio Manager at The TCW Group, Inc. Mr. Galligan held senior roles at Smith Barney, First Boston, and Scudder Stevens & Clark. He is a Chartered Financial Analyst and holds a
B.S. in Economics with a concentration in Finance from the Wharton School of Business at the University of Pennsylvania.

Medical and Scientific Advisory Consultants

David R Gastfriend, M.D. is a psychiatrist and internationally recognized addiction treatment researcher, policy expert and technology developer. Gastfriend led research on the American Society of Addiction Medicine (ASAM) criteria for placing patients in addiction treatment programs, which is now standard in more than 30 U.S. states. After 25 years at Harvard Medical School and directing the Addiction Research Program at Massachusetts General Hospital, he was Vice President for Scientific Communications at the pharmaceutical company Alkermes® from 2004 to 2013.

George E. Woody, M.D., is Professor in the Department of Psychiatry at the University of Pennsylvania and Principal Investigator of the Delaware Valley Node of the NIDA Clinical Trials Network. He is a reviewer for many journals and has authored or co-authored over 200 publications including a recent JAMA publication on Suboxone treatment of opioid addicted youth.

Evgeny M. Krupitsky, M.D., Ph.D., D.M.Sc., serves as a Vice-Director for Research and the Chief of the Department of Addictions at Bekhterev National Medical Research Center for Psychiatry and Neurology and Chief of the Laboratory of Clinical Psychopharmacology of Addictions at St. Petersburg State Pavlov Medical University, Russia. Krupitsky has received multiple national and international awards He has been published extensively in Russian and international peer reviewed psychiatric journals has been a Co-Principal Investigator of several NIDA and NIAAA grants.

Dr. Jie Shen, Ph.D., is an Assistant Professor in the Departments of Biomedical and Pharmaceutical Sciences and Chemical Engineering at the University of Rhode Island (URI). Dr. Shen's current research areas of interest include: 1) sustained and/or targeted brain and ophthalmic drug delivery to improve bioavailability and reduce side effects of a variety of therapeutics; 2) in vitro dissolution testing, as well as the development of in vitro-in vivo correlation (IVIVC) for complex dosage forms such as microspheres, implants, and nanoparticles; and 3) manufacturing of advanced drug delivery systems such as liposomes, and microspheres. Dr. Shen was the recipient of AAPS Postdoctoral Fellow Award in 2014 and IPEC-Americas Foundation Emerging Researcher Award in 2017.

Joseph DeSanto, M.D. is a Board-Certified physician who practices Addiction Medicine, and he has dedicated his life to the pursuit of treating those who suffer from the disease of Addiction. He offers hope and solution when there is none. He is a grateful recovering addict, and he understands what it means to suffer from this deadly disease. His patients have access to the latest brain scanning, blood tests, and nutritional assessments which allows him to streamline their treatment plan based on their individual needs. Dr. DeSanto is an active member in several 12 Step Recovery Programs.

George Fallieras, M.D. grew up in Tampa, Florida, and graduated Phi Beta Kappa from the University of Florida. He obtained his M.D. from the University of Tennessee and did his residency training in New Orleans at the Tulane Health Science Center/Charity Hospital. Dr. Fallieras is double board certified in both Internal Medicine and Pediatrics. He has extensive emergency room, hospital inpatient, ICU, inpatient and outpatient detoxification, and outpatient recovery experience. He has served as the Medical Director for multiple large Inpatient Hospitalist programs.

Steven M. Weisman, PH.D - Innovative science Solutions Dr. Weisman is the head of ISS's Clinical and Regulatory Support practice, he focuses on the development of scientific and regulatory approaches that increase a product's market potential. He's an invaluable resource for scientific litigation support for products in crisis and, under his guidance, ISS has encouraged firms to proactively monitor the safety and effectiveness of their products and develop systems that reduce liability claims. Dr. Weisman has over 20 years of experience in pharmacology, toxicology, pharmaceutical product development, clinical and regulatory affairs, and marketing evaluation and communication.

Andrew Mallon, PhD, Consultant CSO is a Biotech entrepreneur establishing therapeutics in diseases with high unmet need. Track record of success in early and midstage programs in partnerships with Pharma. Lectures at Yale University for NIDA's 121 US-wide faculty opioid program. PhD in neuroscience, expert in opioids and addiction. Ran clinical opioid replacement therapy programs.

Priya Jambehekar, M.Sc. in Organic & Biochemistry and M.S. in Pharmacy is a drug development entrepreneur with over 25 years of executive experience in worldwide regulatory, quality, clinical and pharmacovigilance operations, as well as early and late-stage development product registration and commercial support. She has held positions including Global Senior Vice President of Regulatory & Quality Operations at Paramount BioSciences, Global Vice President at Ethicon, a Johnson & Johnson company, and Worldwide Vice President of Regulatory and Government Relations at Alkermes

Jeffrey M. Witkin, Ph.D. is a Research Fellow with RespireRx Inc, and the cofounder of the Laboratory of Antiepileptic Drug Discovery where he holds a research appointment at Ascension St. Vincent Hospital in Indianapolis, Indiana. He is an Adjunct Professor in the Department of Chemistry and Biochemistry, University of Wisconsin-Milwaukee, Milwaukee, WI. He heads the Witkin Consulting Group that advises companies working on the development of novel therapeutics in the areas of neurology and psychiatry. For 17 years prior,

Dr. Ashok Kumar MSc DIOD FRCPath has over 25 years' experience in drug delivery development and production. Dr. Kumar is a serial entrepreneur following his early days in a clinical and research environment. He has spent the best part of 20 years working on developing and improving naltrexone implantable technology in conjunction with the end users. Dr. Kumar has worked on various formulation for extended release and continues to be regarded as one of the key individuals in his field. Today as well as his leadership roles he runs a number of rehabilitation clinics throughout Europe and sits as Chairman in all his ventures.

Key Statistics



OTCQB: BICX

Current Price: (01/03/22): \$3.91

Shares Outstanding (11/12/21): 6.7 M

Market Cap (01/03/22): \$26.2 M

Fiscal Year Fnd: December 31

Insider Ownership (3/31/21): 37.5%



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BioCorRx Anno

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February 21, 2017 & Marcus Heath

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Dr. Brar has over 25 years of exp

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market. Dr. Brar's experience in

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GlaxoSmithKline, as Director of

Allergan, as VP of Drug Safety, h

and approval of Botox, Alphaga

For the past 10 years Dr. Brar h

the fields of nephropathy, onco

Brar variously served on the Bo

Officer, Dr. Brar has a Ph.D. in T

India with finance training from

BioCorRx Receives FDA Clearance of Investigational New Drug (IND) Application for BICX104, its Implantable Naltrexone Pellet for the Treatment of Opioid Use Disorder

ANAHEIM, CA, May 10, 2021 (GLOBE NEWSWIRE) -- via NewMediaWire -- BloCorRx Inc. (OTCQB: BICX) ("BioCorRx" or the "Company"), a developer and provider of advanced solutions in the treatment of substance use disorders, announced today that the U.S. Food and Drug Administration (FDA) has given the Company clearance to proceed to human trials for BICX104, an implantable naltrexone pellet for the treatment of Opioid Use Disorder (OUD). The company submitted the IND to the FDA last month. The first-in-human clinical trial for BICX104 is expected to commence later this year.

BICX104 is a biodegradable, long-acting subcutaneous pellet of naltrexone being developed in collaboration with the National Institute on Drug Abuse (NIDA), part of the National Institutes of Health (NIH), under RFA DA-19-002, "Development of Medications to Prevent and Treat Opioid Use Disorders and Overdose (UG3/UH3) (Clinical Trial Optional)*. The Company had a previous pre-IND meeting with the FDA, at which time the FDA deemed the potentially shortened 505(b)(2) pathway acceptable, as well the opportunity to seek eventual dual indication on the product for OUD and Alcohol Use Disorder (AUD).

According to data provided by the Centers for Disease Control and Prevention (CDC), over 81,000 drug overdose deaths occurred in the U.S. between June 2019 and May 2020. This data represents the most overdose deaths ever recorded in a 12-month period and experts attribute this increase, at least in part, to the COVID-19 pandemic.

Brady Granier, President, and Director of BioCorRx, Inc., and CEO of BioCorRx Pharmaceuticals, Inc., stated, "The FDA's communication that we are safe to proceed to our human study represents a major milestone for BICX104, a gradual release implantable pellet for opioid use disorder. We are looking forward to beginning the first-in human clinical trial of BICX104 which will assess longevity, safety and tolerability of BICX104. The COVID-19 pandemic has overshadowed the opioid epidemic, which unfortunately seems to have

October 8, 2019

BioCorRx

BioCorRx Announces the Official Launch of UnCraveRx, a Medically-Assisted Weight Loss Management Program

BioCorRx 1

loss management program. -craving medication to assist in the 4/7 access to a virtual app that port and lifestyle modification group

via NEWMEDIAWIRE -- BioCorRx er and provider of advanced ders, today announced that it has

online atwww.myuncraverx.com or CraveRx™ providers near them. ce fitness classes that cover a range also offers tools to track calorie

me a certified UnCraveRx™ provider about how to administer the antidividual is a candidate for the rovider for their practice. For more se email us at join@uncraverx.com.

rmation of Scientific Ac

WIRE) -- via NEWMEDIAWIRE -- BioCorRx Inc. provider of advanced solutions in the treatment day the formation of its Scientific Advisory Board R. Gastfriend, M.D., DFASAM, Evgeny Krupitsky

anagement team as it actively continues to 32 a multi-month sustained release naltreyone ohol use disorders. The Company was recently ne National Institute on Drug Abuse (NIDA) for

he midst of the U.S. opioid epidemic, the me patients' short-term persistence on existing

May 10, 2021



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