
UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d)
of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): January 9, 2017

OPKO Health, Inc.
(Exact Name of Registrant as Specified in Charter)

Delaware
(State or Other Jurisdiction
of Incorporation)

001-33528
(Commission
File Number)

75-2402409
(IRS Employer
Identification No.)

4400 Biscayne Blvd
Miami, Florida 33137
(Address of Principal Executive Offices) (Zip Code)

Registrant's telephone number, including area code: (305) 575-4100

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- ☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
 - ☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
 - ☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
 - ☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))
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ITEM 7.01. Regulation FD Disclosure.

As previously disclosed, on January 11, 2017 at 9:00 AM (PT), OPKO Health, Inc. (the “Company”) will present at the J.P. Morgan 35th Annual Healthcare Conference. The presentation will be webcast on the Investor Relations page of the Company’s corporate website at www.opko.com. A copy of the Company’s presentation slides is furnished as Exhibit 99.1 to this Current Report on Form 8-K and will also be available the day of the presentation on the OPKO website at www.opko.com under Investor Relations.

The information contained in Item 7.01 to this Current Report on Form 8-K and Exhibit 99.1 attached hereto shall not be deemed “filed” for purposes of Section 18 of the Exchange Act, or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing by the Company under the Act.

ITEM 9.01. Financial Statements and Exhibits.

(d) Exhibits

<u>Exhibit No.</u>	<u>Description</u>
99.1	The Company’s J.P. Morgan 35th Annual Healthcare Conference presentation slides

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

OPKO Health, Inc.

Date: January 10, 2017

By /s/ Adam Logal

Name: Adam Logal

Title: Senior Vice President,
Chief Financial Officer

Exhibit Index

<u>Exhibit No.</u>	<u>Description</u>
99.1	The Company's J.P. Morgan 35th Annual Healthcare Conference presentation slides



Diagnostics & Pharmaceuticals for Large Markets with Unmet Needs

January 2017

NASDAQ: OPK

FORWARD-LOOKING STATEMENTS



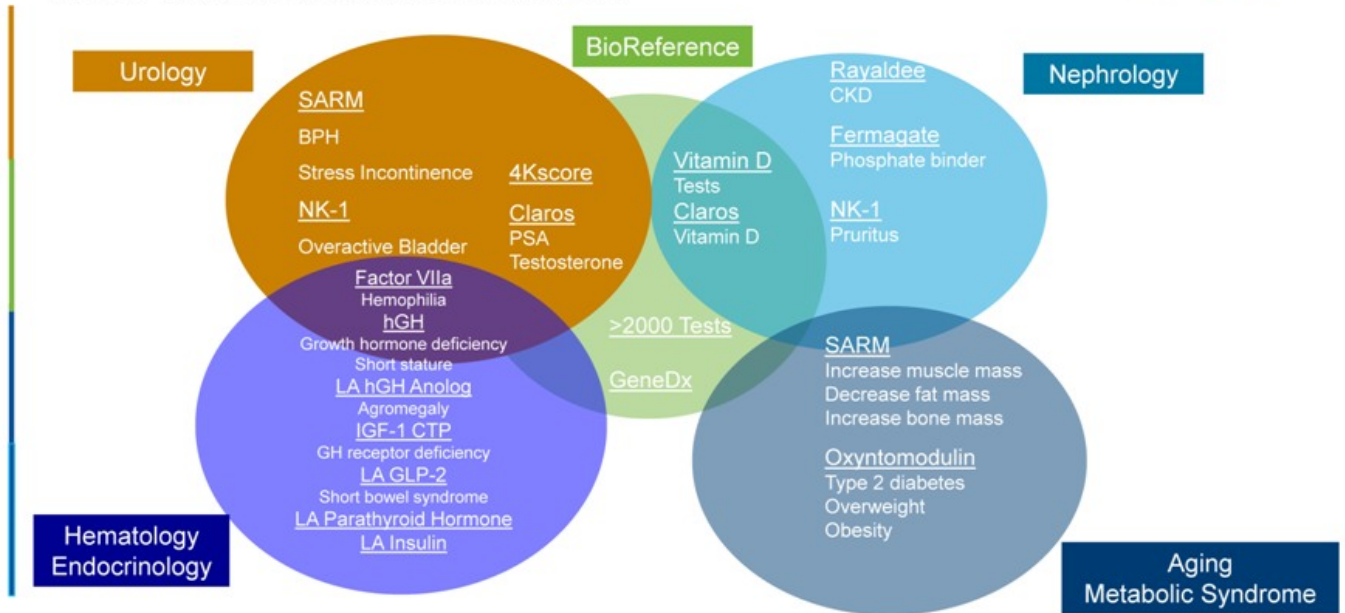
This presentation contains "forward-looking statements," as that term is defined under the Private Securities Litigation Reform Act of 1995 (PSLRA), which statements may be identified by words such as "expects," "plans," "projects," "will," "may," "anticipates," "believes," "should," "intends," "estimates," "potential," and other words of similar meaning, including statements regarding our estimated revenues and financial projections, expected milestones and royalties from the outlicense of our products, our ability to achieve high levels of growth, the potential for our products under development, the potential of the 4Kscore® to influence 89% of biopsy decisions and predict the risk of aggressive prostate cancer, our ability to develop, test and launch new products, the expected timing of the clinical studies and regulatory approval for our products under development, the outcome of our clinical trials and validation studies and that such outcomes will support marketing approval or commercialization, the expected market penetration and size of the market for our products, including without limitation, Rolapitant, Rayaldee®, hGH-CTP, the 4Kscore, Factor VIIa-CTP, oxyntomodulin the SARM candidate, and our point-of-care diagnostic products, the potential benefits of our products under development, including whether the 4Kscore will predict the risk of distant metastases and result in 40-55% cost savings, the expected submission dates for the PMA for PSA and 510k for testosterone and expected launch date for each, that oxyntomodulin will provide superior long-term therapy for obesity and Type II diabetes patients, our ability to successfully commercialize our product candidates such as Rolapitant, the 4Kscore, hGH-CTP and Rayaldee and whether Rayaldee will take significant market share in stage 3 and 4 CKD patients with SHPT, whether Rayaldee will raise serum total 25-hydroxyvitamin D (25D) more effectively than any over-the-counter (OTC) or prescription (Rx) products currently marketed without the risk of hypercalcemia, our ability to double our sales force and the timeline for doing so, our ability to obtain commercial and Part D coverage for 70-80% of U.S. covered lives by mid-2017, our ability to develop Rayaldee for new indications including stage 5 CKD and the timeline for doing so, expectations surrounding the sensitivity analysis for primary and secondary endpoints for the adult hGH-CTP study, whether the results of the analysis and any post-hoc efficacy analysis will be positive, whether the FDA would consider the analysis and whether the drug will be approvable, whether we will be required to make any changes to our development plans for hGH-CTP, expectations regarding patent coverage, the expected timing for commencing, completing and announcing results for our clinical trials, the timing for release of trial data and seeking and obtaining FDA and European regulatory approvals as well as reimbursement coverage for our products, our ability to obtain Medicare coverage for the 4Kscore and whether we have enough scientific and clinical data to justify a positive coverage determination, expectations about our animal health business and the introduction of several OTC and prescription products for the animal market, and the timing of commercial launch of our product candidates. These forward-looking statements are only predictions and reflect our views as of the date they were made, and we undertake no obligation to update such statements. Such statements are subject to many risks and uncertainties that could cause our activities or actual results to differ materially from the activities and results anticipated in forward looking statements, including integration challenges with Bio-Reference and other acquired businesses, risks inherent in funding, developing and obtaining regulatory approvals of new, commercially viable and competitive products and treatments, the success of our collaboration with Pfizer, general market factors, competitive product development, product availability, federal and state regulations and legislation, delays associated with development of novel technologies, unexpected difficulties and delays in validating and testing product candidates, the regulatory process for new products and indications, manufacturing issues that may arise, the cost of funding lengthy research programs, the need for and availability of additional capital, the possibility of infringing a third party's patents or other intellectual property rights, the uncertainty of obtaining patents covering our products and processes and in successfully enforcing them against third parties, and the possibility of litigation, among other factors, including all of the risks identified under the heading Risk Factors in our Annual Report on Form 10-K and other filings with the Securities and Exchange Commission.



A multinational biopharmaceutical and diagnostics company establishing important positions in large markets by leveraging its extensive health care industry, expertise and experience.

MULTI-FACETED GROWTH STRATEGY

OPKO



DIVERSIFIED INVESTMENT HIGHLIGHTS



Diagnostics

- Acquired Bio-Reference Laboratories 3Q 2015, revenue of approximately \$260 million in 3Q 2016
- 420-person salesforce drives industry-leading esoteric testing, ~70% of revenues
- Facilitates uptake of 4Kscore® prostate cancer test and Claros® 1 in office platform
- Initiated clinical study on Claros® 1 for PSA

Pharmaceuticals

- Rayaldee addresses unmet need in ~\$12 billion CKD market, ~9 million patients
- Rayaldee license (VFMCPRP); Up to \$837 million in milestones, double digit royalties
- VARUBI™ partnered with Tesaro; Up to \$95 million in milestones, double digit royalties, ~\$1 billion market
- Acquired Transition Therapeutics
- SARM Phase 2b initiating in 2H17

Biologics

- Platform technologies for extending circulating time of biologics
- hGH-CTP is a 1x/week hGH, Partnered with Pfizer, \$570 million pre-commercial milestones; double digit royalties and profit-sharing, ~\$3 billion growing market
- Long acting Factor VIIa-CTP Phase 2a ongoing, ~\$1.7 billion market
- Oxyntomodulin Phase 2b initiating in 2H17

Strategy & Execution

- Management team with a track record of success and access to capital
- Commitment to opportunistic business development
- Production and distribution assets expanding worldwide, multiple strategic investments

LEVERAGING NATIONAL MARKETING, SALES AND DISTRIBUTION RESOURCES TO DRIVE RAPID AND WIDESPREAD UPTAKE OF OPKO DX PLATFORMS

- BioReference Labs is the third largest full service reference laboratory in the U.S.
 - ~420 sales and marketing personnel
 - ~5,000+ people working together to support the needs of clients and patients
 - ~180+ patient service centers located throughout the U.S.
- Over 12 million patients served during 2016
- 9M16 revenue~\$778 million; 3Q16 revenue~\$260 million
- GeneDx is a genomics leader known for its expertise in rare disease and whole exome testing
- Utilizing BRL commercial infrastructure to drive 4Kscore and Claros 1 adoption

MORE THAN 2 MILLION PROSTATE BIOPSIES PER YEAR WORLDWIDE

- *4Kscore is the only blood test that accurately identifies risk for aggressive prostate cancer*
- Clinical utility based on decades of biomarker research and >20,000 men tested in Europe and U.S.
- In long-term outcome data 4Kscore test predicts 20 year metastasis free survival for individual patient
- Included in the 2015 and 2016 NCCN and 2016 EAU Prostate Cancer Guidelines
- Category I CPT published and effective January 1, 2017
- >5,000 physicians have used the 4Kscore in practice; > 16,000 tests performed during Q32016
- Health economics study shows 40–55% cost savings by avoiding unnecessary MRI, prostate biopsy, and additional treatment or monitoring of indolent cancer
 - 80% of men undergoing prostate biopsy based on PSA are found to have no cancer or indolent cancer
- Clinical utility study shows 4Kscore influences 89% of decisions about performing prostate biopsy

POSITIVE PROGRESS WITH COMMERCIAL PAYORS; MEDICARE LOCAL COVERAGE DECISIONS EXPECTED

- Obtained positive coverage decision from one national payer
- Obtained pricing agreements from several regional payers
- CMS national rate for 2017 \$602.10
- Novitas Solutions (Medicare Administrative Contractor for OPKO Elmwood Park, NJ facility)
 - Initial draft positive coverage determination (LDC) tentatively retired due to a potential conflict with another MAC
 - *Novitas has been and continues to pay for 4Kscore Medicare submissions*
 - Expect Novitas to include 4Kscore in the February review cycle for a draft local coverage determination.
- Palmetto GBA and CGS Administrators
 - Issued negative coverage determination
 - OPKO addressing concerns largely around clinical study protocols and clinical utility
- OPKO confident it has now supplied sufficient scientific and clinical data to justify positive LCD by any MAC

CLAROS 1 PLATFORM ADDRESSES LARGE POINT OF CARE TEST MARKET

25M PSA TESTS IN THE US ANNUALLY; \$625M MARKET OPPORTUNITY

- Initiated clinical study for PSA test in January 2017
- Filing modular PMA with FDA for PSA test expected in 1H2017 and expect testosterone 510(k) filing 2H2017
- Claros 1 point of care platform will leverage BioReference Labs distribution and marketing
- Menu expansion following initial FDA filings



ROBUST & LATE-STAGE DRUG PIPELINE

PRODUCT	INDICATION	PRECLINICAL	PHASE 1	PHASE 2	PHASE 3	MARKETED	MILESTONE
VARUBI (Rolapitant)	CINV	Out-licensed to Tesaro					Launched Nov 2015
Rayaldee® (CTAP101)	SHPT (CKD stage 3-4)	Partnered with Vifor Fresenius Ex U.S.					Launched Nov 2016
Rayaldee® (CTAP101)	SHPT (CKD stage 5)	Partnered with Vifor Fresenius in U.S.					Ph 3 in 1H 2017
hGH-CTP	hGH deficiency	Collaboration with Pfizer					Adult Ph 3 completed YE16 Pediatric Ph 3 Initiated YE16
Alpharen™ (Fermagate)	Hyperphosphatemia (CKD stage 5 patients)						Ph 3 in 2H 2017
OXYNTOMODULIN	Diabetes, obesity						Ph 2b in 2H 2017
SARM	BPH						Ph 2b in 2H 2017
Factor VIIa-CTP	Hemophilia						Ph 2a ongoing
AntagoNAT Platform	Cancer, CV, metabolic and orphan disease						

CHRONIC KIDNEY DISEASE – THE SILENT KILLER

- CKD is the 9th leading cause of death, ahead of breast and prostate cancer
- CKD prevalence is expected to increase due to obesity, diabetes and hypertension
- Most CKD patients die from cardiovascular disease (CVD), precipitated by secondary hyperparathyroidism (SHPT)
- SHPT is driven by vitamin D insufficiency (VDI) and characterized by elevated blood levels of parathyroid hormone (PTH)
- High PTH levels promote calcification (hardening) of vascular and renal tissues, the major cause of CVD mortality
- Nutritional vitamin D is ineffective for treating VDI and SHPT in CKD, but is the current “standard of care”
- Vitamin D receptor activators (VDRA) are approved for SHPT in CKD but drive vascular calcification.
- The forthcoming KDIGO Clinical Practice Guidelines are expected to recommend against routine use of VDRA in CKD
- **Healthcare providers have no good options to treat SHPT in stage 3-4 CKD except for RAYALDEE**

PRODUCT LAUNCHED NOVEMBER 29, 2016

- Extended-Release (1x daily) oral formulation of 25D₃* addresses significant unmet need
- FDA-approved for SHPT (elevated PTH) in patients with stage 3-4 CKD and VDI
- Reduces plasma PTH and increases serum 25D with a safety profile similar to placebo
- Minimal effects on serum calcium or phosphorus (key drivers of vascular calcification)
- Expected to take significant market share in stage 3-4 CKD patients with SHPT & VDI (~12M patients in US)
- Potential for new indications including stage 5 CKD, institutionalized elderly, osteoporosis and cancer

* 25-Hydroxyvitamin D₃ or Calcifediol




A New Direction in SHPT

Royaldee® is the first and only antihypertensive preparation of the active form of olmesartan, that reduces 25-hydroxyvitamin D and lowers PTH levels.

Indication and Limitations of Use
 Royaldee® (olmesartan medoxime) 25 mg capsules is indicated for the treatment of secondary hyperparathyroidism in adults with stage 3 or 4 chronic kidney disease and serum total 25-hydroxyvitamin D levels less than 30 ng/mL. Royaldee is not indicated in patients with stage 5 chronic kidney disease or end-stage renal disease on dialysis.

Important Safety Information
 Hypotension: Excessive reduction of vitamin D compounds, including Royaldee, can cause hypocalcemia and hypochloremia. Serum hypocalcemia due to substantial overdosage of vitamin D and its metabolites may require emergency therapy. Patients should be alerted about the symptoms of abnormal calcium. • Diabetic ketoacidosis: Hypocalcemia of any cause. Monitor serum calcium and signs and symptoms of diabetes closely more frequently when initiating or adjusting the dose of Royaldee. • Adverse Effects: Monitor for abnormally low levels of creatinine levels when using Royaldee, and adjust dose if needed. • The most common adverse reactions (≥2%) and most frequent than placebo were pruritus, nasopharyngitis, increased blood creatinine, dyspepsia, constipation, heart failure and constipation. • Care should be taken while dosing Royaldee with cytochrome P450 inhibitors, fluoxetine, cholestyramine or drugs elevating intracranial pressure due to the potential for drug interactions. • Serum sodium should be below 9.8 mEq/L before initiating treatment. • Monitor serum calcium, phosphorus, 25-hydroxyvitamin D and creatinine post-treatment (PTH) 3 months after starting therapy or changing dose.

Please see full prescribing information at www.opko.com and www.royaldee.com.
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- 70-person sales and marketing team launched Rayaldee in November 2016
 - Plans to nearly double the sales and marketing team in 2H17
- Comprehensive ongoing market education campaign highlighting the unmet need re: SHPT
- Leveraging KOL advocates in community outreach (i.e., Speaker Bureaus and Patient Advocacy)
- Commercial and Part D insurance under contract for >50% of U.S. covered lives
 - Growing to 70-80% by mid-2017
- Initial line extension plans
 - Clinical trials for stage 5 CKD to begin 1H17

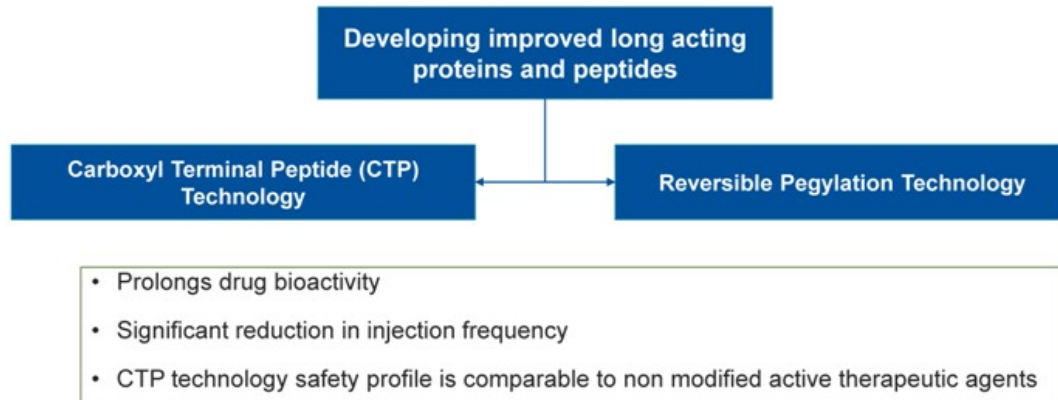


ONCE DAILY ORAL TABLET

- Phase 2 study of 350 male subjects for another indication showed significantly increased lean body mass and muscle strength and significant fat mass reduction with no change or lower prostate specific antigen (PSA) levels
- Animal studies resulted in decreased size of prostate
- Currently in Phase 2 study in prostate cancer patients who have undergone radical prostatectomy

▪ **NEXT STEP:**

Begin Ph 2b trial to determine optimal dose to treat BPH



PARTNERED WITH PFIZER

- New molecular entity (NME) that maintains natural native sequence of growth hormone
- **Once weekly injection vs. current products requiring daily injections**
- Human growth hormone is used for:
 - Growth hormone deficient children and adults
 - SGA, PWS, ISS
- Final presentation:
 - Refrigerated, liquid, non viscous formulation
 - Disposable easy to handle pen injection device with thin needle and small injection volume
- Phase 3 study in growth hormone deficient adults completed at the end of 2016
- Phase 3 study in naive growth hormone deficiency pediatric population underway
- Orphan drug designation in the U.S. and the EU for children and adults

- Efficacy endpoints of treating **adult** GHD patients is body fat mass which includes trunk fat mass reduction; Differs from treating pediatric GHD patients which assess growth height velocity
- A global multicenter study dosed in 198 patients
- Topline data means first look of unblinded data
- Primary endpoint is trunk fat mass reduction from baseline after 6mo treatment
- Topline showed:
 - GH-CTP group has mean change in trunk fat mass of -0.4kg and placebo group is 0
 - Does not meet statistical significance of ≤ 0.05 (p value)
 - 97% of GH-CTP vs 6% of placebo group showed IFG-1 normalization
 - Safety profile is consistent with that observed with those treated with daily growth hormone
- Found an exceptional value of trunk fat mass reduction in the placebo group

Phase 3 adult GHD study

- The exceptional data point warrants an outlier sensitivity analysis of the primary endpoint and related secondary endpoints
- Developed a statistical plan for data sensitivity analysis to identify any outlier from the entire data set
- Proceed with analysis; discuss with regulatory authorities

Communicated to all investigators and CROs involved in all on-going and newly initiated adult and pediatric GHD studies

- **Initiated phase 3 pediatric GHD study in December 2016**
 - 220 patients, non-inferiority comparison of weekly GH-CTP to daily growth hormone
 - Global study CROs selected; sites initiated in December
 - Easy to use, disposable, refrigerated pen device
- **Phase 3 adult GHD and phase 2 pediatric GHD open label extension studies continue without interruption**
 - No safety concerns
 - Switching to pen device in open label extensions
- **Initiating Pediatric GHD registration study in Japan**
 - 44 patients, comparison of weekly GH-CTP to daily growth hormone
 - Same pen device, dosage and formulation used in global study
- **Plan to commence global SGA study**

PHASE 2a STUDY UNDERWAY- \$1.7 BILLION MARKET

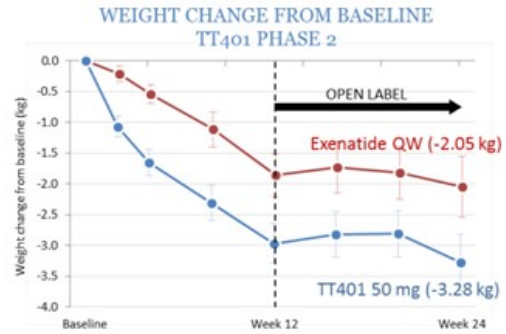
- **Market growing 7% annually and only 25% of patients are treated**
- **Current product (NovoSeven®) requires frequent IV doses**
 - 3-4 times a day during bleeding episodes
 - 1-2 times a day for prophylactic treatment
- **In pharmacological studies in hemophilic mice and dogs, Factor VIIa-CTP:**
 - Demonstrated potential for subcutaneous administration
 - Reduced frequency of injection during on-demand therapy
 - Enabled prophylactic treatment while reducing the injection frequency to 2-3 times a week
- **Orphan drug designation in the U.S. and the EU**

POTENTIAL FIRST TO MARKET GLP-1/GLUCAGON DUAL AGONIST

- Once weekly administered oxyntomodulin for type 2 diabetes and obesity
- Completed 420 patient Phase 2 study in type 2 diabetes patients
- Superior weight loss compared with currently approved extended release exenatide and placebo after 12 and 24 weeks of treatment.
- Reduction in HbA1c, marker of sugar metabolism, similar to exenatide at weeks 12 and 24.

▪ NEXT STEP:

Dose optimization phase 2b trial



UNIQUELY POSITIONED TO OFFER PRODUCTS FOR COMPANION ANIMALS; \$60 BILLION U.S. MARKET

- Minimal investment by utilizing existing product and manufacturing resources
- Plans to introduce several OTC products 1Q17 and select prescription products in 4Q17
- Oncology products being developed with OPKO Ireland for treatment of common cancers in pets
 - >6 million dogs and >6 million cats in the U.S. are diagnosed with cancer annually
- Developed pet friendly formulations and packaging with specific labeling for different species
- Marketed through a logistics partner and select national and regional distributors
- Executive team has significant experience and success in developing and marketing animal health products (DVM Pharmaceuticals division of IVAX Corp.)

SELECT FINANCIAL INFORMATION



Balance sheet at 9/30/2016

- Cash, cash equivalents & marketable securities: \$144.6 million
- Net investments: \$38.8 million
- Current portion of line of credit and notes payable: \$10.3 million
- Senior notes (net of embedded derivatives): \$51.5 million

Capital structure at 9/30/2016

- Common shares outstanding: 558,053,479

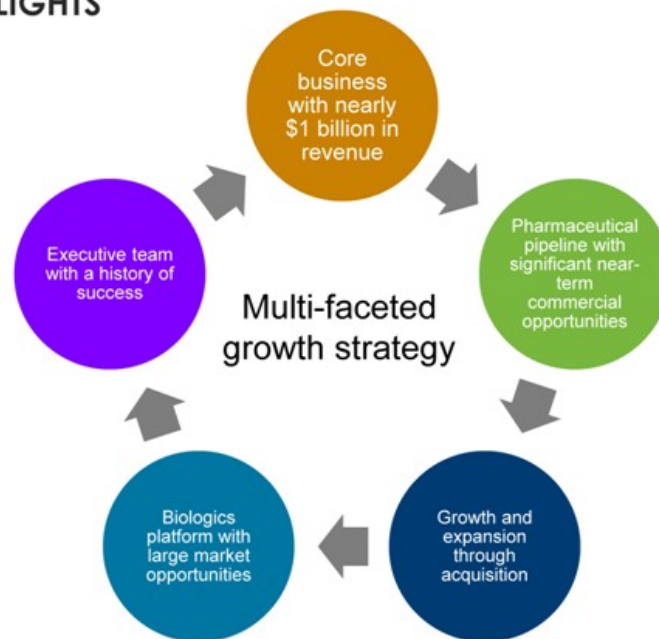
Revenue* 2016 vs. 2015

- Three months ended September 30, 2016: \$298.0 million vs. \$143.0 million
- Nine months ended September 30, 2016; \$946.2 million vs \$215.5 million

* 2016 revenue reflects acquisition of BioReference Laboratories on August 20, 2015

PROGRESS ACROSS MULTIPLE BUSINESS AREAS

- | | |
|--|--|
| ▪ 4Kscore reimbursement | Coverage decisions and pricing negotiations underway |
| ▪ Factor VIIa Phase 2a | Top-line data 1H17 |
| ▪ OTC animal health products | Initial launch 1Q17 |
| ▪ SARM Phase 2b | Initiate in 2H17 |
| ▪ Claros 1 PSA clinical study | PMA filing 1H17 |
| ▪ Claros 1 testosterone clinical study | Start 1H17 |
| ▪ Oxyntomodulin Phase 2b | Start 2H17 |
| ▪ hGH-CTP Phase 3 Pediatric | Initiated YE16 |



OPKO

THANK YOU