BUSINESS STRATEGY

The Movement Data Infrastructure Layer for Preventive Care

> **“Today we sell analysis. But we’re really buying data.”**

Ochy turns a 10-second smartphone video into structured biomechanics intelligence. We monetize that analysis today through retail, footwear, connected fitness, medical professionals, coaches and consumer channels. But every analysis also grows a proprietary, real-world movement dataset — the foundation for injury predictability, preventive care and reimbursement at population scale. This document explains why the analysis business is the entry point, not the destination.

€942K	53,000	4.6×	€29M	€0.096
ARR · May 2026	analyses · April-May 2026	YoY growth	named B2B pipeline	cost / labeled sample

Core thesis. Healthcare, insurers and reimbursement form the largest TAM. Retail, brands, connected fitness and big tech are paid data-acquisition channels that generate revenue now while building the dataset needed to win that market.

SECTION 01

Executive summary

Ochy is building the data infrastructure for preventive movement health. The product analyzes running and walking movement from a smartphone video and returns kinematic metrics, form insights, corrective guidance and partner-ready intelligence through SaaS, API and SDK workflows. The company already has commercial traction with leading sports and retail partners.

The strategic point for venture investors is larger than the current analysis business. Every paid analysis adds a labeled sample to a growing biomechanics corpus — video-derived movement metrics, user context, and outcome signals such as shoe choice, pain feedback and retest deltas. The revenue we earn today is, in effect, paying us to build an asset that becomes far more valuable than the service that funds it.

The go-to-market follows three connected horizons. First, Ochy scales paid analysis volume through retail, footwear brands, clinics, race platforms and connected fitness. Second, Ochy expands through big tech and wearables using API and SDK integrations priced at €0.40 to €0.70 per analysis. Third, Ochy converts the resulting dataset and longitudinal evidence into payer-scale prevention contracts with healthcare systems, insurers and reimbursement schemes. Near-term channels generate revenue and data; platform channels create volume and demographic diversity; clinical validation and longitudinal outcomes unlock the largest market of all.

SECTION 02

The problem

Preventive care lacks objective movement data. Healthcare systems usually intervene after pain, injury, falls or musculoskeletal deterioration have already created cost. Insurers and governments know that prevention is cheaper than treatment, yet they lack a scalable way to measure movement risk before it becomes a claim.

Biomechanics is one of the missing inputs. Movement patterns such as asymmetry, reduced mobility, excessive impact, poor cadence, pelvic-control issues and abnormal gait can reveal risk before a person stops moving or requires treatment. These signals are measurable — but traditional lab systems have made measurement too expensive, too centralized and too infrequent for population-scale prevention.

Research and clinical practice face a parallel data bottleneck. Most biomechanics evidence comes from small lab cohorts collected in controlled environments, which do not reflect the diversity of real-world movement: age, body type, device quality, clothing, footwear, lighting, geography and daily behavior. AI-based injury predictability requires large, labeled and longitudinal movement datasets, and those datasets are scarce.

This is the market gap Ochy fills. The world does not need another isolated analysis tool. It needs a scalable way to capture movement data in the real world, connect it to outcomes, and turn it into prevention infrastructure.

SECTION 03

The solution

Ochy transforms any compatible smartphone video into structured biomechanics intelligence. A user records a 10-second running or walking video. Ochy processes it through proprietary computer vision and biomechanics algorithms. The partner receives movement metrics, risk-relevant insights, corrective guidance, shoe recommendations or API-ready outputs inside the workflow they already operate.

The same infrastructure serves every channel. For retailers and footwear brands, Ochy improves shoe recommendation, customer experience and conversion. For connected fitness and big-tech platforms, Ochy adds a movement-health feature without building a biomechanics engineering team. For clinics and health professionals, it provides objective movement data that supports assessment, follow-up and remote patient engagement. For insurers and healthcare systems, it becomes a future risk-screening layer that can identify movement decline and support preventive action before expensive claims occur.

Critically, Ochy does not sell raw datasets to third parties. It monetizes processed intelligence through controlled SaaS, API and SDK workflows. This matters for privacy, scalability and buyer trust: partners receive useful movement outputs while Ochy continues to expand its consent-based, GDPR-aligned movement corpus.

The product funds the data, the data becomes the product

This is the engine of the company in a single line. The analysis product generates revenue and, with every transaction, a labeled sample. Those samples compound into a dataset no competitor can easily replicate. That dataset trains a prediction layer, and the prediction layer unlocks the preventive-care reimbursement market — the largest budget of all.

SECTION 04

This is not a plan — the flywheel is already spinning

It is tempting to read a strategy like this as a roadmap of intentions. It is not. The flywheel has been spinning for years, and no analysis has ever been deleted. The data asset already exists and is compounding every day across live commercial channels.

> **The flywheel in motion**
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> In the comparable Q2 window (April 1 to May 31), the platform processed 53,000 analyses versus 11,555 a year earlier — a 4.6× increase — and versus 38,741 in the same window of Q1 2026 (+37% quarter over quarter).

> Retail generates 55% of the volume, runners 24%, health professionals 11%, and coaches 9%. Retail and brand channels drive scale, while professional and clinical channels contribute the highest-value outcome labels. Both feed one corpus.

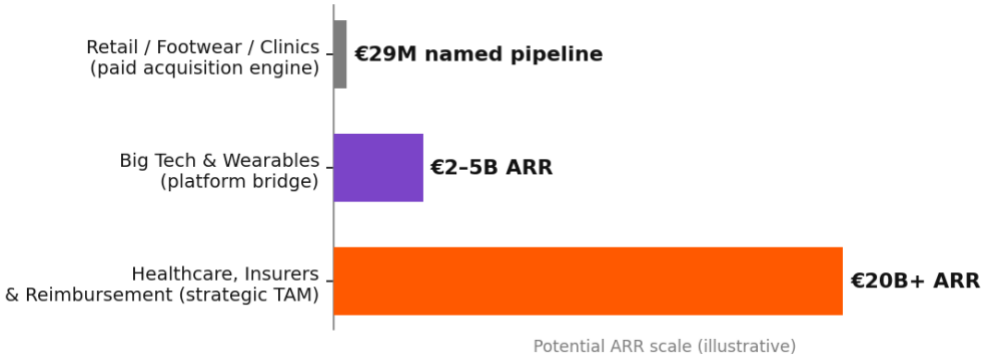
The channel mix matters as much as the headline growth. Retail and brand volume gives the corpus breadth and demographic diversity; the professional and clinical channels contribute the richer, higher-value outcome labels — pain reports, clinical assessments and retest deltas — that make the data usable for prediction. The two reinforce each other inside a single, versioned corpus.

SECTION 05

Market opportunity and TAM

The biggest opportunity is healthcare, insurers and reimbursement. This is where Ochy can become a category-defining company, because payers control large budgets and pay for risk reduction, cost deflection and population-health outcomes. The target market expands from running analysis into walking, mobility, healthy aging, MSK prevention, fall-risk screening and reimbursed digital movement biomarkers. We estimate this healthcare and payer opportunity at €20B+ in potential ARR globally — the strategic TAM investors should underwrite.

Big tech and wearables represent a faster €2B to €5B ARR platform opportunity that scales distribution and data. Retail, footwear, clinics and current B2B channels represent the paid-acquisition engine, with €29M of named pipeline and clear near-term ARR conversion. The sequencing is the point: retail is not the ceiling, footwear is not the final market, and connected fitness is not the end point. These channels generate revenue, prove demand, diversify movement data and create the evidence foundation required to access the much larger healthcare market.



The paid-acquisition engine funds the platform bridge, which builds toward the strategic healthcare TAM.

SECTION 06

Go-to-market: one roadmap, three commercial horizons

Ochy's go-to-market connects today's traction to the preventive-care outcome. It starts where adoption is fastest and moves toward the largest budgets as evidence compounds.

Horizon 1 — Paid data acquisition through current commercial channels

Retailers, footwear brands, clinics, coaches, race platforms and consumers pay for immediate value: better shoe recommendations, higher in-store engagement, digital analysis, clinical support, corrective-exercise guidance and customer acquisition. This horizon funds data collection and keeps the company revenue-positive on each labeled sample.

Horizon 2 — Platform scale through big tech, wearables and connected fitness

Google Health, Whoop, Apple, Sony, Technogym, Dyaco and similar platforms buy Ochy as a real-time intelligence layer. The preferred model is API or SDK distribution, priced at €0.40 to €0.70 per successful analysis. The partner owns the user experience; Ochy powers the movement layer. This horizon delivers the volume and demographic diversity that payer-grade prediction requires.

Horizon 3 — Preventive healthcare through payers and reimbursement

Insurers, governments and healthcare systems buy Ochy for risk mitigation. Pricing shifts from per-analysis fees to PMPM contracts, reimbursement-supported workflows and shared-savings models. This horizon requires clinical validation, longitudinal outcomes and payer pilots — which Ochy is now positioned to build using the dataset generated in Horizons 1 and 2.

SECTION 07

Commercial model by buyer type

Big tech, wearables and connected fitness

The model is B2B2C API or white-labeled SDK. The user records a short movement video inside the partner app; Ochy processes it in the cloud or through a controlled integration; biomechanical metrics return to the partner app and become part of the user's health, performance or recovery profile. Pricing uses two formats: metered API usage at €0.40 to €0.70 per successful analysis, and active-user licensing for platforms that prefer predictable pricing at scale. These buyers pay for engagement, differentiation and health intelligence — gaining a biomechanics layer without the time, hiring and validation burden of building it internally.

Healthcare, insurers and reimbursement

The healthcare model is value-based. Insurers and governments pay when Ochy helps identify risk earlier, target preventive programs, monitor mobility and reduce costly MSK claims or fall-related events. PMPM contracts fit covered populations or high-risk cohorts; a 500,000-person cohort at €0.50 to €1.50 PMPM creates €3M to €9M ARR. Reimbursement-linked SaaS fits clinics that bill approved digital-health, remote-monitoring or assessment pathways. Shared-savings contracts fit progressive payers and regional programs where Ochy participates in verified medical-cost reductions. These buyers require a higher evidence threshold, but support the largest contract values and the strongest long-term defensibility.

SECTION 08

Priority customers and revenue scenarios

The near-term priority is simple: convert the channels that generate both ARR and movement-data volume. The customers below combine large user bases, repeated movement moments and strategic relevance for the healthcare path.

Partner	Channel / Category	Scale	Revenue upside	Strategic value
Volumental	Retail gait-to-shoe scan	5,000 stores (20% rollout)	**€2.4M ARR**	Global retail labels at scale
Dyaco	Connected fitness	50K–100K / mo	**€432K-756K ARR**	Longitudinal treadmill data
ASICS Global	In-store + Runkeeper app	150K–250K / mo	**€1.7M–2.1M ARR**	Shoe-to-gait corpus
New Balance	In-store	500+ stores · 150K / mo	**€1.1M–1.8M ARR**	Gait + shoe outcome labels
Whoop / Sony	Platform API & SDK	1M–5M / mo	**€18M–42M ARR**	Demographic diversity for prediction
★ Hanwha Life	Pilot (insurer)	500K–1M members @ PMPM	**€12M–18M ARR**	Healthcare path validator

Early payer signals already exist. Hanwha Life, a South Korean insurer, is in active discussions with us.

Hanwha Life represents the healthcare path made concrete.

SECTION 09

How biomechanics data becomes preventive care

Preventive care starts with repeatable measurement. Ochy captures movement, converts it into comparable metrics, tracks changes over time and connects those changes to outcomes. Over time this creates the evidence needed to move from descriptive analysis to risk scoring. For runners, the product can flag movement patterns that correlate with injury risk and deliver corrective guidance. For older adults, walking analysis can monitor gait changes, asymmetry, stability and mobility decline. For insurers, the same signals support screening, triage and targeted prevention programs. For governments, Ochy can provide scalable population-level movement screening without lab infrastructure.

The technical path

- Capture movement data and context from real-world smartphone video.
- Add outcome labels such as pain, injury reports, adherence and retest changes.
- Train models that estimate risk patterns across segments.
- Validate those models through independent longitudinal studies.
- Commercialize validated risk scoring through payer pilots, reimbursement pathways and population-health contracts.

SECTION 10

Use of proceeds

Seed funding accelerates the three assets needed to win the healthcare TAM: distribution, data infrastructure and evidence.

- **40% — Data & ML platform.** Versioned movement corpus, GDPR-grade anonymization, consent management, labeling tooling, model training and scalable API infrastructure.
- **35% — Channel conversion and enterprise rollout.** Priority integrations across Dyaco, ASICS Global, Technogym, New Balance, Google Health, Whoop, Sony, Volumental, Fleet Feet, Sportsshoes.com and race platforms.
- **25% — Proof and payer path.** Walking analysis, longitudinal study design, independent research partnerships, clinical outcome labeling and first insurer or government pilots.

Funding milestones

1M+ annual analyses · priority API launches · outcome labels live in product · 5M+ annotated movement profiles · a published longitudinal study · first validated risk model · first payer pilot signed.