

## Nuance Medical LLC

5931 Sea Lion Pl Suite 113, Carlsbad, CA 92010

Brian Sill, Chief Financial Officer

Date: May 14, 2026

### Application Facts:

Industry	<b>Manufacturing</b>
NAICS	<b>339113</b>
Type of App	<b>Expansion</b>
Location	<b>Clark County</b>
RDA	LVGEA, Emma Keserich

### Company Profile

Nuance Medical LLC (Nuance Medical) plans to expand its existing Nevada operations. Nuance Medical is currently headquartered in Carlsbad, CA and has a related company already operating in Henderson, Nevada called Biodermis LLC. For more than two decades, Nuance Medical has served the professional and consumer healthcare markets with industry-leading medical products designed to improve the safety, quality, and delivery of care. The company is a manufacturer of medical devices and over-the-counter pharmaceuticals. Nuance Medical develops and markets medical products used by healthcare professionals and consumers, including, cryotherapy devices, topical anesthetics, scar and skin treatment products. Nuance is a trusted supplier to some of the largest healthcare distributors in the world and its family of products are sold into more than 50 countries today through a network of established and trusted distributors. The company has recently Environmental, Social, and Governance (ESG) Committee to create meaningful, tangible impact by focusing first on its scar care portfolio. *Source: Nuance Medical LLC*

Tax Abatement Requirements:	Statutory	Company Application	Meeting Requirements
Job Creation	25	<b>25</b>	Yes
Average Wage	\$31.57	<b>\$37.05</b>	Yes
Equipment Capex (SU & MBT)	\$5,950	<b>\$589,000</b>	Yes
Equipment Capex (PP)			

### Additional Requirements:

Health Insurance	65%	<b>100%</b>	Yes
Revenues generated outside NV	51%	<b>85%</b>	Yes
Business License	<input type="checkbox"/> Current	<input type="checkbox"/> Pending	<input checked="" type="checkbox"/> Will comply

Total Tax Liability (without tax abatements)	Direct (company)	Total
	<b>\$127,447</b>	<b>\$3,079,701</b>

Tax Abatements	Contract Terms	Estimated Tax Abatement
Sales Tax Abmt.	4.6% for 2 years	\$22,235
Modified Business Tax Abmt.	50% for 4 years	\$30,551
Personal Property Tax Abmt.	50% for 10 years	\$8,832
<b>Total Estimated Tax Abatement over 10 yrs.</b>		<b>\$61,618</b>

Net New Tax Revenues	Direct	Indirect	Taxes after Abatements
<b>Local Taxes</b>			
Property	\$623,674	\$1,160,944	\$1,784,618
Sales	\$42,312	\$591,304	\$633,616
Lodging	\$0	\$0	\$0
<b>State Taxes</b>			
Property	\$34,111	\$67,985	\$102,096
Sales	\$20,250	\$198,619	\$218,869
Modified Business	\$202,181	\$76,703	\$278,884
Lodging	\$0	\$0	\$0
<b>Total Estimated New Tax Revenue over 10 yrs.</b>	<b>\$922,528</b>	<b>\$2,095,555</b>	<b>\$3,018,083</b>

Economic Impact over 10 yrs.	Economic	Construction	Total
Total Jobs Supported	50	5	55
Total Payroll Supported	\$32,035,378	\$378,166	\$32,413,544
Total Economic Value	\$162,123,894	\$1,148,927	\$163,272,821

### Economic Impact Output per Abatement Dollar

**\$2,631.11**

### New Total Tax per Abated Dollar

**\$48.98**

### IMPORTANT TERMS & INFORMATION

**Tax Abatements are reduction or discount of tax liability and companies do not receive any form of payment.**

**Total Estimated Tax Abatement** is a tax reduction estimate. This estimated amount will be discounted from total tax liability.

**Estimated New Tax Revenue** is amount of tax revenues local and state government will collect after the abatement was given to applying company.

**Economic Impact** is economic effect or benefits that this company and it's operations will have on the community and state economy measured by total number of jobs, payroll and created output.



April 8, 2026

Mr. Tom Burns  
Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4<sup>th</sup> Floor  
Las Vegas, Nevada 89119

Dear Mr. Burns,

**Nuance Medical LLC** is applying to the State of Nevada's Sales & Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. This site in Southern Nevada will be a consolidation of their Western US operations, resulting in the expansion of their Nevada operations. We request that **Nuance Medical LLC** be placed on the May 14<sup>th</sup>, 2026, GOED Board meeting agenda.

**Nuance Medical LLC** will create **25** new positions in the first two years of expanded operations, with an average hourly wage of **\$37.05**. They will offer employee health insurance with **100%** premium coverage and **85%** of their revenue is generated outside of Nevada. **Nuance Medical LLC** will make an overall capital investment of **\$589,000**.

**Nuance Medical LLC** meets the statutory requirements for the Sales & Use Tax Abatement, Modified Business Tax Abatement, and Personal Property Tax Abatement. This application has the support of Las Vegas Global Economic Alliance.

Sincerely,

Emma Keserich  
Vice President, Business Development  
Las Vegas Global Economic Alliance



March 6<sup>th</sup>, 2026

Thomas Burns  
Executive Director  
Nevada Governor's Office of Economic Development  
1 State of Nevada Way, 4th Floor  
Las Vegas, Nevada 89119

Dear Mr. Burns:

On behalf of Nuance Medical LLC, I am respectfully submitting this letter in support of our application for a Nevada tax abatement associated with our expansion in the state. As we were considering potential locations for our future headquarters, this abatement was a key factor in choosing to plant our flag in the state of Nevada.

Nuance Medical LLC is currently headquartered in Carlsbad, CA and has a related company already operating in Henderson, Nevada called Biodermis LLC, which was acquired by the same owner of Nuance Medical LLC in 2022. Biodermis LLC currently employs 21 people in the state of Nevada and the intention is to combine the operations and legal entities of Nuance Medical LLC and Biodermis LLC in a new facility in Las Vegas in Q3 of 2026. We anticipate that through this integration and organic growth of our business, we will be adding 25 new positions in Nevada over the next two years with an average hourly wage of \$37.05.

Nuance Medical LLC and Biodermis LLC are manufacturers of medical device and over-the-counter pharmaceuticals and have been growing rapidly over the last few years through both organic growth of our products and acquisitions. We are excited about the strong and diverse labor market in the Las Vegas area, its business-friendly environment and its position as a west-coast logistics hub. As you will see in our application, our expansion will bring a wide variety of new jobs to the area, from warehouse and production employees all the way up to executive officers.

We respectfully request your consideration of this application, and your support of our Nevada expansion plans through your tax abatement program.

Best Regards,

A handwritten signature in black ink that reads "Brian Sill".

Brian Sill  
Chief Financial Officer  
Nuance Medical LLC  
[BrianS@nuancemedical.com](mailto:BrianS@nuancemedical.com)

760.585.4849 • 5931 Sea Lion Place, Suite 113 • Carlsbad, CA 92010

[NuanceMedical.com](http://NuanceMedical.com)



Company is an / a: (check one)

- New location in Nevada  
 Expansion of a Nevada company

## Standard Tax Abatement Incentive Application

Company Name: Nuance Medical LLC (related Biodermis LLC - operating in NV)  
 Date of Application: December 17, 2025

### Section 1 - Type of Incentives

Please check all that the company is applying for on this application:

- Sales & Use Tax Abatement  
 Modified Business Tax Abatement  
 Personal Property Tax Abatement  
 Recycling Real Property Tax Abatement  
 Other: \_\_\_\_\_

### Section 2 - Corporate Information

COMPANY NAME (Legal name under which business will be transacted in Nevada) Nuance Medical LLC			FEDERAL TAX ID # 46-2283506
CORPORATE ADDRESS 5931 Sea Lion PI Suite 113	CITY / TOWN Carlsbad	STATE / PROVINCE CA	ZIP 92010
MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above)	CITY / TOWN	STATE / PROVINCE	ZIP
TELEPHONE NUMBER 760-585-7741	WEBSITE <a href="http://www.nuancemedical.com">www.nuancemedical.com</a>		
COMPANY CONTACT NAME Brian Sill	COMPANY CONTACT TITLE CFO		
E-MAIL ADDRESS <a href="mailto:brians@nuancemedical.com">brians@nuancemedical.com</a>	PREFERRED PHONE NUMBER 901-496-8752		

Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development?  Yes  No

If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

### Section 3 - Program Requirements

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.
- New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter following quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.
- In both urban and rural areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly wage.

Note: Criteria is different depending on whether the business is in a county where the population is 100,000 or more or a city where the population is 60,000 or more "urban" area), or if the business is in a county where the population is less than 100,000 or a city where the population is less than 60,000 (i.e., "rural" area).

### Section 4 - Nevada Facility

Type of Facility:

- Headquarters  
 Technology  
 Back Office Operations  
 Research & Development / Intellectual Property  
 Service Provider  
 Distribution / Fulfillment  
 Manufacturing  
 Other: \_\_\_\_\_

PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA 85%	EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) Aug-2026		
NAICS CODE / SIC 339113	INDUSTRY TYPE Medical device, medical supplies and OTC pharmaceuticals		
DESCRIPTION OF COMPANY'S NEVADA OPERATIONS Headquarters, general office, light manufacturing (kitting), and warehousing/distribution			
PROPOSED / ACTUAL NEVADA FACILITY ADDRESS 4120 W Windmill PI Suite 101	CITY / TOWN Las Vegas	COUNTY Clark County	ZIP 89139
WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP? Carlsbad, CA; Bunnell, FL			

**Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)**

Check the applicable box when form has been completed.

- 5 (A)  Equipment List
- 5 (B)  Employment Schedule
- 5 (C)  Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.
- 5 (D)  Company Information Form

**Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up - Plans Over the Next <u>Ten</u> Years	Expansions - Plans Over the Next <u>10</u> Years
<p>Part 1. Are you currently/planning on leasing space in Nevada? _____</p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p style="padding-left: 40px;">What year(s)? _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Annual lease cost of space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p><b>If No, skip to Part 2. If Yes *, continue below:</b></p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p style="padding-left: 40px;">Purchase date, if buying (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p>Do you plan on making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? _____</p> <p><b>If Yes *, continue below:</b></p> <p style="padding-left: 40px;">When to break ground, if building (month, year)? _____</p> <p style="padding-left: 40px;">Estimated completion date, if building (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p>	<p>Part 1. Are you currently leasing space in Nevada? <b>Yes</b></p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p style="padding-left: 40px;">What year(s)? <u>2012 to Now</u></p> <p style="padding-left: 40px;">How much space (sq. ft.)? <u>9,425</u></p> <p style="padding-left: 40px;">Annual lease cost at current space: <u>\$160,000.00</u></p> <p>Due to expansion, will you lease additional space? <b>Yes</b></p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>Expanding at the current facility or a new facility? <b>New</b></p> <p style="padding-left: 40px;">What year(s)? <u>2026-2031</u></p> <p style="padding-left: 40px;">How much expanded space (sq. ft.)? <u>25,000</u></p> <p style="padding-left: 40px;">Annual lease cost of expanded space: <u>\$420,000.00</u></p> <p>Do you plan on making building tenant improvements? <b>Yes</b></p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p style="padding-left: 40px;">When to make improvements (month, year)? <u>Mar-2026</u></p> <hr style="border-top: 1px dashed black;"/> <p>Part 2. Are you currently operating at an owner occupied building in Nevada? <b>No</b></p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p> <p style="padding-left: 40px;">Current assessed value of real property? _____</p> <p>Due to expansion, will you be making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p style="padding-left: 40px;">When to make improvements (month, year)? _____</p> <hr style="border-top: 1px dashed black;"/> <p>Part 3. Do you plan on building or buying a new facility in Nevada? <b>No</b></p> <p><b>If Yes *, continue below:</b></p> <p style="padding-left: 40px;">Purchase date, if buying (month, year): _____</p> <p style="padding-left: 40px;">When to break ground, if building (month, year)? _____</p> <p style="padding-left: 40px;">Estimated completion date, if building (month, year): _____</p> <p style="padding-left: 40px;">How much space (sq. ft.)? _____</p>
<p><b>* Please complete Section 7 - Capital Investment for New Operations / Startup.</b></p>	<p><b>* Please complete Section 7 - Capital Investment for Expansions below.</b></p>

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):  
 Updating and modernizing existing warehouse/office space, adding new production area and temperature controlled storage space.

**Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How much capital investment is planned? (Breakout below):	How much capital investment is planned? (Breakout below):
Building Purchase (if buying): _____	Building Purchase (if buying): _____
Building Costs (if building / making improvements): _____	Building Costs (if building / making improvements): <u>\$770,000</u>
Land: _____	Land: _____
Equipment Cost: _____	Equipment Cost: <u>\$589,000</u>
<b>Total:</b> _____	<b>Total:</b> <u>\$1,359,000</u>
	Is the equipment purchase for replacement of existing equipment? _____
	Current assessed value of personal property in NV: <u>\$29,750</u>
	(Must <b>attach</b> the <u>most recent assessment</u> from the County Assessor's Office.)

**Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: _____	How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: <u>25</u>
Average hourly wage of these <u>new</u> employees: _____	Average hourly wage of these <u>new</u> employees: <u>\$37.05</u>
	How many FTE employees prior to expansion?: <u>21</u>
	Average hourly wage of these <u>existing</u> employees: <u>\$36.33</u>
	Total number of employees after expansion: <u>46</u>

\* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- Overtime     
  Merit increases     
  Tuition assistance     
  Bonus  
 PTO / Sick / Vacation     
  COLA adjustments     
  Retirement Plan / Profit Sharing / 401(k)     
  Other: \_\_\_\_\_

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

**Section 9 - Employee Health Insurance Benefit Program**

Is health insurance for employees and is an option for dependents offered?     Yes (**attach health plan and quote or invoice**)     No

Package includes (check all that apply):

- Medical     
  Vision     
  Dental     
  Other: Short and Long Term Disability

Qualified after (check one):

- Upon employment     
  Three months after hire date     
  Six months after hire date     
  Other: \_\_\_\_\_

Health Insurance Costs:	Percentage of health insurance premium by (min 65%):
Plan Type: <u>AETNA EPO HSA 3500-80 (EPONATHD3)</u>	
Employer Contribution (annual premium per employee): <u>\$ 5,601.84</u>	Company: <u>100%</u>
Employee Contribution (annual premium per employee): <u>\$ -</u>	Employee: <u>0%</u>
<b>Total Annual Premium:</b> <u>\$ 5,601.84</u>	


[SIGNATURE PAGE FOLLOWS]

**Section 10 - Certification**

I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

Brian Sill  
\_\_\_\_\_  
Name of person authorized for signature

  
\_\_\_\_\_  
Signature

CFO  
\_\_\_\_\_  
Title

March 6, 2026  
\_\_\_\_\_  
Date

**Nevada Governor's Office of Economic Development**  
1 State of Nevada Way, 4th Floor, Las Vegas, Nevada 89119 • 702.486.2700 • www.goed.nv.gov

# Site Selection Factors

Company Name: Nuance Medical LLC

County: Clark

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## Section I - Site Selection Ratings

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Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

Availability of qualified workforce:	<u>5</u>	Transportation infrastructure:	<u>5</u>
Labor costs:	<u>3</u>	Transportation costs:	<u>4</u>
Real estate availability:	<u>3</u>	State and local tax structure:	<u>4</u>
Real estate costs:	<u>3</u>	State and local incentives:	<u>4</u>
Utility infrastructure:	<u>1</u>	Business permitting & regulatory structure:	<u>4</u>
Utility costs:	<u>1</u>	Access to higher education resources:	<u>2</u>

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Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):

In addition to the factors listed above, the abatement program helped us choose Nevada for our expansion to save on some of the large up-front costs associated with setting up a new office and warehouse.



## 5(B) Employment Schedule

Company Name: Nuance Medical LLC

County: Clark

### Section 1 - Full-Time Equivalent (FTE) Employees

Directions: Please provide an estimated list of full time employees [columns (a) through (d)] that will be hired and employed by the company by the end of the first eighth quarter of new / expanded operations. For example, if the effective date of new / expanded operations is April 1, 2015, the date would fall in Q2, 2015. The end of the first eighth quarter would be the last day of Q2, 2017 (i.e., June 30, 2017). Attach this form to the Incentives Application. A qualified employee must be employed at the site of a qualified project, scheduled to work an average minimum of 30 per week, if offered coverage under a plan of health insurance provided by his or her employer, is eligible for health care coverage, and whose position of a "primary job" as set forth in NAC 360.474.

Please use the Bureau of Labor Statistics Standard Occupational Classification System (SOC) link to populate section (b): [https://www.bls.gov/soc/2018/major\\_groups.htm#11-0000](https://www.bls.gov/soc/2018/major_groups.htm#11-0000)

(a) New Hire Position Title/Description	(b) Position SOC Code	(c) Number of Positions	(d) Average Hourly Wage	(e) US Bureau of Labor Statistics Average Hourly Wage - Clark County	(f) Average Weekly Hours	(g) Annual Wage per Position	(h) Total Annual Wages
General and Operations Managers	11-1021	1	\$96.56	\$60.08	40	\$200,844.80	\$200,844.80
Human Resources Managers	11-3121	1	\$96.15	\$57.33	40	\$199,992.00	\$199,992.00
Accountants and Auditors	13-2011	3	\$32.30	\$39.57	40	\$67,184.00	\$201,552.00
Financial Managers	11-3031	1	\$72.12	\$68.81	40	\$150,009.60	\$150,009.60
Marketing Managers	11-2021	1	\$57.69	\$59.85	40	\$119,995.20	\$119,995.20
Customer Service Representatives	43-4051	3	\$24.17	\$19.65	40	\$50,273.60	\$150,820.80
General and Operations Managers	11-1021	4	\$38.84	\$60.08	40	\$80,787.20	\$323,148.80
Computer Systems Analysts	15-1121	1	\$40.87	\$47.58	40	\$85,009.60	\$85,009.60
Production, Planning, and Expediting Clerks	43-5061	5	\$22.00	\$29.34	40	\$45,760.00	\$228,800.00
Shipping, Receiving, and Traffic Clerks	43-5071	2	\$21.00	\$20.13	40	\$43,680.00	\$87,360.00
Unclassified Occupation	99-9999	3	\$28.71	U	40	\$59,716.80	\$179,150.40
<b>TOTAL</b>		<b>25</b>	<b>\$37.05</b>	<b>\$35.94</b>			<b>\$1,926,683.20</b>

### Section 2 - Employment Projections

Directions: Please estimate full-time job growth in Section 2, complete columns (b) and (c). These estimates are used for state economic impact and net tax revenue analysis that this agency is required to report. The company will not be required to reach these estimated levels of employment. **Please enter the estimated new full time employees on a year by year basis (not cumulative)**

(a) Year	(b) Number of New FTE(s)	(c) Average Hourly Wage	(d) Payroll
3-Year	3	\$37.00	\$230,880.00
4-Year	4	\$37.00	\$307,840.00
5-Year	5	\$37.00	\$384,800.00

\* Column (e) determines if wage is commensurate to current wage ranges in the region the company plans to locate/is located. For these purposes the mean average hourly wage for the location has been used.

U = Unknown / data set for region is not currently available.

Source: Lighcast™ county wages based on the Bureau of Labor Statistics Occupational Employment and Wage Statistics program and county-level administrative wage data.

## 5(C) Evaluation of Health Plans Offered by Companies

Company Name: Nuance Medical LLC County: Clark

Total Number of Full-Time Employees: 25

Average Hourly Wage per Employee \$37.05  
 Average Annual Wage per Employee (implied) \$77,067.33

### COST OF HEALTH INSURANCE

Annual Health Insurance Premium Cost: \$5,601.84  
 Percentage of Premium Covered by:  
     Company 100%  
     Employee 0%

### HEALTH INSURANCE PLANS:

Base Health Insurance Plan*:	AETNA EPO HSA 3500-80
Deductible - per employee	\$ 3,500
Coinsurance	80% / 20%
Out-of-Pocket Maximum per employee	\$ 6,500

Additional Health Insurance Plan*:	AETNA EPO 3000-100
Deductible - per employee	\$ 3,000
Coinsurance	100% / 00%
Out-of-Pocket Maximum per employee	\$ 5,500

Additional Health Insurance Plan*:	AETNA MCPOS 750-90
Deductible - per employee	\$ 750
Coinsurance	90% / 10%
Out-of-Pocket Maximum per employee	\$ 4,000

\*Note: **Please list only "In Network" for deductible and out of the pocket amounts .**

### Generalized Criteria for Essential Health Benefits (EHB)

*[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]*

Covered employee's premium not to exceed 9.5% of annual wage	0.0%	MEC
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Annual Out-of-Pocket Maximum not to exceed \$10,600 (2026)	\$6,500	MEC
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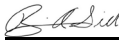
Minimum essential health benefits covered (Company offers PPO):

- (A) Ambulatory patient services
- (B) Emergency services
- (C) Hospitalization
- (D) Maternity and newborn care
- (E) Mental health/substance use disorder/behavioral health treatment
- (F) Prescription drugs
- (G) Rehabilitative and habilitative services and devices
- (H) Laboratory services
- (I) Preventive and wellness services and chronic disease management
- (J) Pediatric services, including oral and vision care

No Annual Limits on Essential Health Benefits

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached a qualified plan with information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

Brian Sill  
 Name of person authorized for signature

  
 Signature

CFO  
 Title

3/6/2026  
 Date

## 5(D) Paid Family and Medical Leave (PFML)

Company Name: Nuance Medical LLC

County: Clark

*After October 1, 2023, if the business will have at least 50 full-time employees on the payroll of the business by the eighth calendar quarter following the calendar quarter in which the abatement becomes effective the business, by the earlier of the eighth calendar quarter following the calendar quarter in which the abatement becomes effective or the date on which the business has at least 50 full-time employees on the payroll of the business, has a policy for paid family and medical leave and agrees that all employees who have been employed by the business for at least 1 year will be eligible for at least 12 weeks of paid family and medical leave at a rate of at least 55 percent of the regular wage of the employee.*

I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that the Applicant will meet this threshold for PFML.

Brian Sill

Name of person authorized for signature



Signature

CFO

Title

12/17/2025

Date

## 5(E) Company Information

Company Name: Nuance Medical LLC

County: Clark

### Section 1 - Company Interest List

Directions: Please provide a detailed list of owners and/or members of the company. *The Governor's Office of Economic Development strives to maintain the highest standards of integrity, and it is vital that the public be confident of our commitment. Accordingly, any conflict or appearance of a conflict must be avoided. To maintain our integrity and credibility, the applicant is required to provide a detailed list of owners, members, equity holders and Board members of the company.*

(a) Name	(b) Title
Dan Henn	Chairman of Board
George Walker	Director
Marc Lieberman	Director
Steve Bosio	Director
Ryan Mack	Director
Mark Steele	President
Brian Sill	CFO

### Section 2 - Company Affiliates and/or Subsidiaries

Are there any subsidiary or affiliate companies sharing tax liability with the applicant company? No  Yes

#### If Yes, continue below:

Directions: In order to include affiliates/subsidiaries, under the exemption letter, they must to be added to the Contract. Per standard practice GOED requires a corporate schematic to understand the exact relationships between the companies. Please populate the below table to show the exact relationships between the companies and include:

1. The names as they would read on the tax exemption letter.
2. Which entity(ies) will do the hiring?
3. Which entity(ies) will be purchasing the equipment?

Name of Subsidiary or Affiliate Entity, Role and Legal Control Relationship
Nuance Intermediary LLC (100% owner of Nuance Medical LLC, Biodermis LLC and Beutlich Pharmaceuticals LLC)
Biodermis LLC (related company - common ownership)
Beutlich Pharmaceuticals LLC (related company - common ownership)

Please include any additional details below:

Nuance Intermediary LLC is a holding company with 100% ownership of our three operating entities. The intention is to merge Nuance Medical LLC and Biodermis LLC into one legal entity in 2026. Nuance Medical LLC would be the entity doing the hiring and purchasing the equipment.

## Abatement Application Addendum

Company Name: Nuance Medical LLC

County: Clark

### Corporate Social Responsibility (CSR)

**GOED is very interested in learning about a company's current CSR / Community Engagement Activities. Does the company have any current programs, or future plans in its Nevadan location, that it would like to list? If so please do so below in the space below. Feel free to add space if required:**

The company has recently formed an ESG committee. Nuance Medical's ESG mission is to create meaningful, tangible impact by focusing first on our scar care portfolio to make a high-impact for high need patient communities, beginning with mastectomy, cleft palate and burn victims. We plan to balance our donations and volunteering efforts between local organizations in the Las Vegas area and other national and international causes, make our impacts measurable and expand over time to supporting causes that could benefit from our pain management portfolio of products.

### Equity, Diversity, and Inclusion

**Would the company like to highlight any policies / practices for equity, diversity, and inclusion? Feel free to add space if required:**

No programs to list at this time.

## Abatement Application Addendum

Company Name: Nuance Medical LLC

County: Clark

### Education Partnerships

**Does the company have existing partnerships to recruit or advance workforce development (e.g. workforce boards, community based organizations and education providers)? Additionally, would the company have any anticipated needs, for this project, where GOED / RDAs can provide support? Feel free to add space if required:**

Nuance Medical does not currently have any programs in this area, but would be interested in exploring these opportunities in the future.

### Supply Chain

**Does the company anticipate purchasing equipment, as noted in the Capital Equipment List, from or through Nevada-based businesses? Does the company wish to submit any notes / highlights re. this? Feel free to add space if required:**

We have signed a construction agreement with LM Construction, a local construction company to help us with our tenant improvement build-out in our new building. We are also currently receiving quotes from Westfall Commercial Furniture (Las Vegas offices) for our office furniture needs, and we prefer to work with local, Nevada companies on our other needs whenever possible.