

NeuroMetrix, Inc.
Form 10-Q
August 08, 2008

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**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**
Washington, D.C. 20549
FORM 10-Q

(Mark
One)

**QUARTERLY REPORT PURSUANT TO SECTION 13 OR
15(d) OF THE SECURITIES EXCHANGE ACT OF 1934**

For the quarterly period ended June 30, 2008

OR

**TRANSITION REPORT PURSUANT TO SECTION 13 OR 15(d)
OF THE SECURITIES EXCHANGE ACT OF 1934**

**For the transition period from _____ to _____
Commission File Number 000-50856**

NEUROMETRIX, INC.

(Exact name of registrant as specified in its charter)

Delaware
(State or other jurisdiction of
incorporation or organization)

04-3308180
(I.R.S. Employer Identification No.)

62 Fourth Avenue, Waltham, Massachusetts
(Address of principal executive offices)

02451
(Zip Code)

(781) 890-9989

(Registrant's telephone number, including area code)

Indicate by check mark whether the registrant (1) has filed all reports required to be filed by Section 13 or 15(d) of the Securities Exchange Act of 1934 during the preceding twelve (12) months (or for such shorter period that the registrant was required to file such reports), and (2) has been subject to such filing requirements for the past ninety (90) days.

Yes No

Indicate by check mark whether the registrant is a large accelerated filer, an accelerated filer, a non-accelerated filer or a smaller reporting company. See the definitions of "accelerated filer", "large accelerated filer" and "smaller reporting company" in Rule 12b-2 of the Exchange Act (check one):

Large accelerated filer Accelerated filer Non-accelerated
filer Smaller reporting
company
(Do not check if a

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smaller reporting
company)

Indicate by check mark whether the registrant is a shell company (as defined in Rule 12b-2 of the Exchange Act).

Yes No

Indicate the number of shares outstanding of each of the issuer's classes of common stock, as of the latest practicable date:

13,773,855 shares of common stock, par value \$0.0001 per share, were outstanding as of August 1, 2008.

NEUROMETRIX, INC.
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PART I

FINANCIAL INFORMATION

Item 1. Financial Statements

NeuroMetrix, Inc.

Balance Sheets

(Unaudited)

	June 30, 2008	December 31, 2007
	(Consolidated)	
Assets		
Current assets:		
Cash and cash equivalents	\$ 13,513,856	\$ 7,097,239
Short-term held-to-maturity investments	9,257,911	22,621,741
Restricted cash	45,000	45,000
Accounts receivable, net of allowance for doubtful accounts of \$856,000 and \$906,000 at June 30, 2008 and December 31, 2007, respectively	5,029,026	5,731,697
Inventories	6,145,290	5,354,338
Prepaid expenses and other current assets	1,072,268	710,159
Current portion of deferred costs	421,320	464,061
Total current assets	35,484,671	42,024,235
Restricted cash	408,000	1,458,598
Fixed assets, net	2,739,001	2,973,718
Long-term available-for-sale investment	442,835	1,058,255
Goodwill		5,833,464
Intangible assets, net	4,462,500	2,800,000
Deferred costs	158,973	226,304
Other long-term asset	55,082	
Total assets	\$ 43,751,062	\$ 56,374,574
Liabilities, Minority Interest and Stockholders' Equity		
Current liabilities:		
Accounts payable	\$ 1,548,635	\$ 2,627,889
Accrued compensation	1,726,283	2,127,546
Other accrued expenses	2,219,403	2,308,563
Current portion of deferred revenue	1,689,014	1,643,026
Current portion of capital lease obligation	12,900	12,900
Total current liabilities	7,196,235	8,719,924
Deferred revenue	618,470	891,958
Capital lease obligation net of current portion	11,825	18,275
Other long-term liabilities		14,546
Total liabilities	7,826,530	9,644,703
Minority interest	2,021,250	
Commitments and contingencies		
Stockholders' equity:		
Preferred stock, \$0.001 par value, 5,000,000 shares authorized, none outstanding		
Common stock, \$0.0001 par value; 50,000,000 shares authorized; 13,773,855 and 13,690,134 shares issued and outstanding at June 30, 2008 and December 31, 2007, respectively	1,377	1,369
Additional paid-in capital	111,702,948	110,235,835

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Accumulated deficit	(77,801,043)	(62,065,588)
Accumulated other comprehensive loss		(1,441,745)
Total stockholders' equity	33,903,282	46,729,871
Total liabilities, minority interest and stockholders' equity	\$ 43,751,062	\$ 56,374,574

The accompanying notes are an integral part of these financial statements.

NeuroMetrix, Inc.

Statements of Operations

(Unaudited)

	Three Months Ended		Six Months Ended	
	June 30, 2008	June 30, 2007	June 30, 2008	June 30, 2007
	(Consolidated)		(Consolidated)	
Revenues:				
Medical equipment	\$ 512,309	\$ 1,223,173	\$ 1,262,213	\$ 2,502,377
Consumables	7,615,491	10,048,336	15,601,278	20,321,114
Other	365,371	204,000	727,635	409,804
Total revenues	8,493,171	11,475,509	17,591,126	23,233,295
Costs and expenses:				
Cost of revenues, excluding amortization	2,490,983	3,067,635	4,987,399	6,162,253
Research and development expenses	1,555,082	1,266,691	3,176,812	2,481,763
Sales and marketing expenses	4,016,725	6,019,947	9,626,973	11,995,885
General and administrative expenses	3,967,233	2,868,650	7,779,603	6,210,868
Charge for impaired goodwill			5,833,464	
Amortization of intangible assets	245,000		437,500	
Total costs and expenses	12,275,023	13,222,923	31,841,751	26,850,769
Loss from operations	(3,781,852)	(1,747,414)	(14,250,625)	(3,617,474)
Loss on available-for-sale investment	(1,401,146)		(2,057,165)	
Interest income	202,560	456,423	493,585	949,201
Loss before minority interest	(4,980,438)	(1,290,991)	(15,814,205)	(2,668,273)
Minority interest	52,500		78,750	
Net loss	\$ (4,927,938)	\$ (1,290,991)	\$ (15,735,455)	\$ (2,668,273)
Net loss per common share (basic and diluted):	\$ (0.36)	\$ (0.10)	\$ (1.15)	\$ (0.21)
Weighted average shares used to compute net loss per common share (basic and diluted):	13,693,449	12,611,880	13,691,792	12,608,673

The accompanying notes are an integral part of these financial statements.

NeuroMetrix, Inc.

Statements of Cash Flows

(Unaudited)

	Six Months Ended	
	June 30, 2008	June 30, 2007
	(Consolidated)	
Cash flows from operating activities:		
Net loss	\$(15,735,455)	\$ (2,668,273)
Adjustments to reconcile net loss to net cash used in operating activities:		
Depreciation and amortization	911,544	222,501
Compensation expense associated with stock options	1,366,985	1,428,987
Provision for doubtful accounts	50,565	468,842
Amortization of (discount) premium on investments	(38,572)	10,683
Loss on available-for-sale investment	2,057,165	
Charge for impaired goodwill	5,833,464	
Minority interest	(78,750)	
Changes in operating assets and liabilities:		
Accounts receivable	652,106	982,573
Inventories	(790,952)	(1,551,219)
Prepaid expenses and other current assets	(362,109)	(107,522)
Other long-term asset	(55,082)	
Accounts payable	(1,079,254)	141,266
Accrued expenses and compensation	(490,423)	(2,084,646)
Other long-term liabilities	(14,546)	(29,091)
Deferred revenue and deferred costs	(117,428)	(33,384)
Net cash used in operating activities	(7,890,742)	(3,219,283)
Cash flows from investing activities:		
Purchases of investments	(1,050,598)	(17,811,395)
Maturities of investments	14,453,000	17,895,712
Purchases of fixed assets	(239,327)	(163,624)
Release of restricted cash	1,050,598	
Net cash provided by (used in) investing activities	14,213,673	(79,307)
Cash flows from financing activities:		
Proceeds from sale of stock under employee stock purchase plan	94,733	146,751
Proceeds from exercise of stock options	5,403	20,057
Payments on capital lease	(6,450)	
Net cash provided by financing activities	93,686	166,808
Net increase (decrease) in cash and cash equivalents	6,416,617	(3,131,782)
Cash and cash equivalents, beginning of period	7,097,239	7,909,778
Cash and cash equivalents, end of period	\$ 13,513,856	\$ 4,777,996
Supplemental disclosure of non-cash investing activities:		
Contribution of intangible asset to joint venture by Cyberkinetics	\$ 2,100,000	\$
Equipment acquired under capital lease		38,700

The accompanying notes are an integral part of these financial statements.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements

1. Business and Basis of Presentation

Business

NeuroMetrix, Inc. (the "Company"), a Delaware corporation, was founded in June 1996. The Company designs, develops and markets proprietary medical devices that aid physicians in the assessment and treatment of diseases and injuries of peripheral nerves and that provide regional anesthesia and pain control. The Company also markets a device for the evaluation of retinal disorders. The Company's primary focus to date has been on products that help physicians with the assessment of neuropathies. The Company has three products cleared by the United States Food and Drug Administration ("FDA"), including the ADVANCE System and the NC-stat System for the assessment of neuropathies and the DigiScope for the detection of eye disorders such as diabetic retinopathy. The Company initiated sales and marketing efforts for the ADVANCE System, a traditional nerve conduction and needle electromyography ("NCS/nEMG") system for the assessment of neuropathies, after receiving 510(k) clearance from the FDA in April 2008. The Company operates in one business segment.

On December 26, 2007, the Company acquired substantially all of the assets of EyeTel Imaging, Inc. ("EyeTel") for an aggregate purchase price of 1,050,297 shares of the Company's common stock valued at \$9.8 million, \$175,000 in cash, and \$150,000 in acquisition costs for total consideration of \$10.1 million. The Company also assumed certain specified liabilities totaling \$804,900. EyeTel was engaged in the design, development, and commercialization of proprietary medical devices, including the DigiScope. The Company had previously entered into an exclusive licensing agreement with EyeTel pursuant to which the Company had sales and marketing rights to the DigiScope in the primary diabetes care physician market. The acquisition is intended to further diversify the Company's proprietary medical device product offering and expand sales into additional markets such as the optometry market.

In February 2008, the Company and Cyberkinetics Neurotechnology Systems, Inc., ("Cyberkinetics"), a related party, formed PNIR (Peripheral Nerve Injury Repair) LLC, ("PNIR"), a joint venture incorporated in Delaware, and entered into a Collaboration Agreement and Operating Agreement to develop and commercialize products for the treatment of peripheral nerve injury. The joint venture is initially 50% owned by the Company and 50% owned by Cyberkinetics. Under the terms of the joint venture, the Company has agreed to fund the initial \$2.0 million in product development costs and the Company and Cyberkinetics have agreed to share equally in all costs in excess of the initial \$2.0 million. Cyberkinetics has contributed technology, know-how and intellectual property, primarily relating to their Andara OFS (Oscillating Field Stimulator), ("Andara OFS") technology, to the joint venture.

The Company obtained sales and marketing rights and Cyberkinetics obtained commercial manufacturing rights to any products commercialized under the joint venture. Each party will charge the joint venture at cost for all expenses incurred in connection with their respective commercialization activities. Profits and losses realized from the joint venture will be split equally between the Company and Cyberkinetics based on the initial ownership percentage.

Prior to the formation of the joint venture, in November 2007, the Company made an investment of \$2.5 million for the purchase of approximately 5.4 million shares of common stock of Cyberkinetics, representing approximately 13% of Cyberkinetics' issued and outstanding shares at the time of the investment, at a price of \$0.46 per share. The Company also received a warrant to purchase up to approximately 2.7 million shares of Cyberkinetics common stock. The warrant is exercisable at \$0.46

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

1. Business and Basis of Presentation (Continued)

per share and has a term of five years, but will be required to be exercised if Cyberkinetics receives FDA approval of a Humanitarian Device Exemption ("HDE") filing for the Andara OFS device for acute spinal cord injuries by December 31, 2008. (See Note 2.)

The accompanying unaudited consolidated balance sheet as of June 30, 2008, unaudited statements of operations for the three and six month periods ended June 30, 2008 (consolidated) and 2007 and the unaudited statements of cash flows for the six month periods ended June 30, 2008 (consolidated) and 2007 have been prepared in accordance with accounting principles generally accepted in the United States of America for interim financial information and with the instructions to Form 10-Q and Article 10 of Regulation S-X. Accordingly, they do not include all of the information and footnotes required by accounting principles generally accepted in the United States of America for complete financial statements. In the opinion of management, all adjustments (consisting only of normal recurring accruals) considered necessary for a fair statement of the results of operations have been included. Operating results for the three and six month periods ended June 30, 2008 are not necessarily indicative of the results that may be expected for the year ending December 31, 2008 or any other period. These financial statements and notes should be read in conjunction with the financial statements for the year ended December 31, 2007 included in the Company's Annual Report on Form 10-K (File No. 000-50856). The accompanying balance sheet as of December 31, 2007 has been derived from audited financial statements prepared at that date, but does not include all disclosures required by accounting principles generally accepted in the United States of America.

Revenue

Medical equipment revenues (formerly referred to as diagnostic device revenues) consist of sales of NC-stat devices and NC-stat docking stations and ADVANCE devices and related modules.

Consumables revenue (formerly referred to as biosensor revenues) consists of sales of single use nerve specific electrodes which are used with the NC-stat System and the ADVANCE System.

Other revenues consist entirely of revenues relating to the DigiScope.

Principles of Consolidation

The consolidated financial statements as of and for the three and six months ended June 30, 2008 reflect the Company's financial statements and those of PNIR, a joint venture with Cyberkinetics. In accordance with Financial Accounting Standards Board ("FASB") Interpretation No. 46, *Consolidation of Variable Interest Entities (revised December 2003) an interpretation of ARB No. 51*, ("FIN 46(R)"), the Company consolidates variable interest entities in which the Company is the primary beneficiary. For such consolidated entities in which the Company owns less than a 100% interest, the Company records minority interest in its consolidated statements of operations for the ownership interest of the minority owner. All material intercompany balances and transactions have been eliminated in consolidation.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

1. Business and Basis of Presentation (Continued)

the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Recent Accounting Pronouncements

In May 2008, the FASB issued Statement of Financial Accounting Standards ("SFAS") No. 162, *"The Hierarchy of Generally Accepted Accounting Principles"* ("SFAS No. 162"). SFAS No. 162 transfers the hierarchy of GAAP from the auditing literature to the accounting standards and identifies a consistent hierarchy for selecting accounting principles to be used in applying U.S. GAAP. SFAS No. 162 is effective 60 days following the SEC's approval of PCAOB Auditing Standard No. 6, *"Evaluating Consistency of Financial Statements"* ("AS/6"). The company does not expect the adoption of SFAS No. 162 to have any effect on its financial position, results of operations or cash flows.

In April 2008, the FASB issued Staff Position Statement of Financial Accounting Standards ("SFAS") No. 142-3, *"Determination of the Useful Life of Intangible Assets"* ("FSP SFAS No. 142-3"). FSP SFAS No. 142-3 amends SFAS No. 142, *"Goodwill and Other Intangible Assets"* ("SFAS No. 142") to improve the consistency between the useful life of a recognized intangible asset under SFAS No. 142 and the period of expected cash flows used to measure the fair value of the asset under FASB SFAS No. 141, *"Business Combinations"* ("SFAS No. 141"), and other U.S. GAAP. FSP SFAS No. 142-3 is effective for fiscal years beginning after December 15, 2008. The guidance for determining the useful life of a recognized intangible asset is to be applied prospectively for intangibles acquired after the adoption date. Certain disclosure requirements will impact existing intangibles. The Company is currently evaluating the impact of the adoption of FSP SFAS No. 142-3.

In December 2007, the FASB issued SFAS No. 160, *"Noncontrolling Interests in Consolidated Financial Statements"* ("SFAS No. 160"). SFAS No. 160 requires that noncontrolling interests be reported as stockholders equity, a change that will affect financial statement presentation of minority interests in its consolidated subsidiaries. SFAS No. 160 also establishes a single method of accounting for changes in a parent's ownership interest in a subsidiary as long as that ownership change does not result in deconsolidation. SFAS No. 160 is required to be applied prospectively in 2009, except for the presentation and disclosure requirements which are to be applied retrospectively. SFAS No. 160 is effective for fiscal years beginning after December 15, 2008. Except for certain reclassifications required upon adoption of SFAS No. 160 and subject to change in ownership of PNIR, the joint venture, if any, the Company does not expect the adoption of SFAS No. 160 to have a material impact to its financial position, results of operations or cash flows.

In February 2007, the FASB issued SFAS No. 159, *"The Fair Value Option for Financial Assets and Financial Liabilities, including an amendment of FASB Statement No. 115"* ("SFAS No. 159"). SFAS No. 159 permits entities to choose to measure many financial instruments and certain other items at fair value that are not currently required to be measured at fair value. Unrealized gains and losses on items for which the fair value option has been elected are reported in earnings. SFAS No. 159 does not affect any existing accounting literature that requires certain assets and liabilities to be carried at fair value. SFAS No. 159 is effective for fiscal years beginning after November 15, 2007. The Company did not elect to measure at fair value any additional assets or liabilities that are not already measured at fair value under existing standards. The adoption of SFAS No. 159 did not have a material impact on its financial position, results of operations or cash flows.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

1. Business and Basis of Presentation (Continued)

In September 2006, the FASB issued SFAS No. 157, "Fair Value Measurements" ("SFAS No. 157"). SFAS No. 157 defines fair value in numerous accounting pronouncements, establishes a framework for measuring fair value in generally accepted accounting principles ("GAAP") and expands disclosures related to the use of fair value measures in financial statements. SFAS No. 157 does not expand the use of fair value measures in financial statements, but standardizes its definition and guidance in GAAP. SFAS No. 157 emphasizes that fair value is a market-based measurement and not an entity-specific measurement based on an exchange transaction in which the entity sells an asset or transfers a liability (exit price). SFAS No. 157 establishes a fair value hierarchy from observable market data as the highest level to fair value based on an entity's own fair value assumptions as the lowest level. SFAS No. 157 is effective for assets and liabilities as of January 1, 2008. In February 2008, the FASB issued FASB Statement of Position, ("FSP") No. 157-2 "Partial Deferral of the Effective Date of Statement 157," ("FSP No. 157-2"), which delays the effective date of SFAS No. 157 for all non-financial assets and non-financial liabilities, except those that are recognized or disclosed at fair value in the financials statements on a recurring basis (at least annually) to fiscal years beginning after November 15, 2008. The adoption of SFAS No. 157 did not have a material effect on the Company's financial position, results of operations or its cash flows. (See Note 10.)

2. Comprehensive Loss

SFAS No. 130, "Reporting Comprehensive Income" establishes standards for reporting and displaying comprehensive income and its components in a full set of general-purpose financial statements. In November 2007, the Company made an investment of \$2.5 million in shares and warrants for Cyberkinetics common stock and is accounting for this investment as an available-for-sale security under the provisions of SFAS No. 115, "Accounting for Certain Investments in Debt and Equity Securities". At December 31, 2007, the Company recorded \$1.4 million as a temporary impairment within other comprehensive income. For the three and six months ended June 30, 2008, the Company reassessed its investment in Cyberkinetics and based on the outlook for Cyberkinetics and the period of the time that the common stock of Cyberkinetics has traded below the price paid by the Company for its investment, has recognized losses of \$1.4 million and \$2.1 million, respectively, due to an impairment in the value of the investment that the Company determined was other-than-temporary.

	Three Months Ended		Six Months Ended	
	June 30, 2008	June 30, 2007	June 30, 2008	June 30, 2007
	(Consolidated)		(Consolidated)	
Comprehensive loss:				
Net loss	\$(4,927,938)	\$(1,290,991)	\$(15,735,455)	\$(2,668,273)
Other comprehensive income:				
Reclassification adjustment for recognized loss included in net earnings			1,441,745	
Other comprehensive income			1,441,745	
Comprehensive loss	\$(4,927,938)	\$(1,290,991)	\$(14,293,710)	\$(2,668,273)

The Company may be required to record future losses on its Cyberkinetics investment if there is not an improvement in the Cyberkinetics outlook or if their common stock price declines further. At June 30, 2008, the Company's investment in Cyberkinetics was \$442,835.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

3. Net Loss Per Common Share

The Company accounts for and discloses net loss per common share in accordance with SFAS No. 128, "Earnings Per Share". Basic net loss per common share is computed by dividing net loss by the weighted average number of common shares outstanding. Diluted net loss per common share is computed by dividing net loss by the weighted average number of common shares and dilutive potential common share equivalents then outstanding. Potential common shares consist of shares issuable upon the exercise of stock options (using the treasury stock method.)

The following potentially dilutive common shares were excluded from the calculation of diluted net loss per common share because their effect was antidilutive for each of the periods presented:

	Three Months Ended		Six Months Ended	
	June 30, 2008	June 30, 2007	June 30, 2008	June 30, 2007
Options outstanding	2,477,436	1,794,029	2,477,436	1,794,029

4. Inventories

Inventories consist of the following:

	June 30, 2008	December 31, 2007
Purchased components	\$ 1,412,103	\$ 1,216,758
Finished goods	4,733,187	4,137,580
	\$ 6,145,290	\$ 5,354,338

5. Acquisition

On December 26, 2007, the Company acquired substantially all of the assets of EyeTel for an aggregate purchase price of 1,050,297 shares of the Company's common stock valued at \$9.8 million, \$175,000 in cash, and \$150,000 in acquisition costs for a total consideration of \$10.1 million. The Company also assumed certain specified liabilities totaling \$804,900. EyeTel was engaged in the design, development, and commercialization of proprietary medical devices, including the DigiScope, a device that helps physicians detect eye disorders such as diabetic retinopathy, the leading cause of blindness in patients with diabetes. The Company had previously entered into an exclusive licensing agreement with EyeTel pursuant to which the Company had sales and marketing rights to the DigiScope in the primary diabetes care physician market. The acquisition is intended to further diversify the Company's proprietary medical equipment product offering and expand sales into additional markets such as the optometry market.

Pro Forma Financial Summary (Unaudited)

The following pro forma financial summary is presented as if the acquisition of EyeTel was completed as of the beginning of 2007. The pro forma combined results are not necessarily indicative

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

5. Acquisition (Continued)

of the actual results that would have occurred had the acquisition been consummated on that date, or of the future operations of the combined entities.

	Pro Forma Results	
	Three Months	Six Months
	Ended June 30, 2007	Ended June 30, 2007
Total revenues	\$ 11,541,623	\$ 23,367,972
Net loss	\$ (3,465,375)	\$ (6,846,609)
Net loss per common share (basic and diluted):	\$ (0.25)	\$ (0.50)
Weighted average shares used to compute net loss per common share (basic and diluted):	13,662,177	13,658,970

6. Goodwill and Intangible Assets

Goodwill

As a result of the acquisition of substantially all of the assets of EyeTel on December 26, 2007, the Company recorded approximately \$5.8 million of goodwill on its balance sheet at December 31, 2007. In accordance with the provisions of SFAS No. 142, "Goodwill and Other Intangible Assets" ("SFAS No. 142"), the Company is required to assess the realizability of goodwill annually, and whenever events or changes in circumstances suggest that the carrying amount may not be recoverable. The operations of EyeTel were incorporated into the Company's one segment and the Company determined that it is comprised of a single reporting unit for goodwill impairment testing. Subsequent to the American Medical Association ("AMA") CPT Editorial Panel ("CPT Panel") meeting in February 2008, the Company's common stock price declined significantly such that as of March 31, 2008, the Company's publicly traded market value was below its net book value. Based on this, the Company determined that an interim goodwill impairment test was required. As the net book value of the Company's assets exceeded the enterprise value, the Company performed step two of its SFAS No. 142 impairment test in which it assessed the fair value of all recorded and unrecorded tangible and intangible assets and liabilities, including its recently acquired EyeTel and PNIR intangible assets. The Company determined that no assets were impaired and determined that there was no residual value of goodwill. Accordingly, the Company recorded a charge of \$5.8 million to write off the goodwill balance during the three months ended March 31, 2008.

Intangible Assets

Intangible assets at June 30, 2008 and December 31, 2007 were \$4.5 million and \$2.8 million, respectively. As of June 30, 2008, intangible assets included \$2.8 million of gross intangible assets representing the fair value of technology and intellectual property resulting from the Company's December 26, 2007 acquisition of substantially all of the assets of EyeTel and \$2.1 million of gross intangible assets representing the value of the contribution of technology and intellectual property by Cyberkinetics upon the formation of PNIR. (See Note 1.) Accumulated amortization of intangible assets at June 30, 2008 and December 31, 2007 was \$437,500 and \$0, respectively. Amortization expense for the three and six months ended June 30, 2008 was \$245,000 and \$437,500, respectively. There was no amortization expense for the same periods a year ago.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

6. Goodwill and Intangible Assets (Continued)

The Company amortizes its intangible assets using the straight-line method over their estimated economic lives, which is estimated to be five years.

The estimated future amortization expense for intangible assets for the remainder of 2008, the four succeeding fiscal years and thereafter is as follows:

	Estimated Amortization
2008 (remaining six months)	\$ 490,000
2009	980,000
2010	980,000
2011	980,000
2012	980,000
Thereafter	52,500

The recoverability of the Company's intangible assets is dependent upon its ability to successfully market the DigiScope and to successfully develop marketable products from PNIR, its joint venture with Cyberkinetics. If there are events or conditions that suggest the Company's ability to recover the carrying value of these or other long lived assets is in doubt, the Company will be required to perform future impairment tests of long lived assets under SFAS No. 144 "Accounting for the Impairment or Disposal of Long-Lived Assets". Impairment charges, if any, could be material to the Company's results of operations and financial condition.

7. Long-Term Available-For-Sale Investment

In November 2007, the Company made an investment of \$2.5 million for the purchase of approximately 5.4 million shares of common stock of Cyberkinetics, representing approximately 13% of Cyberkinetics' issued and outstanding shares at the time of the investment, at a price of \$0.46 per share. The Company also received a warrant to purchase up to approximately 2.7 million shares of Cyberkinetics common stock. The warrant is exercisable at \$0.46 per share and has a term of five years, but will be required to be exercised if Cyberkinetics receives FDA approval of an HDE filing for the Andara OFS device for acute spinal cord injuries by December 31, 2008.

The Company accounts for the investment in Cyberkinetics as an available-for-sale investment and reviews the carrying value of this investment quarterly to determine whether an other-than-temporary decline in market value exists. The Company marked this investment to market for the three and six months ended June 30, 2008 and recognized losses of \$1.4 million and \$2.1 million, respectively, because the decline in the value of this investment was considered other-than-temporary. The Company considered factors such as the length of time the value of the investment has been below its original purchase price, the financial condition of the investee and near-term prospects for the investee's recovery to original purchase price and the Company's intent with regard to the underlying investment. The Company may record future losses on its Cyberkinetics investment if there is not an improvement in the Cyberkinetics outlook or if the market value of their common stock declines further.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

8. Other Balance Sheet Items

Other accrued expenses consist of the following:

	June 30, 2008	December 31, 2007
Professional services	\$ 793,717	\$ 706,952
Sales taxes	374,802	489,555
Other	1,050,884	1,112,056
	\$2,219,403	\$ 2,308,563

Product Warranty Costs

The Company accrues estimated product warranty costs at the time of sale which are included in cost of sales in the statements of operations. The amount of the accrued warranty liability is based on historical information such as past experience, product failure rates, number of units repaired and estimated cost of material and labor. The liability for product warranty costs is included in accrued expenses in the balance sheet.

The following is a rollforward of the Company's accrued warranty liability for the three and six month periods ended June 30, 2008 and 2007:

	Three Months Ended		Six Months Ended	
	June 30, 2008	June 30, 2007	June 30, 2008	June 30, 2007
Balance at beginning of period	\$ 252,466	\$ 252,258	\$ 251,948	\$ 231,725
Accrual for warranties	152,217	211,688	333,260	396,976
Settlements made	(173,391)	(183,743)	(353,916)	(348,498)
Balance at end of period	\$ 231,292	\$ 280,203	\$ 231,292	\$ 280,203

9. Joint Venture with Cyberkinetics

In February 2008, the Company and Cyberkinetics formed PNIR and entered into a Collaboration Agreement and Operating Agreement to develop and commercialize products for the treatment of peripheral nerve injury. The joint venture is initially 50% owned by the Company and 50% owned by Cyberkinetics. Under the terms of the joint venture, the Company has agreed to fund the initial \$2.0 million in product development costs and the Company and Cyberkinetics will share equally in all costs in excess of the initial \$2.0 million. Cyberkinetics has contributed technology, know-how and intellectual property, primarily relating to their Andara OFS technology, to the joint venture.

The Company obtained sales and marketing rights and Cyberkinetics obtained commercial manufacturing rights to any products commercialized under the joint venture. Each party will charge the joint venture at cost for all expenses incurred in connection with their respective commercialization activities. Profits and losses realized from the joint venture will be split equally between the Company and Cyberkinetics based on the initial ownership percentage.

The joint venture is considered to be a variable interest entity under the provisions of FIN 46(R). The Company has determined that it is the primary beneficiary based on a review of the relative economic risks of the two parties to the joint venture. As a result, the Company has consolidated the

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

9. Joint Venture with Cyberkinetics (Continued)

joint venture and recorded the \$2.1 million contribution of technology and intellectual property by Cyberkinetics to intangible assets and a minority interest of \$2.1 million at the formation date of the joint venture. The fair value of the intangible assets was determined primarily by an assessment made by the Company's management applying the income approach and a relief from royalty approach.

Cyberkinetics, in its Form 10-Q filed on May 15, 2008, disclosed that if, before the end of September 2008, it has not been successful in raising additional capital and it has not received approval from the FDA of its HDE filing for the Andara OFS device for acute spinal cord injuries, thereby triggering the required exercise of the warrant held by us, it may be required to cease operations or seek bankruptcy protection. If Cyberkinetics is required to cease operations or seek bankruptcy protection, or if other adverse developments relating to its business or financial condition occur, the value of our investment in, and our joint venture with, Cyberkinetics could be adversely affected.

10. Commitments and Contingencies

Cyberkinetics

In connection with the Company's investment in Cyberkinetics, the Company received a warrant to purchase up to approximately 2.7 million shares of Cyberkinetics common stock. The warrant, exercisable at \$0.46 per share, or approximately \$1.25 million, has a term of five years, and is required to be exercised if Cyberkinetics receives FDA approval of an HDE filing for the Andara OFS device for acute spinal cord injuries by December 31, 2008.

In February 2008, the Company entered into a Collaboration Agreement and Operating Agreement with Cyberkinetics and formed PNIR, a joint venture to develop and commercialize products for the treatment of peripheral nerve injury. Under the terms of the joint venture, the Company has agreed to fund the initial \$2.0 million in product development costs and has agreed to share equally in all costs in excess of the initial \$2.0 million. As of June 30, 2008, there have been no expenses or cash funding in connection with PNIR other than amortization of the intangible asset.

Operating Lease

In February 2008, the Company amended the Lease Agreement dated October 18, 2000 between Fourth Avenue LLC and the Company for office and engineering laboratory space. The amendment extends the term of the lease, previously scheduled to expire on March 31, 2009, through March 31, 2013. Base rent for the period April 2009 through March 2013 will be reduced from the current level of \$930,000 annually to a range of \$675,000 to \$765,000 annually. This amendment also provides the Company reimbursement from Fourth Avenue LLC for certain improvements and renovations to the facility up to a maximum of \$240,000.

In connection with the amendment of the lease, the amount of the irrevocable letter of credit required to be maintained by the Company for the benefit of the lessor was reduced from \$1,430,000 to \$400,000. The letter of credit must be secured by a certificate of deposit in an amount equal to 102% of the letter of credit as security.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

10. Commitments and Contingencies (Continued)

Future minimum lease payments under noncancelable operating leases as of June 30, 2008 are as follows:

2008 (remaining six months)	\$ 465,000
2009	738,750
2010	697,500
2011	727,500
2012	757,500
thereafter	191,250
Total minimum lease payments	\$3,577,500

11. Fair Value Measurements

The Company adopted SFAS No. 157 effective January 1, 2008 for its financial assets and liabilities that are re-measured and reported at fair value at each reporting period. In accordance with the provisions of FSP No. 157-2, the Company elected to defer implementation of SFAS No. 157 as it related to its non-financial assets and liabilities that are recognized and disclosed at fair value in the financial statements on a non-recurring basis until January 1, 2009. The Company is evaluating the impact, if any, that SFAS No. 157 will have on our non-financial assets and liabilities.

The adoption of SFAS No. 157 with respect to financial assets and liabilities and non-financial assets and liabilities that are re-measured and reported at fair value at least annually was not material to the Company's financial position, results of operations or its cash flows for the period ended June 30, 2008. SFAS No. 157 defines fair value, establishes a framework for measuring fair value in applying generally accepted accounting principles, and expands disclosures about fair value measurements. SFAS No. 157 identifies two kinds of inputs that are used to determine the fair value of assets and liabilities: observable and unobservable. Observable inputs are based on market data or independent sources while unobservable inputs are based on the company's own market assumptions. Once inputs have been characterized, SFAS No. 157 requires companies to prioritize the inputs used to measure fair value into one of three broad levels. Fair values determined by Level 1 inputs utilized quoted prices (unadjusted) in active markets for identical assets or liabilities. Fair values identified by Level 2 inputs utilize observable inputs other than level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the related assets or liabilities. Fair values identified by Level 3 inputs are unobservable data points and are used to measure fair value to the extent that observable inputs are not available. Unobservable inputs reflect the Company's own assumptions about the assumptions that market participants would use at pricing the asset or liability.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

11. Fair Value Measurements (Continued)

The following table provides fair value measurement information for the Company's major categories of financial assets and liabilities measured on a recurring basis:

	Fair Value Measurements at Reporting Date Using			
	Quoted Prices			
		in	Significant	Significant
		Active	Other	Unobservable
		Markets	Observable	Inputs
		for Identical	Inputs	Inputs
		Assets	(Level 2)	(Level 3)
	June 30, 2008	(Level 1)		
Assets:				
Cash equivalents	\$ 12,344,065	\$ 12,344,065	\$	\$
Long-term available-for-sale investment	442,835	442,835		
Total	\$ 12,786,900	\$ 12,786,900	\$	\$

As of June 30, 2008, the Company's long-term investment consisted of an investment in Cyberkinetics, a publicly traded security whose fair value is readily determinable.

12. Legal Matters

In March and April 2008, a series of putative securities class action and shareholder derivative lawsuits were filed against the Company and certain of its current and former executive officers and directors alleging, among other things, that the Company violated the federal securities laws and other laws by allegedly making material false and misleading statements for various periods from August 2004 through the dates the lawsuits were filed and by allegedly failing to disclose material information to the investing public. The Company believes that the claims in the cases are without merit and will vigorously contest these lawsuits.

In the second quarter of 2006, the Company received a subpoena from the Office of Inspector General ("OIG") of the Department of Health and Human Services requesting documents in connection with an investigation of potential violations of the federal anti-kickback statute and False Claims Act. In addition, on June 21, 2007, the Company received a subpoena from the U.S. Attorney's Office for the District of Massachusetts requesting documents in connection with an investigation by the United States Department of Justice ("DOJ"). The DOJ is investigating various aspects of the Company's practices relating to the NC-stat System, including sales and marketing practices. The Company is cooperating with both investigations. During 2007, the Company formed a Special Committee of its Board of Directors to provide oversight of an ongoing independent review of the Company's sales and marketing practices and of the Company's continuing cooperation with the DOJ and OIG investigations. The Company cannot predict the ultimate outcome of these investigations. The Company is unable to determine when these matters will be resolved, whether any additional areas of inquiry will be opened, or any outcome of this matter and accordingly these financial statements do not include any amounts related to the outcome of this matter. Any negative findings in this matter could result in fines, penalties, or program exclusions, which could have a material adverse effect on the Company's financial condition, results of operations, and cash flows.

NeuroMetrix, Inc.

Notes to Unaudited Financial Statements (Continued)

13. Restructuring Related Activity

In May 2008, the Company implemented a plan to reduce the size of its direct sales force and to take certain other actions to reduce its operating expenses, largely as a result of a decline in revenues. These actions affected 24 positions, substantially all of which were in sales. The total cost associated with these actions, including severance and benefit costs, was \$318,981.

Effective May 31, 2008, the Chief Operating Officer of the Company entered into a separation agreement with the Company. Under the terms of the separation agreement, he will receive continuation of his salary, car allowance and health benefits for nine months following the effectiveness of his resignation, equal to \$217,970, which we recorded during the quarter ended March 31, 2008 under the provisions of SFAS No. 112 "Employers Accounting for Postemployment Benefits an amendment of FAS Statements No. 5 and 43." In addition, he received a lump sum payment equal to three months salary and car allowance totaling \$69,810, which we recorded during the quarter ended June 30, 2008 under the provisions of SFAS No. 146, "Accounting for Costs Associated with Exit or Disposal Activities."

The following table provides a rollforward of the current liability balance for the action taken, substantially all of which was recorded as sales and marketing expense on the Company's Consolidated Statement of Operations, the balance of which will be paid out in semi-monthly installments through February 28, 2009.

	Three Months Ended June 30, 2008	Six Months Ended June 30, 2008
Balance at beginning of period	\$ 217,970	\$ 606,761
Accrual for severance	388,791	(377,140)
Payments made	(377,140)	(377,140)
Balance at end of period	\$ 229,621	\$ 229,621

Item 2. Management's Discussion and Analysis of Financial Condition and Results of Operations

You should read the following discussion of our financial condition and results of operations in conjunction with our financial statements and the accompanying notes to those financial statements included elsewhere in this Quarterly Report on Form 10-Q. This discussion contains forward-looking statements that involve risks and uncertainties. For a description of factors that may cause our actual results to differ materially from those anticipated in these forward looking statements, please refer to the section of this Quarterly Report on Form 10-Q titled "Cautionary Note Regarding Forward-Looking Statements." Unless the content otherwise requires, all references to "we", "us", "the Company" or "NeuroMetrix" in this Quarterly Report on Form 10-Q refers to NeuroMetrix, Inc. and its consolidated entities unless the content requires otherwise.

Overview

NeuroMetrix was founded in June 1996. We design, develop and market proprietary medical devices that aid physicians in the assessment and treatment of diseases and injuries of peripheral nerves and that provide regional anesthesia and pain control. We also market a device for the evaluation of retinal disorders. Our focus to date has been on products that help physicians with the assessment of neuropathies and neurovascular conditions. We have three products cleared by the United States Food and Drug Administration, or FDA, including the ADVANCE System and the NC-stat System for the assessment of neuropathies and the DigiScope for the detection of eye disorders such as diabetic retinopathy. We initiated our sales and marketing efforts in May 2008 for the ADVANCE System, a traditional nerve conduction and needle electromyography, or NCS/nEMG, system for the assessment of neuropathies, which received 510(k) clearance from the FDA in April 2008.

We believe that our neuropathy assessment systems can improve the quality and efficiency of patient care by offering physicians the ability to objectively assess patients with neuropathies, resulting in earlier and more accurate detection, and, potentially improved clinical outcomes. We are presently focusing our medical equipment sales efforts primarily on the ADVANCE System and we are marketing this system primarily to specialist physicians with peripheral nerve expertise, including neurologists, physical medicine and rehabilitation physicians, neurosurgeons, orthopedic and hand surgeons and pain medicine physicians. The ADVANCE System is a system for the performance of traditional nerve conduction studies and needle electromyography procedures. The ADVANCE System is comprised of: (1) single use surface electrodes (currently limited to our nerve specific electrodes which are also used with the NC-stat System) and needles, (2) the ADVANCE device and related modules, and (3) a communication hub that enables the physician's office to network their device to our onCall Information System for data archiving, report generation and other network services.

The NC-stat System, our first product for the assessment of neuropathies, has been sold historically to a broad group of physicians, including primary care physicians and specialists since its initial market launch in May 1999 and is used in over 5,400 physician's offices and clinics in the United States. Over 1.0 million patients have had nerve conduction tests performed using the NC-stat System. Substantially all of our revenues to date have been derived from sales of the NC-stat System. Due to reimbursement uncertainty described in further detail below, we are presently focusing our medical equipment sales efforts primarily on sales of the ADVANCE System to specialist physicians with peripheral nerve expertise. We continue to sell electrodes to and support our NC-stat customer base, work with our existing NC-stat customers in specialty practices to convert them to the ADVANCE System and provide solutions that enable our customers to provide this important diagnostic service to their patients.

Acquisition

In December 2007, we acquired substantially all of the assets of EyeTel Imaging, Inc., or EyeTel, and their product, the DigiScope, a product used for the detection of eye disorders such as diabetic retinopathy, an eye disease prevalent in patients with diabetes. The DigiScope is marketed to the primary diabetes care physician office market and the optometry market. Prior to the acquisition of substantially all of the assets of EyeTel, we had been marketing the DigiScope to the primary diabetes care physician office market through an exclusive sales and marketing license with EyeTel. The DigiScope allows physicians to detect diabetic retinopathy and refer patients to an eye specialist for treatment if deemed necessary based on the results. It is recommended by the American Diabetes Association, or ADA, that all patients with diabetes receive an annual dilated eye examination to monitor vision. According to the ADA, there are approximately 21.0 million people in the United States with diabetes and only approximately 50% comply with the recommendation to have an annual eye examination. We believe that a product such as the DigiScope could potentially lead to an increase in the level of testing and result in the earlier detection of eye diseases in patients with diabetes and potentially improved clinical outcomes.

Corporate Collaborations

In November 2007, we made an investment of \$2.5 million for the purchase of approximately 5.4 million shares of common stock of Cyberkinetics Neurotechnology Systems, Inc., or Cyberkinetics. We also received a warrant to purchase up to approximately 2.7 million shares of Cyberkinetics common stock. The warrant will be required to be exercised if Cyberkinetics receives FDA approval of a Humanitarian Device Exemption, or HDE, filing for the Andara Oscillating Field Stimulator, or Andara OFS, device for acute spinal cord injuries by December 31, 2008. In connection with the investment in Cyberkinetics, we also received certain rights, including a right of first negotiation for the acquisition of Cyberkinetics and a right of first negotiation for the commercialization of the Andara OFS device for the treatment of acute spinal cord injuries. This right of first negotiation for the acquisition of Cyberkinetics has expired.

In February 2008, we entered into a Collaboration Agreement and Operating Agreement with Cyberkinetics to develop and commercialize products for the treatment of peripheral nerve injury and formed PNIR (Peripheral Nerve Injury Repair) LLC, or PNIR, a joint venture with 50% ownership held by us and 50% ownership held by Cyberkinetics.

Business Developments

Historically, we have derived substantially all of our revenues from the sales of the NC-stat System, including the sale of medical equipment and consumables, which we also refer to as nerve specific electrodes, previously referred to as biosensors. During the second quarter of 2008, we recognized our initial revenues from sales of the ADVANCE System to specialist physicians with peripheral nerve expertise. We also derive revenues from sales of the DigiScope to physician groups and optometry clinics.

Our revenues declined to \$8.5 million for the three months ended June 30, 2008, compared to \$11.5 million for the same period in 2007. Additionally, we incurred a net loss of \$4.9 million for the three months ended June 30, 2008, compared to a net loss of \$1.3 million for the same period in 2007. We believe that the decline in our revenues has been caused primarily by the current environment relating to the reimbursement by third-party payers of nerve conduction studies performed using the NC-stat System and we expect that our revenues from sales of the NC-stat System may continue to be adversely affected by the uncertainty regarding reimbursement.

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Significant developments impacting and relating to our financial condition and results of operations as of and for the three and six months ended June 30, 2008 and expected to impact future periods, include:

Reimbursement developments relating to nerve conduction studies on our revenues as described below, including the outcome of the AMA CPT Editorial Panel review of reimbursement coding for nerve conduction studies performed using equipment such as the NC-stat System and the material and adverse impact the potential issuance of a Category III CPT code by the AMA CPT Editorial Panel is likely to have on our revenues and operating results.

The recent launch of the ADVANCE System, a system for the performance of traditional nerve conduction studies and needle electromyography procedures, which occurred in May 2008 following the 510(k) clearance by the FDA. We are primarily focusing our sales and marketing efforts for the ADVANCE System on specialist physicians with peripheral nerve expertise, including neurologists, physical medicine and rehabilitation physicians, neurosurgeons, orthopedic and hand surgeons and pain medicine physicians in the United States.

Sales and marketing efforts for the DigiScope as a result of the acquisition of substantially all of the assets of EyeTel and with the launch into the optometry market. We are currently evaluating the level of sales and marketing effort and the development effort we plan to allocate to the DigiScope.

The reduction in the size of the sales force from 50 regional sales managers to 30 regional sales managers and certain other cost reduction steps taken during the second quarter of 2008. These steps were taken largely as a result of a decline in revenues we have experienced. We expect that our operating expenses will be reduced by approximately \$5.0 million on an annualized basis, as a result of these actions, compared to operating expense levels prior to these actions being taken. Our sales and marketing expenses declined by approximately \$1.6 million during the second quarter of 2008 as compared to the first quarter of 2008 primarily due to this cost reduction program.

Our decision to terminate the relationships with our independent sales agencies in the second half of 2007, which we believe has adversely impacted our revenues, but has resulted in the elimination of commissions on recurring revenues from accounts originally sourced through our independent sales agencies. Total commissions relating to independent sales agencies were \$0 and \$833,500 for the three months ended June 30, 2008 and 2007, respectively.

The government investigations by the Office of Inspector General, or OIG, of the Department of Health and Human Services and the U.S. Department of Justice, or DOJ, that we are subject to, which resulted in significantly increased legal expenses in 2007 and in the first six months of 2008. We cannot predict the potential impact of these investigations on our financial condition or financial results in 2008.

Continued progress developing a product designed to precisely deliver pharmacologic agents such as anesthetics and corticosteroids in close proximity to nerves for regional anesthesia, pain control and the treatment of focal neuropathies such as carpal tunnel syndrome for which we plan to file one or more 510(k) applications with the FDA in the second half of 2008. We continue to invest resources on the development of this product.

The investment we made in Cyberkinetics in the fourth quarter of 2007, which included the purchase of \$2.5 million of Cyberkinetics common stock and the receipt of a warrant to purchase an additional \$1.25 million of Cyberkinetics common stock that we must exercise in certain circumstances. The value of this investment has declined substantially and we believe that this decline is not temporary in nature, and have therefore taken a charge to earnings for the decline in value through June 30, 2008. We entered into a joint venture with Cyberkinetics for

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the development of a treatment for peripheral nerve injury, for which we have committed to fund the first \$2.0 million in development expenses and 50% of any development costs exceeding the initial \$2.0 million.

Reimbursement from third-party payers is an important element of success for medical device companies. As our presence in the market over the last several years has expanded with the use of the NC-stat System, physicians using NC-stat have experienced and are likely to continue to experience an increased focus from third-party payers and governmental agencies regarding the reimbursement of nerve conduction studies performed using this device and an increased focus from these organizations regarding the professional requirements for performing nerve conduction studies in general. A number of third-party payers, including commercial payers, have taken and may continue to take the position of not reimbursing our customers for procedures performed using the NC-stat System.

During the second half of 2006 and in 2007, several local Medicare carriers issued draft local coverage determinations, or LCDs, final LCDs or coding articles particularly addressing coverage and reimbursement policies under Medicare for nerve conduction studies performed using the NC-stat System. Several of these carriers indicated that they will not reimburse physicians under Medicare for nerve conduction studies performed using the NC-stat System under the three existing Current Procedural Terminology, or CPT, codes for conventional nerve conduction studies (95900, 95903 and 95904), which provide for levels of reimbursement fixed by the Center for Medicaid and Medicare Services but rather that physicians must submit claims for reimbursement for these procedures under a miscellaneous CPT code (95999), in which case the local carriers may determine the level of reimbursement to be paid, if any. Currently, there are four local Medicare carriers with final LCDs which address coverage and reimbursement policies under Medicare for nerve conduction studies performed using the NC-stat System. In certain regions impacted by these reimbursement decisions, our customers have experienced lower levels of reimbursement and higher levels of claims denials. If physicians do not receive adequate reimbursement under the miscellaneous CPT code from those local carriers, our existing customers may continue to limit or curtail their use of the NC-stat System and we may be unable to obtain new customers, both of which could materially and adversely impact our revenues and profitability.

The AMA formed a work group in early 2007 to examine the reimbursement coding of nerve conduction studies performed using nerve conduction equipment, including the NC-stat System. The findings of this work group were presented to the AMA CPT Panel at a meeting in February 2008. During the CPT Panel meeting, several proposals for new Category I CPT codes, which generally are included in the Medicare physician fee schedule and are assigned specified reimbursement values, were presented by the chairpersons of the work group and were supported by several physician societies. Although the AMA voted on a Category III code describing nerve conduction studies performed with pre-configured electrodes at its February 2008 meeting, the AMA did not publish any new Category III CPT codes for nerve conduction studies on July 1, 2008 when it published its list of new Category III CPT codes. However, the AMA could still publish a Category III code for nerve conduction studies performed using procedures such as with the NC-stat System at a later date. In the event that a Category III CPT code is published which describes nerve conduction studies performed with the NC-stat System, it would likely result in limited Medicare reimbursement for such studies as a result of the potential that no specified reimbursement values would be assigned to these codes. This will likely adversely impact reimbursement by other third party payers and will likely have an adverse and material impact on our revenues and results of operations.

The LCDs and coding articles issued by local Medicare carriers have also addressed a number of other issues, including (1) the background and training of physicians supervising or performing nerve conduction studies, (2) the level of training requirements for technicians performing a nerve conduction study, (3) whether nerve conduction tests should be required to be performed concomitantly with a needle electromyography procedure and (4) whether the NC-stat System is comparable to conventional

nerve conduction testing equipment. We do not believe that these LCDs prohibit physicians from receiving reimbursement under Medicare for medically necessary nerve conduction studies performed using the NC-stat System. However, these LCDs do appear to be targeted at limiting access to perform and/or reimbursement for nerve conduction studies. In certain cases, these LCDs are being interpreted or implemented in a manner that impacts the ability of physicians to receive reimbursement under Medicare, including lower levels of reimbursement and an increase in the number of claims being denied, for nerve conduction studies performed using the NC-stat System, which are having an adverse impact on our revenues.

Additionally, a significant number of commercial payers, including the majority of regional Blue Cross Blue Shield carriers, and other major private payers, have adopted policies indicating that they will not provide reimbursement for the use of the NC-stat System. These commercial payers have cited various reasons for their reimbursement policies, including, among others, that the NC-stat System is experimental and investigational. We are in the process of communicating with these payers directly, through our customers or through our network of reimbursement consultants, to attempt to address their concerns. Third-party payers may also impose requirements on physicians to submit additional paperwork supporting the medical necessity of nerve conduction studies performed using the NC-stat System. We believe these requirements are negatively impacting the use of the NC-stat System by existing customers and our sales to new customers, both of which are having an adverse impact on our revenues.

Additional third-party payers, including local Medicare carriers and commercial payers, could potentially take a position that could reduce or eliminate the reimbursement for nerve conduction studies performed with the NC-stat System and could have the impact of deterring usage by our customers which could have an adverse impact on our revenues.

In the second quarter of 2008, we received 510(k) clearance from the FDA for the marketing in the United States of the ADVANCE System, a system for the performance of traditional nerve conduction studies and needle electromyography procedures. The ADVANCE System was cleared by the FDA with the primary predicate, or comparable, device being the Keypoint device originally manufactured and marketed by Medtronic, Inc. to neurologists and physical medicine and rehabilitation physicians for the performance of nerve conduction studies and needle electromyography procedures. The ADVANCE System is a traditional system that supports nerve conduction testing with any electrode methodology, real-time waveform review and cursor editing, needle electromyography procedures and conventional reports with the results of the testing. We launched our sales and marketing efforts for the ADVANCE System to specialists with peripheral nerve expertise such as neurologists, physical medicine and rehabilitation physicians, neurosurgeons, orthopedic and hand surgeons and pain medicine physicians in May 2008. Our success in selling the ADVANCE System will be dependent, among other things, on our customers' receiving, and our potential customers' belief that they will receive, sufficient reimbursement from third-party payers for performing procedures using the ADVANCE System. We do not believe that the final LCDs or policies adopted by major private payers impacting reimbursement for procedures performed using the NC-stat System will apply to procedures performed by specialists with peripheral nerve expertise using the ADVANCE System. However, these final LCDs and policies are subject to the interpretation of, and may be modified by, the applicable third-party payer, whose interpretations may differ from ours. Additionally, the outcome of the ongoing process with the AMA CPT Panel regarding reimbursement coding of nerve conduction studies could impact future reimbursement of procedures performed using the ADVANCE System.

We believe that eye scans performed using the DigiScope are being reimbursed by the majority of third-party payers. Many commercial payers have policies in place providing for reimbursement for the use of the DigiScope and many of these payers have published favorable articles about the DigiScope in their newsletters. However, several Medicare carriers have issued draft LCDs and coding articles that require a diagnosis of pre-existing retinal disease and/or will only reimburse for fundus photography, a

highly specialized form of medical imaging, when performed in conjunction with an eye examination performed by an eye specialist. There are no assurances that other Medicare carriers will not issue similar draft LCDs, final LCDs or coding articles restricting the reimbursement for the use of the DigiScope. We believe that eye examinations performed on patients covered by Medicare represented less than 25% of our DigiScope revenues in 2007. However, the restrictions on reimbursement by Medicare carriers could have an adverse impact on our ability to grow our DigiScope revenues in future periods. We have also launched the DigiScope into the optometry market and tests performed by optometrists may include screens that are paid for out of pocket by patients and full medical tests which are submitted to third-party payers for reimbursement.

One of the primary challenges we face in our business is successfully expanding the market for nerve conduction studies and needle electromyography procedures. A successful market expansion will depend upon, in part, our targeting of specialist physicians with peripheral nerve expertise. Historically, our strategy had been to sell our neuropathy assessment systems through a combination of independent sales agencies and a direct sales force of experienced sales representatives. Due to a significant decline in the percentage of new customers being sourced through our independent sales agency network in 2007, we eliminated the independent sales agencies in the second half of 2007 and focused our selling efforts exclusively through our direct sales force. We believe the decision to terminate the independent sales agency relationships has contributed to the decline in revenues and could potentially have an adverse impact on our revenues and our ability to secure new customers in future periods as well.

We reduced the size of our direct sales force in the second quarter of 2008 to approximately 30 regional sales managers from the previous level of approximately 50 regional sales managers. We took this action to reduce our sales and marketing expenses as a result of the decline in revenues we have experienced and due to our expectation that there will be further declines in revenues over the next several quarters. This action resulted in a charge for severance and benefit costs of \$318,981 in the second quarter of 2008 and we expect that this action, coupled with other cost reduction steps taken, will reduce our operating expenses by approximately \$5.0 million on an annualized basis compared to operating expense levels prior to these actions being taken. Our direct sales force is primarily focused on sales of our ADVANCE System to specialist physicians with peripheral nerve expertise and on sales of electrodes to, and account management of, our existing customer base.

Business Focus

Our long-term financial objectives are to grow our business through the sale of proprietary medical equipment and to achieve and sustain profitability. However, during 2008 our revenues are likely to continue to decline and we are likely to continue to incur losses as a result of the reimbursement and other issues we are currently facing and there are no assurances that we will achieve these objectives over the longer term as well. We expect to focus our efforts for the balance of 2008 on (1) efforts to stabilize third-party reimbursement for procedures performed with the NC-stat System, (2) sales of the NC-stat System, including sales of electrodes to, and on-going account management of, our existing NC-stat System customer base, (3) sales of the ADVANCE System to specialist physicians with peripheral nerve expertise, (4) seeking regulatory clearance from the FDA for portions of the onCall Information System, (5) cooperating with, and working to resolve, the government investigations of which we are subject and (6) our ongoing research and development programs.

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Our launch of the ADVANCE System took place in May 2008 following 510(k) clearance by the FDA for marketing the ADVANCE System in the United States. During the fourth quarter of 2006, at the request of the FDA, we submitted a 510(k) filing relating to the onCall Information System which is currently in use. The 510(k) is still pending before the FDA. If 510(k) clearance for the portions of the onCall Information System that are under review is not obtained, it may require additional product development and potential changes in the configuration of the NC-stat System and onCall Information System, and the status of our currently distributed products using the onCall Information System may be uncertain. The portions of the onCall System under review through this 510(k) filing do not impact use of the ADVANCE System.

With respect to our research and development programs, during the remainder of 2008 we expect to (1) continue efforts to develop new consumables, (2) make improvements to and develop accessories for our existing products, (3) continue to develop our system for regional anesthesia and pain control, for which we anticipate filing one or more 510(k) applications with the FDA in the second half of 2008, and on a potential product for the treatment of peripheral nerve injury in collaboration with Cyberkinetics.

Results of Operations

The following table presents certain statement of operations information stated as a percentage of total revenues, of which certain columnar subtotal and total amounts found in the table below may not sum due to rounding:

	Three Months Ended June 30,		Six Months Ended June 30,	
	2008	2007	2008	2007
Revenues:				
Medical equipment	6.0%	10.7%	7.2%	10.8%
Consumables	89.7	87.6	88.7	87.5
Other	4.3	1.8	4.1	1.8
Total revenues	100.0	100.0	100.0	100.0
Costs and expenses:				
Cost of revenues, excluding amortization	29.3	26.7	28.4	26.5
Research and development	18.3	11.0	18.1	10.7
Sales and marketing	47.3	52.5	54.7	51.6
General and administrative	46.7	25.0	44.2	26.7
Charge for impaired goodwill			33.2	
Amortization of intangible assets	2.9		2.5	
Total cost and expenses	144.5	115.2	181.0	115.6
Loss from operations	(44.5)	(15.2)	(81.0)	(15.6)
Loss on available-for-sale investment	(16.5)		(11.7)	
Interest income	2.4	4.0	2.8	4.1
Loss before minority interest	(58.6)	(11.2)	(89.9)	(11.5)
Minority interest	0.6		0.4	
Net loss	(58.0)%	(11.2)%	(89.5)%	(11.5)%

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Comparison of Three Months Ended June 30, 2008 and June 30, 2007

The following tables present a breakdown of our customers, consumables units used, revenues, costs and expenses and net loss, of which certain columnar subtotal and total amounts found in the tables below may not sum due to rounding:

	12-Month Period Ended June 30,		Change	% Change
	2008	2007		
Active NC-stat and ADVANCE customers	5,480	5,401	79	1.5%

	Three Months Ended June 30,		Change	% Change
	2008	2007		
Consumables units used (1)	222,200	275,900	(53,700)	(19.5)%

- (1) Includes nerve specific electrodes used with the NC-stat System and the ADVANCE System.

	Three Months Ended June 30,		Change	% Change
	2008	2007		
	(\$ in thousands, except for percentage data)			
Revenues:				
Medical equipment	\$ 512.3	\$ 1,223.2	\$ (710.9)	(58.1)%
Consumables	7,615.5	10,048.3	(2,432.8)	(24.2)
Other	365.4	204.0	161.4	79.1
Total revenues	8,493.2	11,475.5	(2,982.3)	(26.0)
Costs and expenses:				
Cost of medical equipment revenues	210.9	235.5	(24.6)	(10.4)
Cost of consumables revenues	2,091.7	2,669.6	(577.8)	(21.6)
Cost of other revenues	188.3	162.6	25.8	15.8
Research and development expenses	1,555.1	1,266.7	288.4	22.8
Sales and marketing expenses	4,016.7	6,019.9	(2,003.2)	(33.3)
General and administrative expenses	3,967.2	2,868.7	1,098.6	38.3
Charge for impaired goodwill				
Amortization of intangible assets	245.0		245.0	N/A
Total costs and expenses	12,275.0	13,222.9	(947.9)	(7.2)
Loss from operations	(3,781.9)	(1,747.4)	(2,034.4)	116.4
Loss on available-for-sale investment	(1,401.1)		(1,401.1)	N/A
Interest income	202.6	456.4	(253.9)	(55.6)
Loss before minority interest	(4,980.4)	(1,291.0)	(3,689.4)	285.8
Minority interest	52.5		52.5	N/A
Net loss	\$ (4,927.9)	\$ (1,291.0)	\$ (3,636.9)	281.7%

Revenues:

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Medical equipment revenues, (formerly referred to as diagnostic device revenues), consist primarily of sales of NC-stat devices and NC-stat docking stations and ADVANCE devices and related modules, which we began to market and sell in May 2008, were \$0.5 million and \$1.2 million for the three months ended June 30, 2008 and 2007, respectively, a decrease of \$710,900, or 58.1%. This decrease is

primarily attributable to a lower number of NC-stat Systems sold and a decrease in the average selling price, which we believe resulted primarily from uncertainty and adverse developments relating to the reimbursement for procedures performed with the NC-stat System. Medical equipment revenues accounted for 6.0% and 10.7% of our total revenues for the three months ended June 30, 2008 and 2007, respectively.

Consumables revenue, (formerly referred to as biosensor revenues), consists primarily of single use nerve specific electrodes which are used with our NC-stat System and our ADVANCE System, was \$7.6 million and \$10.0 million for the three months ended June 30, 2008 and 2007, respectively, a decrease of \$2.4 million, or 24.2%. This decrease is attributable to lower sales of consumables, which we believe resulted primarily from uncertainty and adverse developments relating to the reimbursement for procedures performed with the NC-stat System. Consumables revenue accounted for 89.7% and 87.6% of our total revenues for the three months ended June 30, 2008 and 2007, respectively.

Our customers used 222,200 nerve specific electrodes and 275,900 nerve specific electrodes in the three months ended June 30, 2008 and 2007, respectively, a decrease of 53,700 nerve specific electrodes, or 19.5%. This decrease in nerve specific electrodes usage is primarily the result of a decline in the average usage per customer partially offset by an increase in our customer base. During the 12-month period ending June 30, 2008, a total of 5,480 customers used our NC-stat System compared to 5,401 customers for the same period ending June 30, 2007. This represents a 1.5% year-over-year increase in the number of customers that used our NC-stat System. The average usage per account declined 19.6% to 41 nerve specific electrodes per quarter for the quarter ended June 30, 2008 from 51 nerve specific electrodes per quarter for the quarter ended June 30, 2007.

Other revenues, which are attributable to the DigiScope, were \$365,400 and \$204,000 for the three months ended June 30, 2008 and 2007, respectively, an increase of \$161,400, or 79.1%. The increase is primarily attributable to an increase in the number of DigiScopes placed in service. On December 26, 2007, we acquired substantially all of the assets of EyeTel, including the rights to the DigiScope. Prior to the acquisition, we had been selling the DigiScope under an exclusive sales and marketing license agreement entered into with EyeTel in October 2006 and had launched our sales and marketing efforts during the first quarter of 2007. Revenues associated with the DigiScope are derived through: (1) eye scan fees; (2) monthly rental fees and (3) installation and training fees.

Our total revenues were \$8.5 million and \$11.5 million for the three months ended June 30, 2008 and 2007, respectively, a decrease of \$3.0 million, or 26.0%. The decline in our total revenues is attributable to the lower number of NC-stat Systems and consumables sold, which we believe resulted primarily from uncertainty and adverse developments relating to the reimbursement for nerve conduction studies performed with the NC-stat System.

We anticipate that revenues for the remainder of 2008 will continue to decline. In the second quarter of 2008, we experienced a decline in revenues of 6.6% from the first quarter of 2008, which we believe primarily resulted from the uncertainty and adverse developments created by the on-going AMA CPT Panel process, the issuance of draft LCDs, final LCDs and coding articles addressing reimbursement for nerve conduction studies and policies issued by commercial payers intended to deter usage or limit the reimbursement for the NC-stat System. These developments and other future reimbursement decisions, including the potential issuance of a Category III CPT code by the AMA CPT Panel, could continue to adversely impact reimbursement for procedures performed using the NC-stat System. Our revenues for the remainder of 2008 are likely to be impacted by (a) the potential issuance of a Category III CPT code by the AMA CPT Panel, unless reversed, appealed, or delayed; (b) the level of reimbursement, if any, established for procedures performed using the NC-stat System by insurance carriers and other third-party payers; (c) the level of reimbursement for procedures performed using the ADVANCE System; (d) whether final LCDs are applied in a manner that places additional restrictions or qualifications on the performance of these procedures; (e) any other

reimbursement determinations relating to nerve conduction studies that may be issued by third-party payers; and (f) any other events causing uncertainty as to the existence or amount of reimbursement physicians are likely to receive for performing procedures using our nerve conduction product offerings. Separately, we expect revenues to continue to be positively impacted by expanded sales and marketing efforts for our launch of the ADVANCE System. Overall, revenues could be impacted by a variety of factors, including the level of demand for our products, potential for changes in third-party reimbursement for nerve conduction studies, the decision to terminate our relationships with independent sales agencies, the overall economy, competitive factors and the factors described in the section of this Quarterly Report on Form 10-Q titled "Cautionary Note Regarding Forward-Looking Statements."

Cost of revenues

Cost of medical equipment revenues decreased to \$210,900, or 41.2% of medical equipment revenues, for the three months ended June 30, 2008, as compared to \$235,500, or 19.3% of revenues, for the same period in 2007. The decrease in the cost of medical equipment revenues is primarily attributable to the decrease in the number and the average selling price of NC-stat Systems sold. The increase in the cost of medical equipment revenues as a percentage of medical equipment revenues is primarily attributable to the initial placements of the ADVANCE System, which has a higher cost of revenues than the NC-stat System.

Cost of consumables revenue decreased to \$2.1 million, or 27.5% of consumables revenue, for the three months ended June 30, 2008, as compared to \$2.7 million, or 26.6% of consumables revenue, for the same period in 2007. The decrease in the cost of consumables revenue is primarily attributable to lower sales volumes. The increase in the cost of consumables revenues as a percentage of consumables revenue is primarily attributable to the decrease in their average selling price.

Cost of other revenues, which related entirely to the DigiScope, increased to \$188,300, or 51.5% of DigiScope revenues, for the three months ended June 30, 2008, as compared to \$162,600, or 79.7% of DigiScope revenues, for the same period in 2007.

The decrease in the cost of other revenues as a percentage of other revenues is primarily the result of how the cost of other revenues is calculated. Prior to the December 26, 2007 acquisition of substantially all of the assets of EyeTel and under the terms of the license agreement in place, our cost of DigiScope revenues was calculated as a percentage of DigiScope revenues. Subsequent to the acquisition, the cost of DigiScope revenues consisted primarily of DigiScope depreciation and royalties on DigiScope revenues due to Johns Hopkins University. This change had a positive impact on the cost of other revenues as a percentage of other revenues and we expect the cost of other revenues as a percentage of other revenues will be lower during the remainder of 2008 as compared to 2007.

Our overall cost of revenues decreased to \$2.5 million, or 29.3% of revenues, for the three months ended June 30, 2008, compared to \$3.1 million, or 26.7% for the same period in 2007.

Our cost of revenues as a percentage of revenues may increase during the remainder of 2008 as compared to the first half of 2008 due to the expected decline in revenues derived from the NC-stat System. Additionally, we expect a further increase in our cost of revenues as a percentage of revenues from our launch of the ADVANCE System, which has a higher cost of revenues as compared with our other products.

Research and Development

Our research and development, or R&D, expenses include expenses associated with our research, product development, clinical, regulatory and quality assurance departments.

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R&D expenses increased \$288,400, or 22.8%, to \$1.6 million for the three months ended June 30, 2008 from \$1.3 million for the same period in 2007. As a percentage of revenues, R&D expenses were 18.3% and 11.0% for the three months ended June 30, 2008 and June 30, 2007, respectively. The increase in expenses was primarily due to an increase of \$230,300 in employee compensation and benefit costs primarily attributable to the employees obtained from EyeTel and to the hiring of additional employees for our product development efforts. Also contributing to the change in expenses are (a) an increase of \$33,400 in outside development costs and (b) an increase in \$32,400 in license fees, primarily fees paid to the Wilmer Eye Institute at Johns Hopkins University. These increases were offset by a decrease of \$19,300 in stock compensation expense.

We expect our spending on R&D will be relatively unchanged during the remainder of 2008 as compared to the first half of 2008. This amount may vary, however, depending on the opportunities and challenges that arise during the year.

Sales and Marketing

Our sales and marketing expenses include expenses from the marketing, field sales, sales administration and reimbursement departments.

Sales and marketing expenses decreased \$2.0 million, or 33.3%, to \$4.0 million for the three months ended June 30, 2008 from \$6.0 million for the same period in 2007. As a percentage of revenues, sales and marketing expenses were 47.3% and 52.5% for the three months ended June 30, 2008 and 2007, respectively. The decrease in expenses was primarily due to (a) a decrease of \$833,500 in third-party sales commissions due to our decision to terminate our relationships with all independent sales agencies and focus our selling efforts exclusively through our direct sales force; (b) a decrease of \$497,600 in employee compensation and benefit costs (which includes the impact of our restructuring costs) primarily attributable to the decrease in commissions and bonuses resulting from the reduction of the size of our direct sales force during the period; (c) a decrease of \$181,600 in advertising costs, largely attributable to a 2007 sales promotion; (d) a decrease of \$168,200 in consulting services due to less activity involving our reimbursement matters; (e) decreases of \$110,600 in travel expenses and \$101,800 in recruiting expenses both attributable to the reduction of our direct sales force; and (f) a decrease of \$72,200 in stock compensation expense.

For the remainder of 2008, we expect sales and marketing expenses to continue to decline as compared to the first half of 2008, primarily resulting from our reduction of our direct sales force to its current level of approximately 30 regional sales managers. However, this may vary, depending primarily on our revenues for 2008. Our direct sales force will focus their sales and marketing efforts of our neuropathy assessment business on sales of the ADVANCE System to specialist physicians with peripheral nerve expertise. We continue to support our NC-stat customer base, work with our existing NC-stat customers in specialty practices to convert them to the ADVANCE System and provide solutions that enable our customers to provide this important diagnostic service to their patients.

General and Administrative

Our general and administrative expenses include expenses from the executive, finance, administrative, customer service and information technology departments.

General and administrative expenses increased \$1.1 million, or 38.3%, to \$4.0 million for the three months ended June 30, 2008 from \$2.9 million for the same period in 2007. As a percentage of revenues, general and administrative expenses were 46.7% and 25.0% for the three months ended June 30, 2008 and 2007, respectively. The increase in expenses was primarily due to a second quarter 2007 reversal of a \$1.7 million sales tax liability as a result of receiving amnesty from a number of states and receiving relief from other states in the form of a limited look back period and waiver of penalties. Also contributing to the increase was an increase of \$255,700 in employee compensation and

benefit costs primarily attributable to the employees obtained from EyeTel; and an increase of \$142,900 in facilities costs primarily from our December 2007 acquisition of EyeTel. These amounts were offset by a decrease of \$691,100 in professional fees resulting from decreased legal fees, particularly relating to the government investigations by the OIG and the DOJ that we are subject to, a decrease in bad debt expense of \$89,300 and a decrease of \$49,300 in stock compensation expense.

We believe the level of our general and administrative expenses will increase during the remainder of 2008 as a result of our acquisition of EyeTel and will be dependent, in part, upon the expenses incurred for professional and consulting fees relating to the government investigations, legal proceedings and reimbursement matters previously disclosed by us.

Amortization of intangible assets

Amortization of intangible assets is attributable to (a) the intangible assets recorded in connection with our acquisition of EyeTel in December 2007 and (b) the value of the technology and intellectual property contributed by Cyberkinetics upon formation of PNIR, our newly formed joint venture with Cyberkinetics to develop and commercialize a therapeutic product for peripheral nerve injury based on Cyberkinetics' Andara (TM) Oscillating Field Stimulator (OFS(TM)) neurostimulation technology platform. The recoverability of our intangible assets is dependent upon our ability to successfully market the DigiScope and to successfully develop marketable products from PNIR, our joint venture with Cyberkinetics. (See Note 6.)

Loss on available-for-sale investment

In November 2007, we purchased approximately 5.4 million shares of common stock of Cyberkinetics, representing approximately 13% of the Cyberkinetics' issued and outstanding shares at the time of the investment, at a price of \$0.46 per share. We also received a warrant to purchase up to approximately 2.7 million shares of Cyberkinetics common stock. The warrant is exercisable at \$0.46 per share and has a term of five years, but will be required to be exercised if Cyberkinetics receives FDA approval of an HDE filing for the Andara OFS device for acute spinal cord injuries by December 31, 2008.

We review the carrying value of this investment periodically to determine whether an other-than-temporary decline in market value exists. We consider factors such as the length of time the value of the investment has been below its original purchase price, the financial condition of the investee and near-term prospects for the investee's recovery to original purchase price and our intent with regard to the underlying investment. We marked this investment to market as of June 30, 2008 and, taking into account the factors noted above, recorded a \$1.4 million charge because we believe the decline in the value of this investment is other-than-temporary. We may record future losses on its Cyberkinetics investment if there is not an improvement in the Cyberkinetics outlook or if the market value of their common stock declines further.

Interest Income

Interest income was \$202,600 and \$456,400 for the three months ended June 30, 2008 and June 30, 2007, respectively. Interest income was earned from investments in cash equivalents and short-term investments. The decrease in interest income for the quarter ended June 30, 2008, as compared to the quarter ended June 30, 2007, is primarily due to lower average invested balances and lower rates of return.

Minority Interest

In February 2008, we formed PNIR, a joint venture with Cyberkinetics with 50% ownership held by us and 50% ownership held by Cyberkinetics. The minority interest in the net loss of the joint

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venture represents 50% of the net loss during the three months ended June 30, 2008, which consists of amortization expense attributable to the \$2.1 million contribution of intellectual property made by Cyberkinetics when the joint venture was formed. For the three months ended June 30, 2008, there have been no expenses or cash funding in connection with PNIR other than amortization of the intangible asset.

Comparison of Six Months Ended June 30, 2008 and June 30, 2007

The following tables present a breakdown of our customers, consumables units used, revenues, costs and expenses and net loss, of which certain columnar subtotal and total amounts found in the tables below may not sum due to rounding:

	12-Month Period Ended June 30,			% Change
	2008	2007	Change	
Active NC-stat and ADVANCE customers	5,480	5,401	79	1.5%

	Six Months Ended June 30,			% Change
	2008	2007	Change	
Consumables units used (1)	447,600	569,100	(121,500)	(21.4)%

- (1) Includes nerve specific electrodes used with the NC-stat System and the ADVANCE System.

	Six Months Ended June 30,			% Change
	2008	2007	Change	
(\$ in thousands, except for percentage data)				
Revenues:				
Medical equipment	\$ 1,262.2	\$ 2,502.4	\$ (1,240.2)	(49.6)%
Consumables	15,601.3	20,321.1	(4,719.8)	(23.2)
Other	727.6	409.8	317.8	77.6
Total revenues	17,591.1	23,233.3	(5,642.2)	(24.3)
Costs and expenses:				
Cost of medical equipment revenues	418.8	466.0	(47.1)	(10.1)
Cost of consumables revenues	4,199.7	5,365.3	(1,165.6)	(21.7)
Cost of other revenues	368.8	331.0	37.9	11.4
Research and development expenses	3,176.8	2,481.8	695.0	28.0
Sales and marketing expenses	9,627.0	11,995.9	(2,368.9)	(19.7)
General and administrative expenses	7,779.6	6,210.9	1,568.7	25.3
Charge for impaired goodwill	5,833.5		5,833.5	NA
Amortization of intangible assets	437.5		437.5	NA
Total costs and expenses	31,841.8	26,850.8	4,991.0	18.6
Loss from operations	(14,250.6)	(3,617.5)	(10,633.2)	293.9
Loss on available-for-sale investment	(2,057.2)		(2,057.2)	NA
Interest income	493.6	949.2	(455.6)	(48.0)
Loss before minority interest				