# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

#### Form 8-K

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

Date of Report (Date of earliest event reported)

January 8, 2018

Commission File Number: 001-36568

#### HEALTHEQUITY, INC.

Delaware

(State or other jurisdiction of incorporation or organization)

7389

52-2383166

(I.R.S. Employer Identification Number)

(Primary Standard Industrial

15 West Scenic Pointe Drive Suite 100 Draper, Utah 84020 (801) 727-1000

(Address, including Zip Code, and Telephone Number, including Area Code, of Registrant's Principal Executive Offices)

Not Applicable

(Former name or former address, if changed since last report)

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

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

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (17 CFR  $\S 230.405$ ) or Rule 12b-2 of the Securities Exchange Act of 1934 (17 CFR  $\S 240.12b-2$ ). Emerging growth company  $\square$ 

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. 🗆

#### Item 7.01 Regulation FD Disclosure.

On January 8, 2018, HealthEquity, Inc. (the "Company") issued a press release, attached as Exhibit 99.1 to this current report on Form 8-K, announcing its estimated year-end sales results for its fiscal year 2018 ending January 31, 2018 and that it will present at the 36" Annual J.P. Morgan Healthcare Conference in San Francisco, California on January 10, 2018, at 2:00 PM Pacific Time. A live audio webcast of the presentation along with a copy of the Company's presentation material from the conference will be available through the investor page at the Company website and a copy of the presentation is also attached hereto as Exhibit 99.2 and incorporated herein by reference.

The information in Exhibit 99.1 and 99.2 is being furnished to the Securities and Exchange Commission and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liabilities of that section, nor shall it be deemed incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Exchange Act, except as expressly set forth by specific reference in such a filing.

#### Item 9.01 Financial Statements and Exhibits

(d) Exhibits

#### Exhibit No. Description

99.1 Press release issued by HealthEquity, Inc. dated January 8, 2018.

99.2 <u>HealthEquity, Inc. investor presentation.</u>

#### SIGNATURES

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

Date: January 8, 2018

HEALTHEQUITY, INC.

By: /s/ Darcy Mott

Name: Darcy Mott

Title: Executive Vice President and Chief Financial Officer

#### **EXHIBIT INDEX**

Exhibit	
no.	Description
99.1	Press release issued by HealthEquity, Inc. dated January 8, 2018.
99.2	HealthEquity, Inc. investor presentation.

## HealthEquity Announces Strong Sales, Presentation at JP Morgan Healthcare Conference

Draper, Utah - (GLOBE NEWSWIRE) - January 8, 2018 - HealthEquity, Inc. (NASDAQ: HQY) ("HealthEquity" or the "Company"), the nation's largest health savings account ("HSA") non-bank custodian, today announced significant growth in its health plan / administrator network partners and employers served, and provided estimates of HSA members and custodial assets for its fiscal year ending on January 31, 2018.

- The number of HealthEquity health plan / administrator network partners has reached 124, up 43% during fiscal year 2018.
- The number of employers served by HealthEquity exceeds 40.000, up approximately 6.000 during fiscal year 2018
- The Company estimates that HSA members will grow to between 3.3 million and 3.4 million by January 31, 2018, up from 2.7 million a year earlier.
- The Company estimates that custodial assets will grow to between \$6.4 billion and \$6.5 billion by January 31, 2018, up from \$5.0 billion a year earlier.

HealthEquity will discuss these results and estimates during its presentation at the 36th Annual JP Morgan Healthcare Conference on Wednesday, January 10, 2018, at the Westin St. Francis hotel in San Francisco. Jon Kessler, President and Chief Executive Officer, and Darcy Mott, Executive Vice President and Chief Financial Officer, will discuss HealthEquity in a presentation scheduled to begin at 2:00 PM Pacific Time and will be available for one-on-one meetings throughout the conference.

A live audio webcast of the presentation along with a copy of the presentation slides will be available and archived on HealthEquity's investor relations website at http://lir.healthequity.com.

#### **About HealthEquity**

Founded in 2002, HealthEquity is the nation's largest health savings account non-bank custodian. The company's innovative technology platform and tax-advantaged accounts help members build health savings, while controlling health care costs. HealthEquity services more than 3 million health savings accounts for 124 health plan and benefit administrator network partners and employees at more than 40,000 companies accounts help being father.

#### Forward-looking statements

This press release contains "forward-looking statements" within the meaning of the "safe harbor" provisions of the Private Securities Litigation Reform Act of 1995, including but not limited to, statements regarding the Company's industry, business strategy, plans, goals and expectations concerning our market position, product expansion, future operations, revenue, margins, profitability, future efficiencies, capital expenditures, liquidity and capital resources and other financial and operating information. When used in this discussion, the words "may," "believes," "intends," "seeks," "anticipates," "plans," "estimates," "expects," "should," "assumes," "continues," "could," "will," "future" and the negative of these or similar terms and phrases are intended to identify forward-looking statements. Forward-looking statements are subject to a number of risks and uncertainties, many of which involve factors or circumstances that are beyond the control of the Company. The Company's actual results could differ materially from those stated or implied in forward-looking statements due to a number of factors, including but not limited to, the continued availability of tax-advantaged consumer-directed benefits to employees, the Company's ability to acquire and retain new network partners and to cross-sell its products to existing network partners, the Company's ability to successfully identify, acquire and integrate additional portfolio purchases or acquisition targets, the Company's ability to raise awareness among employers and employees about the advantages of adopting and participating in consumer-directed benefits programs, and the Company's ability to identify and execute on network partner opportunities. For a detailed discussion of these and other risk factors, please refer to the risks detailed in the Company's filings with the Securities and Exchange Commission, including, without limitation, the most recent Annual Report on Form 10-K and subsequent periodic and current reports. Past performance is not necessa

Investor Relations Contact: Richard Putnam 801-727-1209 rputnam@healthequity.com

# **Investor presentation**

JP Morgan Healthcare Conference January 2018



Health**Equity** 

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#### Safe Harbor

This presentation does not constitute an offer or invitation for the sale or purchase of securities and has been prepared solely for informational purposes. This presentation is a summary of information contained in our public fillings filed with the Securities and Exchange Commission (SEC), which public fillings are expressly incorporated herein by reference (see <a href="http://ir.healthequity.com/">http://ir.healthequity.com/</a>), and other publicly available information. Readers are encouraged to review our public fillings for further information.

This presentation contains "forward-looking" statements that are based on our management's beliefs and assumptions and on information currently available to management. These forward-looking statements include, without limitation, statements regarding our industry, business strategy, plans, goals and expectations concerning our market position, product expansion, future operations, margins, profitability, future efficiencies, capital expenditures, liquidity and capital resources and other financial and operating information. When used in this discussion, the words "may," "believes," "intends," "seeks," "anticipates," "plans," "estimates," "estimates," "studie," "studie," "intends," "seeks," "anticipates," "plans," "estimates," "studie," "studie,"

Forward-looking statements involve known and unknown risks, uncertainties and other factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward-looking statements. Forward-looking statements represent our management's beliefs and assumptions only as of the date of this presentation. Our actual future results may be materially different from what we expect. Except as required by law, we assume no obligation to update these forward-looking statements publicly, or to update the reasons actual results could differ materially from those anticipated in the forward-looking statements, even if new information becomes available in the future. Readers are encouraged to review our public filings with the SEC for further disclosure of other factors that could cause actual results to differ materially from those indicated in any forward-looking statements included herein.

This presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and growth and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates.

This presentation includes certain non-GAAP financial measures as defined by SEC rules. As required by Regulation G, we have provided a reconciliation of those measures to the most directly comparable GAAP measures, which is available in our public filings.

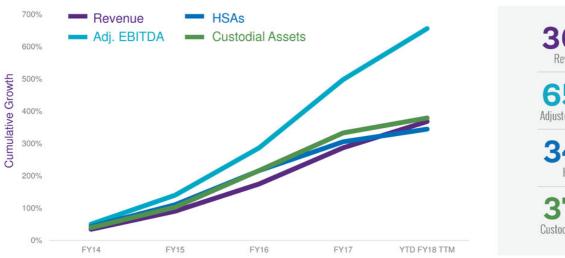
No part of this presentation may be copied, recorded, or rebroadcast in any form.

#### **Investment highlights**



HealthEquity data measured for fiscal years 2014 to 2017 Based on Devenir Research HSA reports December 31, 2010-2016

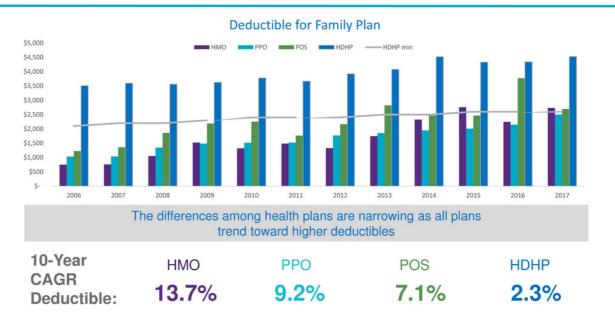
## **Key metrics**





For the fiscal year ended January 31, 2017
 Balances as of October 31, 2017

## Rising first dollar responsibility



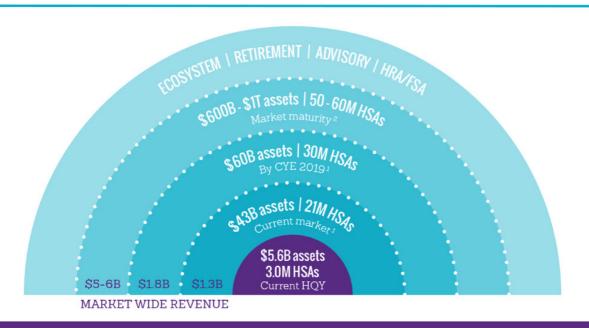
Source: Kaiser Family Foundation 2017 Survey report - September 2017

#### Our core – health savings accounts



SOURCE: 1. Kaiser Family Foundation, 2017 Employee Benefits Survey 2. MEDACorp Survey referenced in Leerink 2017 Outlook report December 12, 2016.

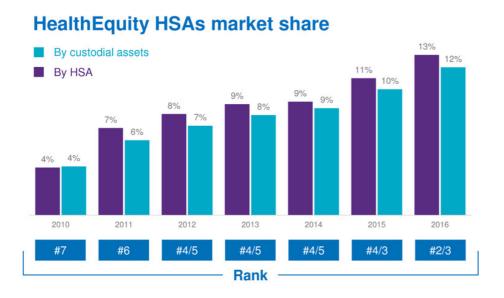
#### **Expanding market**

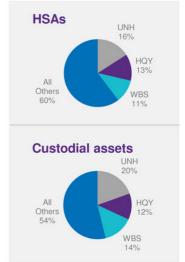


1. Devenir HSA Report #30/2017
2. Management estimate

Health Equity\*

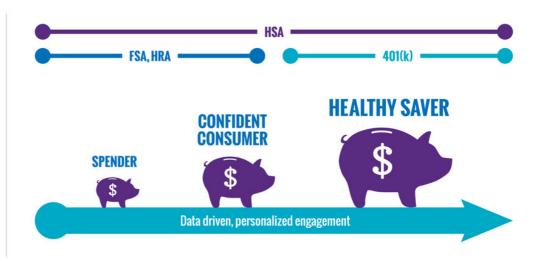
## **Growing market share**





#### **Proprietary end-to-end platform**





Health Equity\*

#### FY 18 sales results





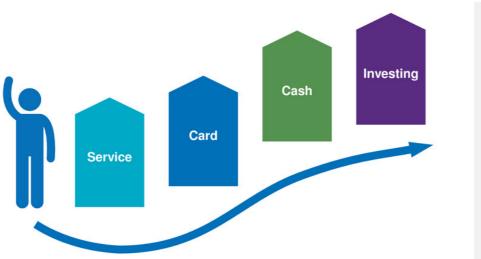
- 3.3-3.4 NO HSAS
- 40,000 EMPLOYERS

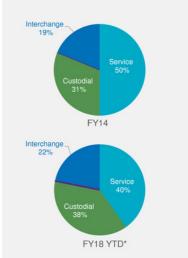


- Largest HSA take away
- Preferred relationship agreements with Blue Cross Blue Shield Association and Health Plan Alliance
- Renewal of Anthem partnership

<sup>10</sup> Health**Equity**\*

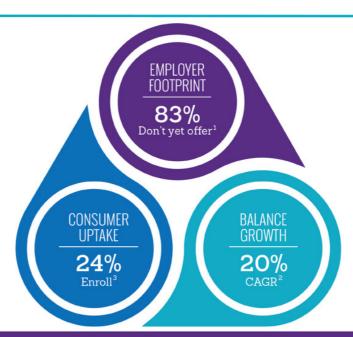
## **Powerful monetization**





11 Nine months as of October 31, 2017 Health Equity\*

# **Growing forward**



Kaiser Family Foundation Annual Survey 2017
 Devenir Research HSA report, December 31, 2016
 Management estimate based on HealthEquity HSAs as a percent of eligible employees within enterprise employe

#### Account balance growth by age



HealthEquity HSAs:



3.184



3%
HAVE
INVESTMENT
BALANCES

#### Value of mature accounts



14 NOTE: Health Equity data as of January 31, 2017 Health Equity\*

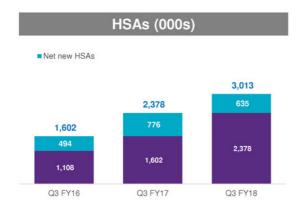
# Rising above



Data as of January 31, 2017
 Devenir Research HSA report, December 31, 2019
 Management estimate as of January 31, 2017

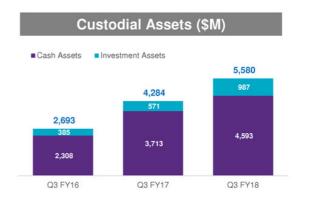
Management estimate as of January 31, 2017
 HealthEquity data as of October 31, 2017

# 3<sup>rd</sup> quarter operating results



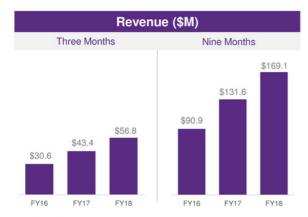
- · New organic Q3 HSAs of 109K vs 89K YoY
- · An additional 14K FIBK HSAs

• 27% Q3 growth in ending HSAs YoY

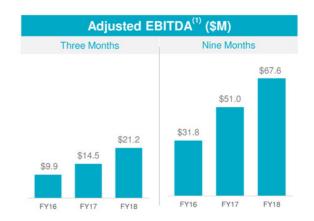


- · Net increase of \$1.3B YoY
- · 30% growth YoY

## 3<sup>rd</sup> quarter financial results



- 31% Q3 revenue growth YoY
  - 22% Q3 growth in Service Revenue
  - 48% Q3 growth in Custodial Revenue
  - 22% Q3 growth in Interchange Revenue



- 46% Adjusted EBITDA growth Q3 YoY
- Q3 Gross margins 59%
- Q3 Operating margins 24%

# Capitalization

(\$ in millions)	January 31, 2017	October 31, 2017
Cash, cash equivalents & marketable securities	\$180.4	\$225.1
Long-term debt (\$100M available LOC)	\$0.0	\$0.0
Total equity	\$261.9	\$334.4

## Guidance

Business Outlook								
For the Fiscal Year Ending January 31, 2018								
Guidance as of: (\$ in millions, except per share)	December 5, 2017*	September 5, 2017	June 6, 2017	March 21, 2017				
Revenue	\$225 - \$228	\$223 – \$228	\$222 - \$227	\$220 - \$225				
Non-GAAP Net Income**	\$39 - \$41	\$39 - \$43	\$38 - \$42					
Non-GAAP EPS diluted**	\$0.64 - \$0.66	\$0.64 - \$0.68	\$0.62 - \$0.67					
Adjusted EBITDA"	\$80 - \$83	\$79 – \$84	\$78 - \$83	\$77 - \$82				