FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				or Se	ection 3	30(h) of	the Inv	estmer	nt Compa	iny Act	of 194	0						
1. Name and Address of Reporting Person* ABG WTT-MedAvail Ltd			2. Issuer Name and Ticker or Trading Symbol MedAvail Holdings, Inc. [MDVL]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner								
(Last) (First) (Middle) UNIT 3002-3004, 30TH FLOOR GLOUCESTER TOWER, THE LANDMARK, CENTRAL				12/1	3. Date of Earliest Transaction (Month/Day/Year) 12/16/2020 4. If Amendment, Date of Original Filed (Month/Day/Year)						Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable							
(Street) HONG KONG K3					Form filed by More than One Reporting Person X Form filed by More than One Reporting Person													
(City)	(St		Zip)															
Table I - Non-Derive 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye		2A. Deemed 3. Execution Date, ar) if any C		3. Trans	3. 4. Son Dispose Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of		Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount		A) or D)	Price	Repor Trans				. 4,	,
Common	Stock		12/16/2020)			P		15,5	78	A	\$13.06	511(1)	3,82	1,706			See footnote ⁽²⁾
Common	Stock		12/16/2020)			P		12,8	51	A	\$13.06	511 ⁽¹⁾	2,86	7,779			See footnote ⁽³⁾
Common	Stock		12/17/2020)			P		6,94	16	A	\$13.12	201(4)	3,82	8,652			See footnote ⁽²⁾
Common	Stock		12/17/2020)			P		5,73	1	A	\$13.12	201(4)	2,87	3,510			See footnote ⁽³⁾
Common	Stock		12/17/2020)			P		1,24	18	A	\$14	4	3,82	9,900			See footnote ⁽²⁾
Common Stock 12/17		12/17/2020)		P) 1		.9	A	A \$14		2,874,539				See footnote ⁽³⁾		
		Tal	ble II - Derivati (e.g., ρι											Owne	d			
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if a		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4			
				Code	v	(A)		Date Exercisa		piration te	Title	Amou or Numb of Shares	er					
		Reporting Person* Avail Ltd																
		(First) 0TH FLOOR WER, THE LAI	(Middle)	TRAL														
(Street)																		

1. Name and Address of Reporting Person*

K3

(State)

HONG KONG

Ally Bridge Group-WTT Global Life Science Capital Partners, L.P.

(Zip)

(Last)	(First)	(Middle)				
UNIT 3002-3004, GLOUCESTER T	30TH FLOOR OWER, THE LAND	MARK, CENTRAL				
(Street) HONG KONG	K3					
(City)	(State)	(Zip)				
1. Name and Address of Reporting Person* ABG-WTT Global Life Science Capital Partners GP, L.P.						
(Last) UNIT 3002-3004, GLOUCESTER T	(First) 30TH FLOOR OWER, THE LAND	(Middle) MARK, CENTRAL				
(Street) HONG KONG	К3					
(City)	(State)	(Zip)				
1. Name and Address ABG-WTT Gl Partners GP Lt	obal Life Science	e Capital				
(Last) UNIT 3002-3004,	(First) 30TH FLOOR	(Middle)				
GLOUCESTER T	OWER, THE LAND	MARK, CENTRAL				
(Street) HONG KONG	К3					
(City)	(State)	(Zip)				
1. Name and Address ABG Manager	of Reporting Person*	(Zip)				
1. Name and Address ABG Manager (Last) UNIT 3002-3004,	of Reporting Person* ment Ltd. (First) 30TH FLOOR	(Middle)				
1. Name and Address ABG Manager (Last) UNIT 3002-3004,	of Reporting Person* ment Ltd. (First)	(Middle)				
1. Name and Address ABG Manager (Last) UNIT 3002-3004,	of Reporting Person* ment Ltd. (First) 30TH FLOOR OWER, THE LAND	(Middle)				
1. Name and Address ABG Manager (Last) UNIT 3002-3004, GLOUCESTER T (Street)	of Reporting Person* ment Ltd. (First) 30TH FLOOR OWER, THE LAND	(Middle)				
1. Name and Address ABG Manager (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG	of Reporting Person* ment Ltd. (First) 30TH FLOOR OWER, THE LAND K3 (State)	(Middle) DMARK, CENTRAL				
1. Name and Address ABG Manager (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG (City) 1. Name and Address Yu Fan (Last) UNIT 3002-3004,	of Reporting Person* ment Ltd. (First) 30TH FLOOR TOWER, THE LAND K3 (State) of Reporting Person* (First) 30TH FLOOR	(Middle) DMARK, CENTRAL (Zip) (Middle)				
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1. Name and Address ABG Manager (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG (City) 1. Name and Address Yu Fan (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG (City) 1. Name and Address Ally Bridge M (Last)	of Reporting Person* ment Ltd. (First) 30TH FLOOR OWER, THE LAND K3 (State) of Reporting Person* (First) 30TH FLOOR OWER, THE LAND K3 (State) of Reporting Person*	(Middle) DMARK, CENTRAL (Zip) (Middle) DMARK, CENTRAL (Zip)				
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1. Name and Address ABG Manager (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG (City) 1. Name and Address Yu Fan (Last) UNIT 3002-3004, GLOUCESTER T (Street) HONG KONG (City) 1. Name and Address Ally Bridge M (Last) 430 PARK AVEN (Street)	of Reporting Person* ment Ltd. (First) 30TH FLOOR TOWER, THE LAND K3 (State) of Reporting Person* (First) 30TH FLOOR TOWER, THE LAND K3 (State) of Reporting Person* edAlpha Master I	(Middle) OMARK, CENTRAL (Zip) (Middle) OMARK, CENTRAL (Zip) Fund L.P. (Middle)				

Ally Bridge MedAlpha Management L.P.								
(Last) (First) (Middle) 430 PARK AVENUE, 12TH FLOOR,								
(Street) NEW YORK	NY	10022						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>Ally Bridge MedAlpha Management GP, LLC</u>								
(Last) (First) (Middle) 430 PARK AVENUE, 12TH FLOOR,								
(Street) NEW YORK	NY	10022						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* Ally Bridge Group (NY) LLC								
(Last) (First) (Middle) 430 PARK AVENUE, 12TH FLOOR,								
(Street) NEW YORK	NY	10022						
(City)	(State)	(Zip)						

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$13.00 to \$13.20. The reporting person undertakes to provide the Company, any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 2. These securities are held of record by ABG WTT-MedAvail Limited ("ABG WTT"). ABG WTT is wholly owned by Ally Bridge Group-WTT Global Life Science Capital Partners, L.P. Voting and investment decisions with respect to any securities held of record by ABG WTT are made by the investment committee of ABG-WTT Global Life Science Capital Partners GP Limited, which is the general partner of ABG-WTT Global Life Science Capital Partners GP, L.P., which is the general partner of Ally Bridge Group-WTT Global Life Science Capital Partners, L.P. As such, each of the foregoing entities may be deemed to share beneficial ownership of the shares held by ABG-WTT. Each of them disclaims any such beneficial ownership.
- 3. These securities are held of record by Ally Bridge MedAlpha Master Fund L.P. ("MedAlpha"). Mr. Fan Yu is the sole shareholder of ABG Management Ltd., which is the sole member of each of Ally Bridge MedAlpha Management GP, LLC and Ally Bridge Group (NY) LLC. Ally Bridge Group (NY) LLC and Ally Bridge MedAlpha Management L.P., acting through its general partner Ally Bridge MedAlpha Management GP, LLC, manage MedAlpha's investments. As such, each of the foregoing entities and Mr. Fan Yu may be deemed to share beneficial ownership of the shares held of record by MedAlpha. Each of them disclaims any such beneficial ownership.
- 4. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$12.99 to \$13.99. The reporting person undertakes to provide the Company, any security holder of the Company, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

Remarks:

Ally Bridge Group-WTT Global Life Science Capital Partners, L.P., By: ABG-WTT Global Life Science Capital Partners GP, L.P., its general 12/18/2020 partner, By: ABG-WTT Global Life Science Capital Partners GP Limited, its general partner, By: /s/ Fan Yu, Director ABG-WTT Global Life Science Capital Partners GP, L.P., By: ABG-WTT Global <u>Life Science Capital Partners</u> 12/18/2020 GP Limited, its general partner, By: /s/ Fan Yu, **Director** ABG-WTT Global Life Science Capital Partners GP 12/18/2020 Limited, By: /s/ Fan Yu, **Director** Ally Bridge MedAlpha Master Fund L.P., By: Ally Bridge MedAlpha General Partner L.P., its general partner, By: 12/18/2020 Ally Bridge MedAlpha GP, LLC, its general partner, By: /s/ Fan Yu, Manager

Ally Bridge MedAlpha 12/18/2020 Management L.P., By: Ally Bridge MedAlpha

Management GP, LLC, its general partner, By: ABG

Management Ltd., its

managing member, By: /s/ Fan

Yu, Director

Ally Bridge MedAlpha

Management GP, LLC, By:

ABG Management Ltd., its 12/18/2020

managing member, By: /s/ Fan

Yu, Director

Ally Bridge Group (NY) LLC,

By: ABG Management Ltd.,

12/18/2020 its managing member, By: /s/

Fan Yu, Director

ABG Management Ltd., By:

12/18/2020 /s/ Fan Yu, Director

ABG WTT-MedAvail

Limited, By: /s/ Charles Chon, 12/18/2020

Director

12/18/2020 /s/ Fan Yu

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.