

Outset Medical Investor Presentation February 2024

Forward-looking statements and non-GAAP information

This presentation and the accompanying oral statements contain forward-looking statements within the meaning of the federal securities laws. All statements other than statements of historical fact are forward-looking statements. In some cases, you can identify forward-looking statements by terminology such as "may," "will," "should," "could," "expect," "plan," anticipate," "believe," "estimate," "predict," "intend," "potential," "would," "continue," "ongoing" or the negative of these terms or similar expressions. Forward-looking statements are based on management's current assumptions and expectations of future events and trends, which affect or may affect our business, strategy, operations or financial performance, and actual results and other events may differ materially from those expressed or implied in such statements due to numerous risks and uncertainties.

These forward-looking statements include, but are not limited to. statements about the Company's expected results of operations, including fourth quarter and full year 2023 revenue and 2023 non-GAAP gross margin and cash position, statements about the Company's possible or assumed future results of operations and financial position, including expectations regarding projected revenues, recurring revenues, and revenue growth rate, gross margin (including non-GAAP gross margin), operating expenses, capital expenditures, cash burn, profitability and outlook, statements regarding our overall business strategy, expectations regarding future projected installed base, plans and objectives of management, our expectations regarding the market sizes and growth potential for Tablo and the total addressable market opportunities for Tablo, our planned expansion within the home hemodialysis market and expected drivers of home dialysis adoption, continued execution of our initiatives designed to expand gross margins, our ability to respond to and resolve any reports, observations or other actions by the Food and Drug Administration (FDA) and other regulators in a timely and effective manner, as well as our expectations regarding the impact of macroeconomic factors on us, our customers and our suppliers.

Forward-looking statements are inherently subject to risks and uncertainties, some of which cannot be predicted or quantified,

which could cause actual results to differ materially from those expressed or implied in these forward-looking statements. These risks and uncertainties include: our future financial performance, including our expectations regarding our revenues, cost of revenues, operating expenses, gross margin and our ability to achieve and maintain future profitability; continued execution of our initiatives designed to expand gross margins; our ability to attain market acceptance among providers and patients; our ability to manage our growth; our expansion into the home hemodialysis market; our ability to ensure strong product performance and reliability; our relations with third-party suppliers, including contract manufacturers and single source suppliers; our ability to overcome manufacturing disruptions; the impact of epidemics, natural or man-made disasters, and similar events, on our industry, business and results of operations; our ability to offer high-quality support for Tablo; our expectations of the sizes of the markets for Tablo; our ability to innovate and improve Tablo; our ability to effectively manage privacy, information and data security; concentration of our revenues in a single product and concentration of a large percentage of our revenues from a limited number of customers; our ability to compete effectively; our ability to accurately forecast customer demand and manage our inventory; our ability to ensure the proper training and use of Tablo; our compliance with FDA and other regulations applicable to our products and business operations and our ability to respond to and resolve any reports, observations or other actions by the FDA or other regulators in a timely and effective manner; as well as other risks and uncertainties described in the Risk Factors section of our public filings with the SEC, including our most recent Annual Report on Form 10-K and Quarterly Reports on Form 10-Q filed with the Securities and Exchange Commission. Forward-looking statements should be considered in light of these risks and uncertainties, and you should not rely on these forward-looking statements as predictions of future events. These forwardlooking statements speak only as of their date and we

undertake no obligation to publicly update or revise any forward-looking statement, whether as a result of new information, future developments or otherwise.

This presentation and the accompanying oral presentation also contain statistical data, estimates and forecasts that are based on independent industry publications or other publicly available information, as well as other information based on our internal sources. This information involves many assumptions and limitations, and you are cautioned not to give undue weight to such information. We have not independently verified the accuracy or completeness of the information contained in the industry publications and other publicly available information. Accordingly, we make no representations as to the accuracy or completeness of that information nor do we undertake to update such information after the date of this presentation.

In addition to financial information presented in accordance with U.S. generally accepted accounting principles ("GAAP"), this presentation and the accompanying oral statements include certain non-GAAP financial measures, which may include Non-GAAP gross profit/loss, gross margin, operating expenses, net income/loss, and basic and diluted net income/loss per share. Any non-GAAP measure is presented for supplemental informational purposes only and should not be considered a substitute for or superior to financial information presented in accordance with GAAP. There are limitations related to the use of non-GAAP financial measures because they are not prepared in accordance with GAAP, may exclude significant expenses required by GAAP to be recognized in our financial statements, and may not be comparable to non-GAAP financial measures used by other companies. A reconciliation of these measures to the most directly comparable GAAP measures is included at the end of this presentation.

FROM THE HOSPITAL TO THE HOME

Transforming dialysis





Reducing the cost and complexity of dialysis



SCALE IN ACUTE

Scale in the \$2.5B¹
U.S. Acute Care market



HIGHLY DIFFERENTIATED

One-of-its-kind product & service ecosystem creates strong customer retention



RECURRING REVENUE

Business model driving high recurring revenue of ~50%



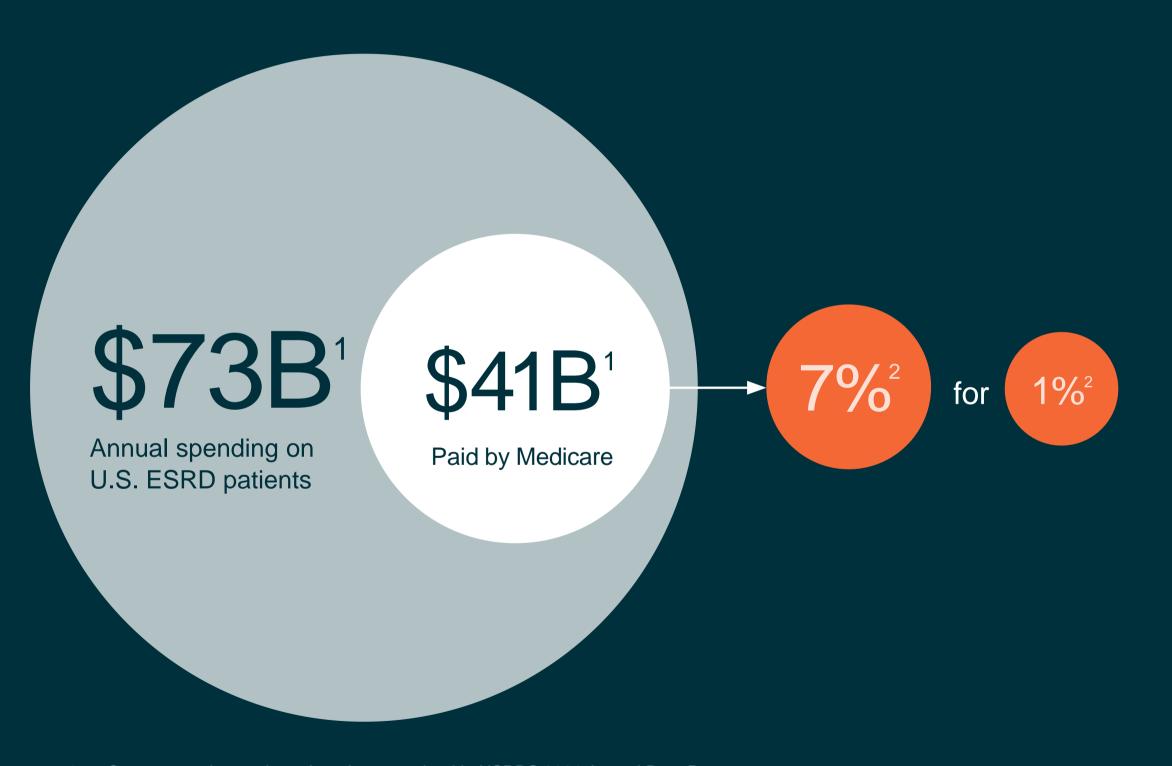
GROWING HOME FOOTPRINT

Growing footprint in the \$8.9B¹
U.S. Home market

 Company estimates based on data contained in USRDS 2021 Annual Data Report

CURRENT STATE

Dialysis is one of the largest, most expensive, least-changed sectors of healthcare





600,000³ Dialysis patients

90M³

Annual dialysis treatments

^{1.} Company estimates based on data contained in USRDS 2021 Annual Data Report

^{2.} Percentage of entire Medicare budget spent on dialysis for ESRD patients, who comprise 1% of the Medicare population (2019)

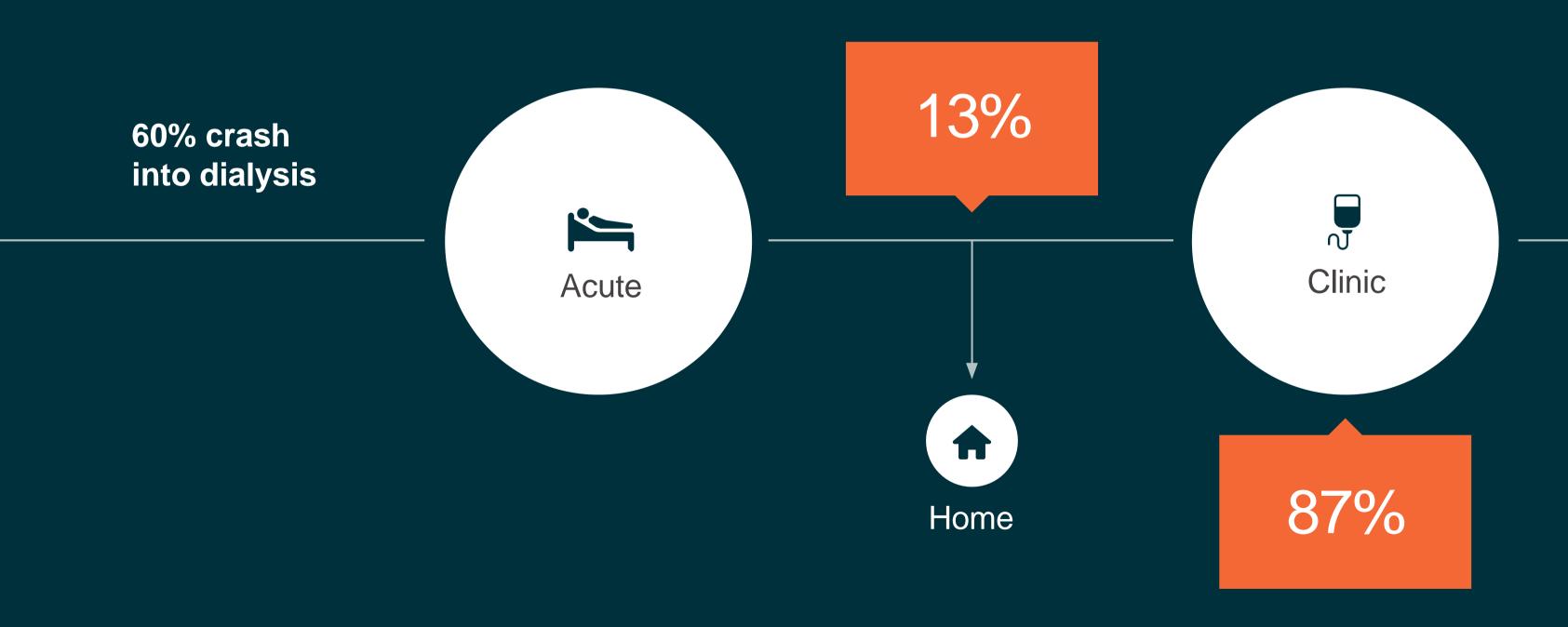
^{3.} Company estimates based on data contained in USRDS 2022 Annual Data Report

Dialysis care pathways



annually in the U.S.

Dialysis care pathways



40% managed into dialysis

CURRENT STATE

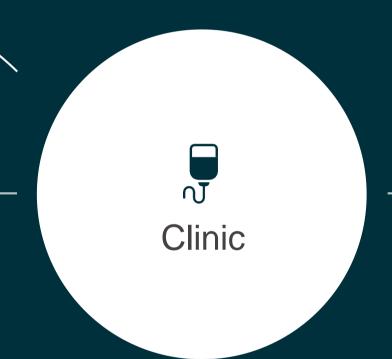
This is an expensive care delivery model...

60% crash into dialysis



34%1

30-day hospital readmission rate for hemodialysis patients¹



40% managed into dialysis

\$5,000-\$25,000

Average loss by hospital for each inpatient stay for renal failure with dialysis¹

2021 Medicare Claims data for MS-DRG 682 and MS-DRG 683

\$30 billion

Annual cost of in-center dialysis treatment in clinics

Company estimates based on data contained in USRDS 2022 Annual Data Report; League et al, JAMA Feb. 2022; Lin et al Health Affairs, Aug. 2022

1. Hickson LJ. et al. Nephron. 2018; 139(1): 1–12

CURRENT STATE

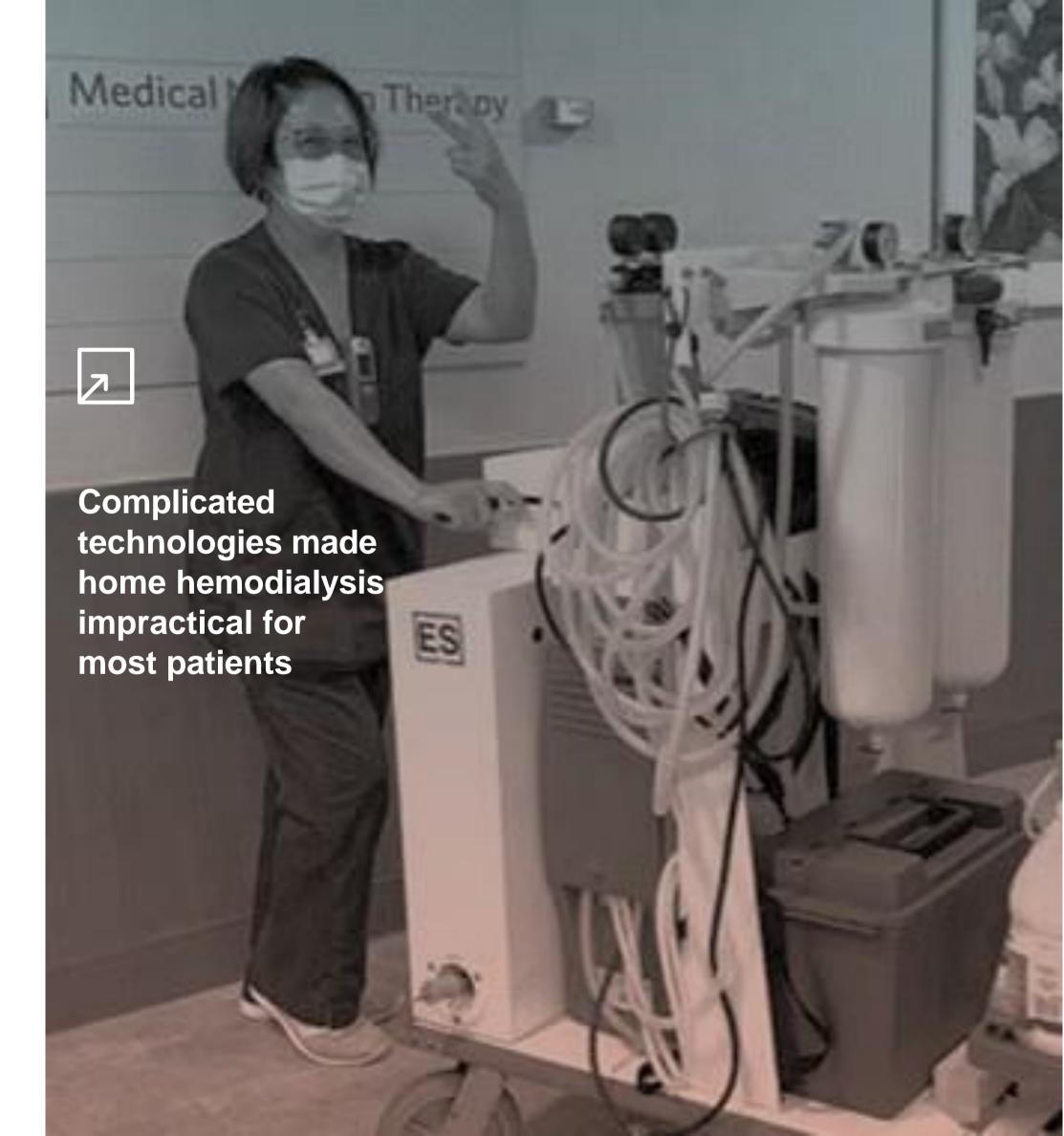
Dialysis is in need of new solutions



Hospitals lose money on every treatment



Staffing challenges constrain optimal patient care and drive up cost



We see a technology-driven way forward

Tablo[®] is a first-of-its-kind technology designed to reduce the cost and complexity of dialysis



Single device from ICU to home



Connected and intelligent



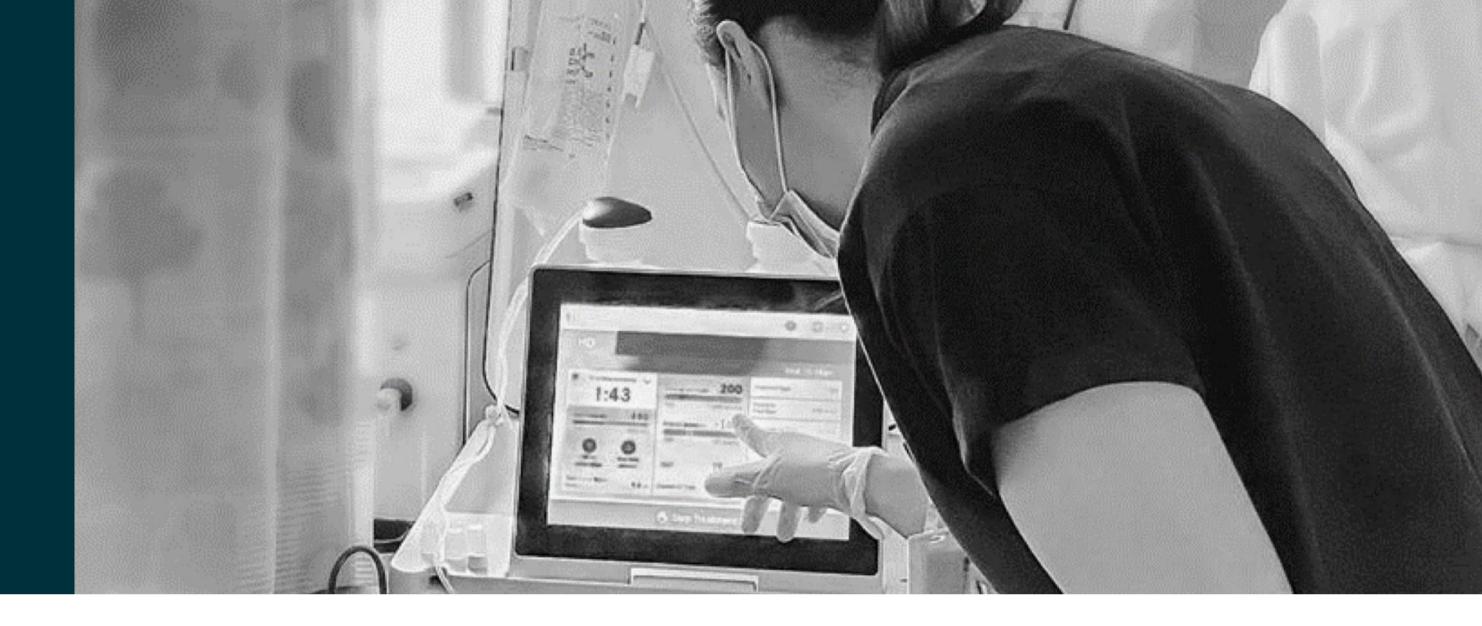
Small and mobile



An all-in-one solution that replaces multiple machines and a water treatment room with a single device



One device, multiple markets



\$11.4B

U.S. TAM

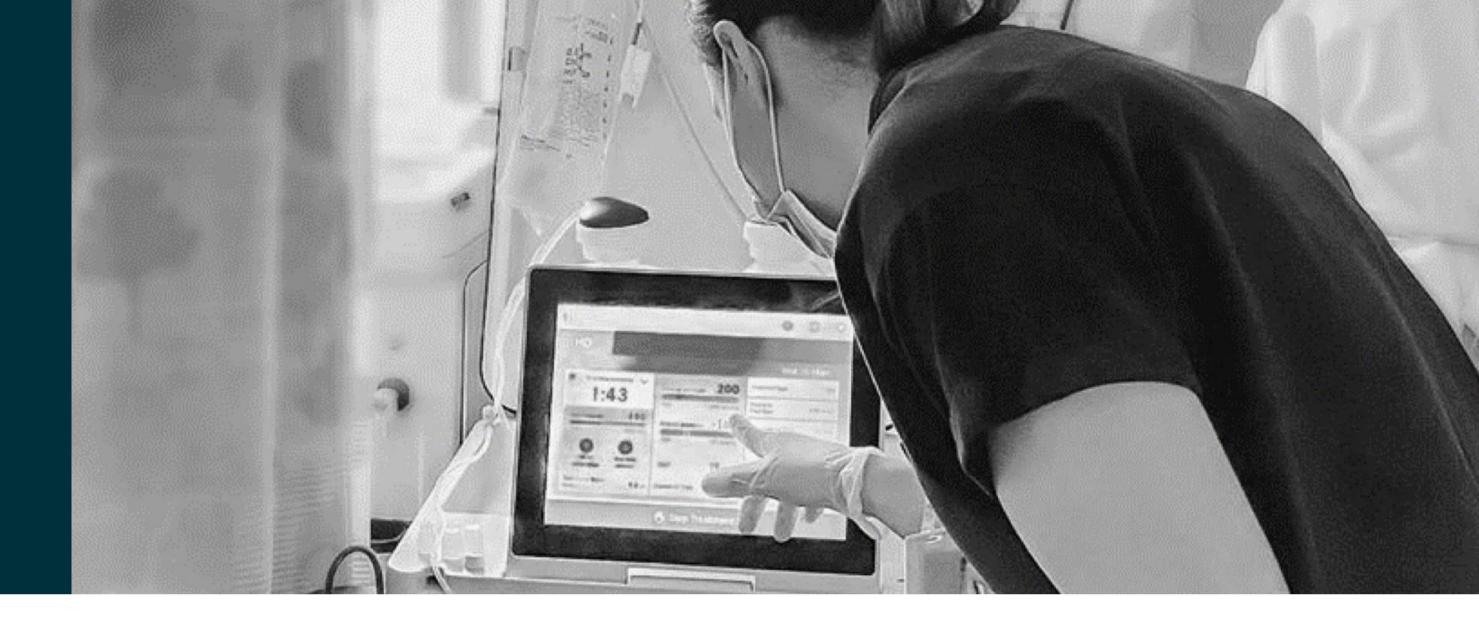
\$2.5B

Acute market
Hospital & sub-acute
based dialysis

\$8.9B

Home market
Home hemodialysis
& transitional care

One device, multiple markets



\$11.4B

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Acute market
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Scale of Tablo in the Acute Care setting

10 of 10

LARGEST SUBACUTE PROVIDERS

8 of 8

TOP NATIONAL HEALTH SYSTEMS

650+

UNIQUE ACUTE SITES



>1 million treatments expected annually



~10,000 nurses trained



Extensive clinical evidence:

70+ abstracts

15+ manuscripts

Tablo reduces the cost and complexity of acute dialysis



With Tablo

\$

Supplies cost reduction

Existing ICU machines require numerous dialysate bags for each treatment

Before Tablo

Tablo creates the dialysate on demand, eliminating the cost and complexity of bags



Labor cost reduction

Most hospitals incur the additional cost of outsourcing dialysis to a 3rd party provider

Enables hospitals to insource and utilize their existing nursing staff to deliver dialysis

TOTAL POTENTIAL COST SAVINGS

50%-80%1

Potential payback period <1 year

ACUTE CARE

Tablo can deliver significant savings in the ICU

	Before Tablo	With Tablo
ICU mean length of stay	13.2	8.4
Total ICU dialysis Tx costs	\$1.33M	\$239K
ICU dialysis cost per Tx hour	\$97.15	\$46.93

Converting from an outsourced program to in-house longduration dialysis, a medium-size ICU reduced costs and increased nurse productivity while demonstrating trends toward improved care quality and patient outcomes

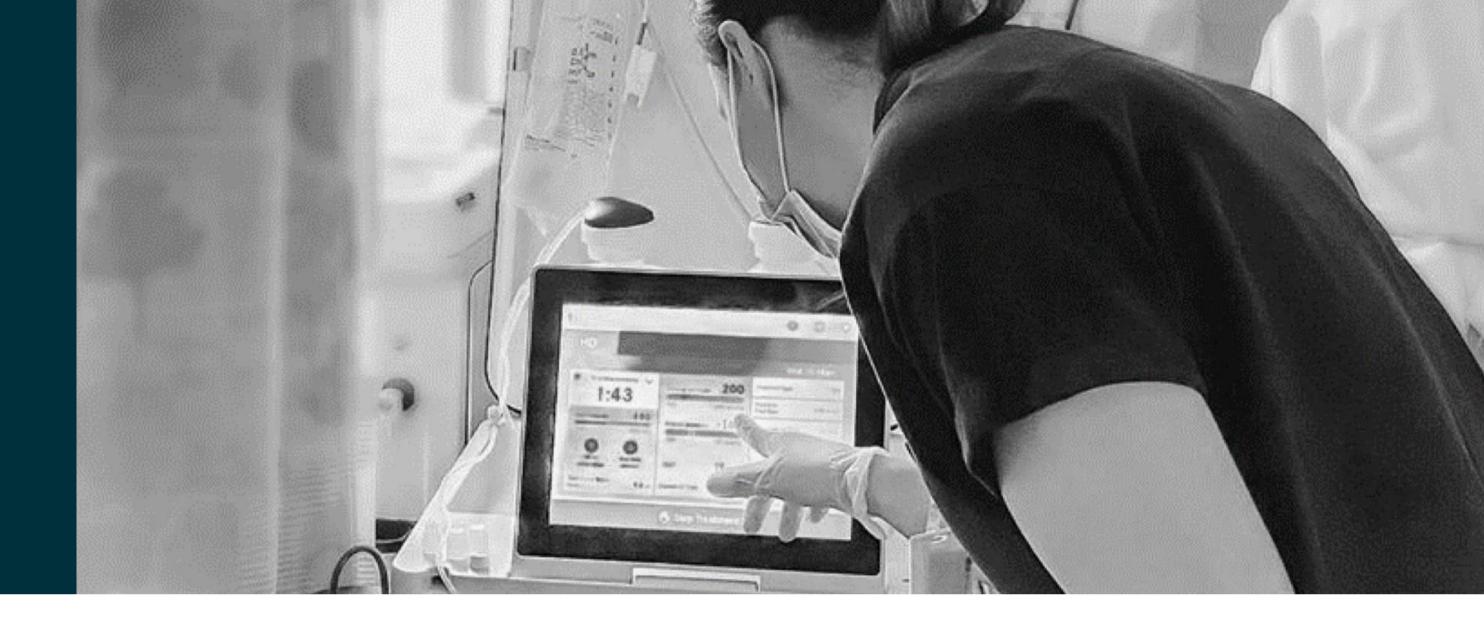
The Tablo® Hemodialysis System is indicated for use in patients with acute and/or chronic renal failure, with or without ultrafiltration, in an acute or chronic care facility. Treatments must be administered under physician's prescription and observed by a trained individual who is considered competent in the use of the device. The Tablo Hemodialysis System is also indicated for use in the home. Treatment types available include Intermittent Hemodialysis (IHD), Sustained Low Efficiency Dialysis (SLED/ SLEDD), Prolonged Intermittent Renal Replacement Therapy (PIRRT), and Isolated Ultrafiltration. This device is not indicated for continuous renal replacement therapy (CRRT) and is cleared for use for up to 24 hours. The dialysate generated by this device is not sterile and should not be used for intravenous (IV) infusion.



Retrospective, single-center analysis comparing ICU long-duration dialysis treatment (Tx) outcomes before (Nov. 2020-Oct. 2021) and after (Dec. 2021-Nov. 2022) converting to Tablo.

Intensive Care Unit improves Dialysis Care Quality while Reducing Costs: An ICU Quality Improvement Program, Tara Greenleaf Nichols, MSN, RN; David Domain; Sherrie Mullen, MSN, RN, Senthil Ramaiyah, MD; Sandy Rowe; Cynthia J. D'Alessandri-Silva, MD; Stephan Dunning, MS, MBA, American Society of Nephrology Annual Meeting, November 2023

One device, multiple markets



\$11.4B

U.S. TAM

\$2.5B

Acute market
Hospital & sub-acute
based dialysis

\$8.9B

Home market
Home hemodialysis
& transitional care

The Home market is significantly underpenetrated



Historical barriers



REIMBURSEMENT

Medicare reimbursement misaligned with treatment frequency



INCENTIVES

Inadequate provider payment incentives



TECHNOLOGY

Cumbersome technology and training

The Home market is poised for change. Outset's commercial strategy is designed to capitalize on it

CMS financial incentives

Medicare Advantage eligibility

Clinic staffing shortages

Patient preferences



Tablo addresses key barriers to home dialysis adoption and retention





3

Treatments per week

<25 hours

Training per patient

0 hours

Dialysate prep time



Historical device

5-6

Treatments per week

100 hours

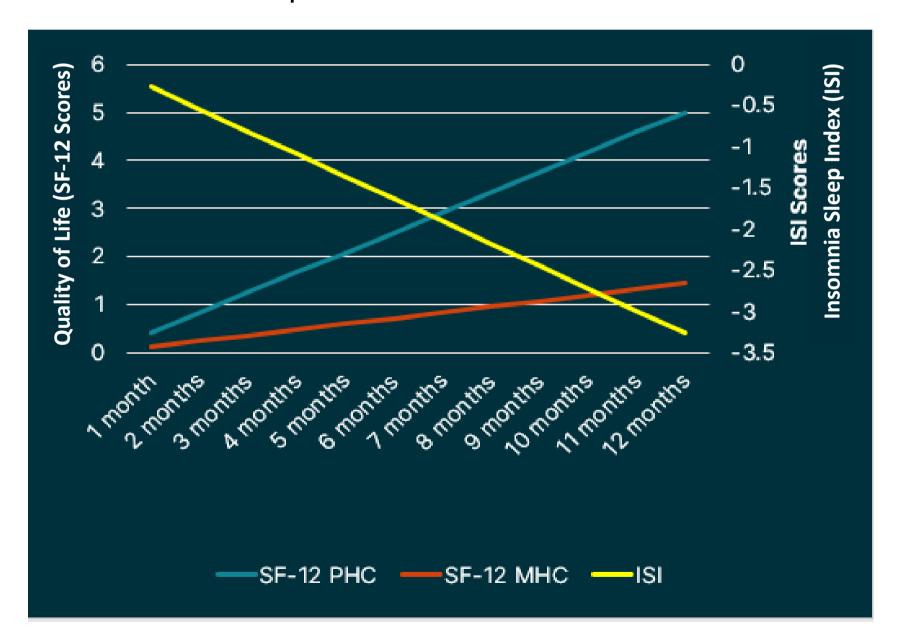
Training per patient

16-24 hours

Dialysate prep time per week

Tablo changes the Home benefit-burden ratio

Improvement in SF-12 Quality of Life Scores and Sleep Symptoms 12-month trend of patients on Tablo¹

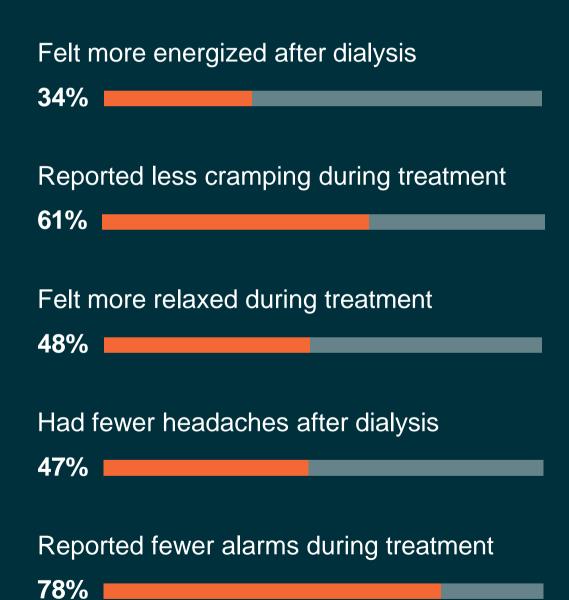


(1) Patient Reported Outcomes (PRO) among Patients Receiving Home Hemodialysis (HHD) with the Tablo® Hemodialysis System. Prospective, multicenter, observational study of patients with ESRD utilizing Tablo Hemodialysis System for Home HD; N=57, reporting at 1, 3,6,9, and 12 months post-home dialysis initiation. Wazny JH1, Holmes CD1, D'Alessandri-Silva C1, Chertow GM2 (2) Data from Outset 2019 IDE trial; Alvarez L, May Y, Chertow G, .Early Patient Experience with the Tablo Hemodialysis System; Outset Data Registry, 2022.

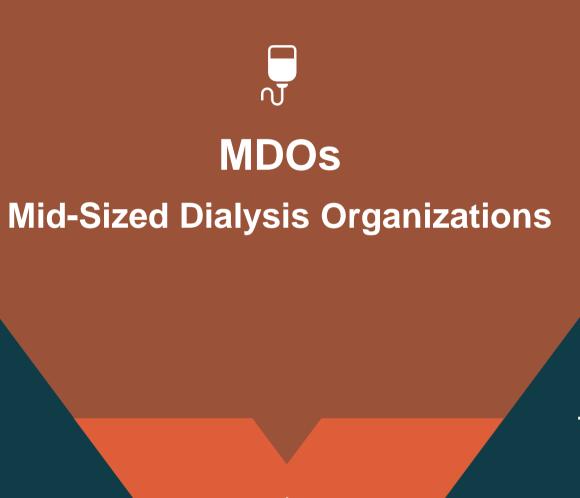
For additional clinical evidence, visit https://www.outsetmedical.com/clinical-evidence/

Patients report fewer symptoms on Tablo²

Patient-reported outcomes survey comparing in-clinic treatments on Tablo vs their previous dialysis machine



Home growth strategy



Home

\$8.9B

TAM

180K

patients

Home growth strategy

NEW HOME DIALYSIS MARKET ENTRANTS

Adjacent healthcare providers

Post-Acute providers

Health systems

LONGER TERM

MD

MDOs

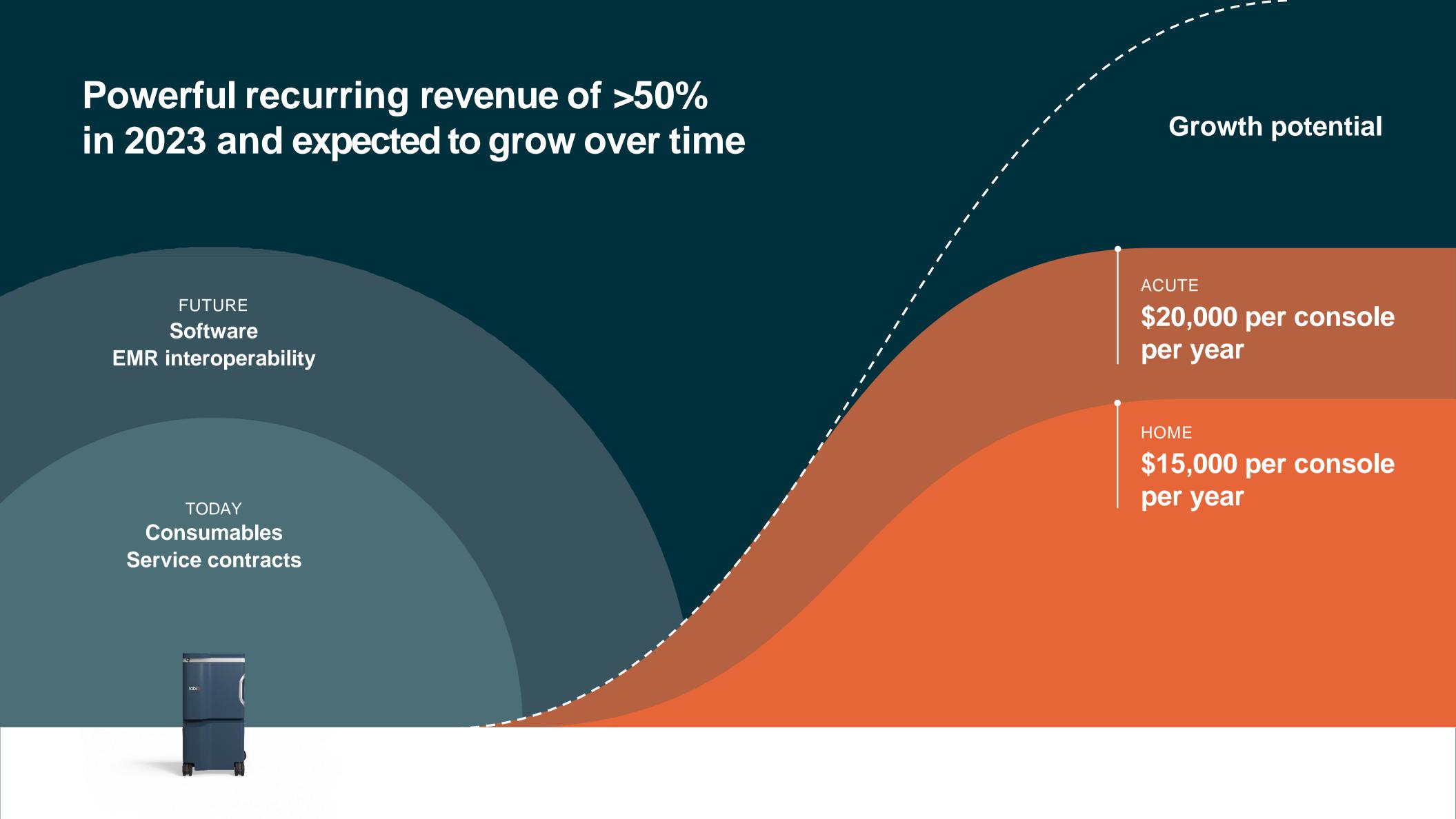
30% of the market¹

NEAR TERM

\$8.9B

TAM

^{1.} Outset estimates the \$8.9 billion total addressable market for Tablo's use in the home represents revenue from 30% of U.S. chronic dialysis patients.



Strong financial position exiting 2023

\$130M

Revenue

70% CAGR 2019–2023e 5,350

Consoles deployed (cumulative installed base at 12/31/2023)

Consoles by provider

Acute: 3,250

Sub-acute: 800

Home: 1,300

>50%

Recurring revenue

Driven by strong utilization in the acute and home settings

\$270M*

Estimated Cash position

*Cash, cash equivalents, short-term investments and restricted cash totaled \$207 million at Dec. 31, 2023. On Jan. 2, Outset reported receipt of an additional \$66.5M under its term loan agreements with SLR Investment Corp.

Financial guidance

2024 Revenue guidance

\$145M-\$153M

12% to 18% year-over-year growth

2024 Non-GAAP gross margin

Low-30% range

Full year

Mid-30% range Exiting Q4

Long-term guidance

High-teens annual revenue growth 2025-2027

~50% non-GAAP gross margin as revenues reach ~\$250M, exiting 2027

When Sara discovered she was in kidney failure last year, her were to find a trustworthy nephrologist, and to live as normal possible on dialysis. Fast-forward three months: done and do #TabloDialysis. Learn how Sara went directly from the hospital to home, avoid

in a dialysis clinic, and maintaining the normalcy and flexibilit that she and her family needed:

#BetterBeginsNow

#HomeHemodialysis #PatientExperience #KidneyDisease #HealthcareTransformation #KidneyCare #HomeDialysis # #KidneyStrong #KidneyMonth



als quickly transitioned from a longite dialysis with #TabloDialysis.

I success rate.

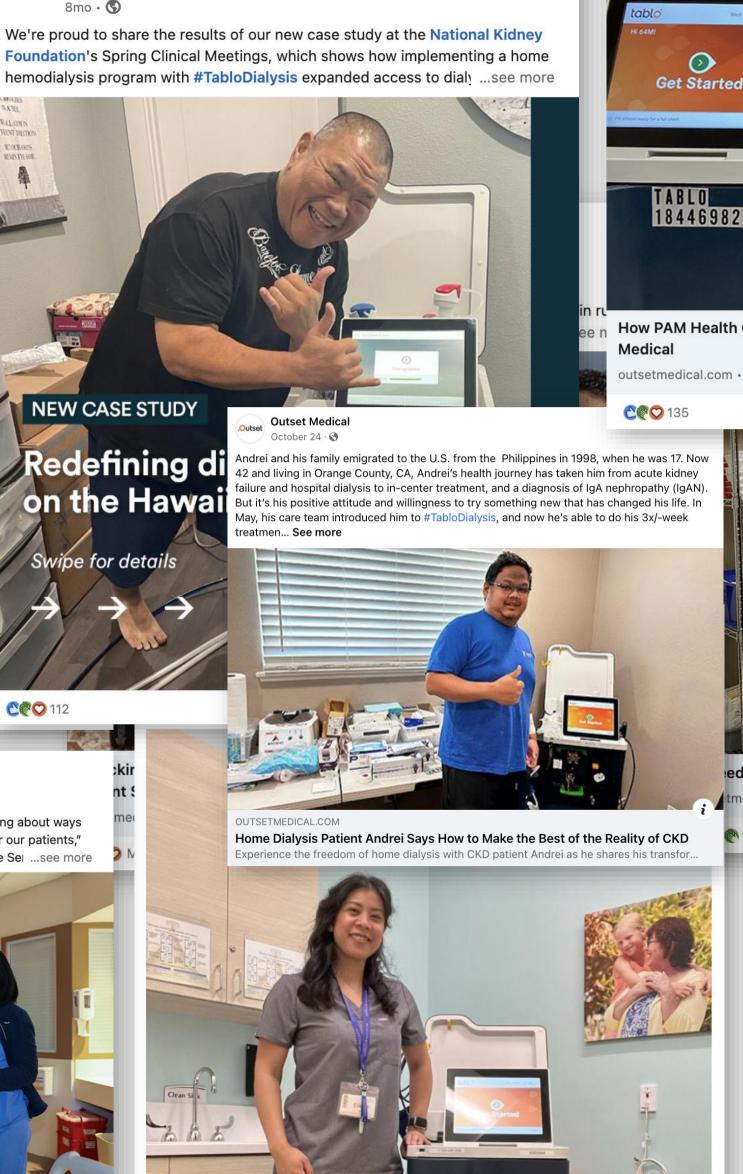


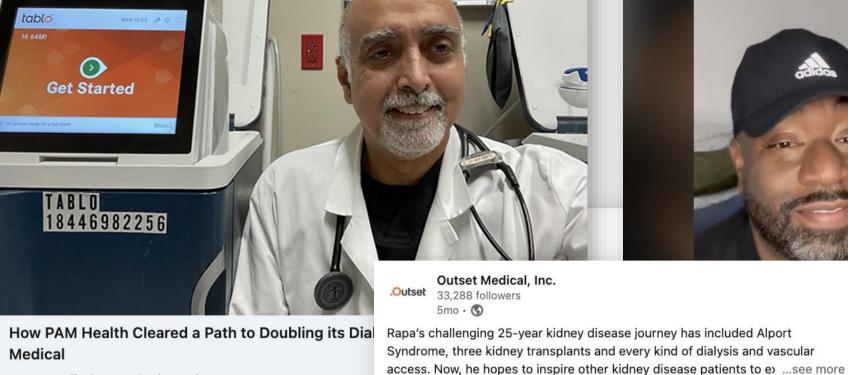
nd 25 others

in 3 Days: Sara's Sto

technology, and thinking about ways provide better care for our patients," and SVP of Patient Care Sei ...see more

Health





outsetmedical.com • 1 min read



3w • 🕥

Oklahoma Heart Hospital transi the #TabloDialysis system.





Oklahoma Heart Hospital: Floyating Patient Care with In-House Hemodialysis

3 comments ·

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After 20+ years on dialysis, inc

a stroke, Letisha wants newly o

they might fear, or the often-ne

"I have a high quality of life. I h dialysis users, or those who ha

Learn about her dialysis journe

says Letisha.

OUTSETMEDICAL.COM

It's Like a Dream: Letisha's

I the other s



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