



OVENTUS MEDICAL

Annual General Meeting (AGM)
CEO/COO Presentation
18 November 2021

**Oventus Medical is leading a new
paradigm in sleep apnea care**

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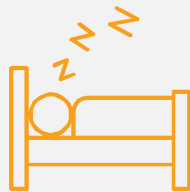
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Obstructive Sleep Apnea (OSA) Overview

OSA affects 12% of adults, 80% are untreated¹



Occurs when a person's airway repeatedly becomes blocked despite efforts to breathe



Compromises daytime functions leading to excessive sleepiness, memory impairment and depression



Increases risk of sudden death two-fold, increases risk of all-cause mortality four-fold^{2,3}

An Expensive Disease

Cost burden US\$149.6B, US\$6,033¹ per person per year undiagnosed

1. Sullivan, F. (2016). Hidden health crisis costing America billions: Underdiagnosing and undertreating obstructive sleep apnea draining healthcare system. American Academy of Sleep Medicine.
2. Heilbrunn ES, et al. BMJ Open Resp Res 2021; p1
3. Young T, Finn L, Peppard PE, et al. Sleep disordered breathing and mortality: eighteen-year follow-up of the Wisconsin sleep cohort. Sleep. 2008;31(8):1071-1078.

Oventus: Positioned for Growth



The most effective non-intrusive treatment for Obstructive Sleep Apnea (OSA) available



Total Addressable Market of US\$12 Billion; segment CAGR of 16%



Existing treatments poorly received – more than 75% untreated or refusing current options¹



Highly scalable virtual models, requiring low fixed cost & minimal capex



Active leads² increased 46% QoQ and the number of patients referred for care increased by 43% QoQ



Oventus has created the only virtual start-to-finish go-to-market model in OSA

Source: ¹Sullivan, F. (2016). Hidden health crisis costing America billions: Underdiagnosing and undertreating obstructive sleep apnea draining healthcare system. American Academy of Sleep Medicine. ². Active leads = screened, qualified and referred to channel partners to move forward with treatment

Shortcomings of the “standard of care” - CPAP



High percentage of CPAP dropouts:

50%-60%¹ of patients quit CPAP within first year of therapy

Masks and straps are uncomfortable, leading to facial abrasion, strap marks, claustrophobia and restricted movement in bed

Air pressures are hard to tolerate and CPAP can be noisy

Technology has an image problem

Infection risk - masks and hoses must be regularly replaced

Sources: 1. Ballard RD, Gay PC, Strollo PJ. Interventions to improve compliance in sleep apnoea patients previously non-compliant with continuous positive airway pressure (CPAP), JCSM 2007, Vol 3, No7, 706-12

How O2Vent[®] works



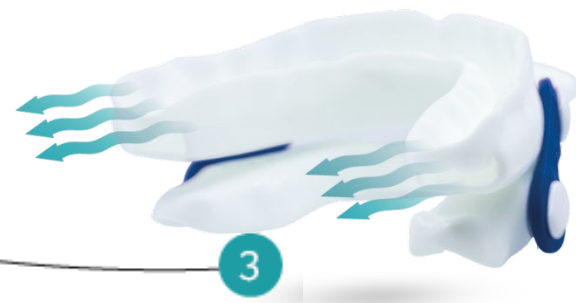
1

Positions the jaw forward, opening the airway and stabilizing the tongue.



In the presence of nasal obstruction, air can be drawn into the O2Vent Optima.

2



The unique airway channel allows uninterrupted airflow to the back of the throat to support the upper airway.

3

Comfortable, Durable, Discreet and Wearable

Step-by-step: O2Vent will become the first-line therapy for OSA

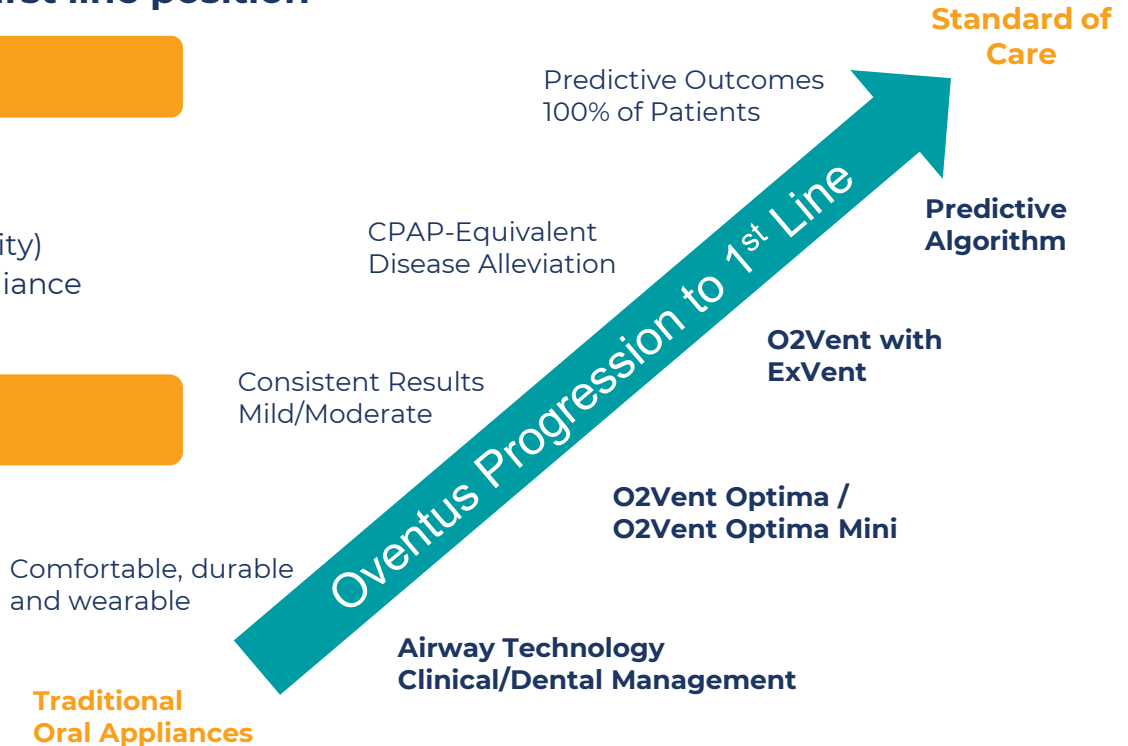
Market requirements to assume “first line position”

Physician Requirements

- Predictable and consistent outcomes
- Long-term management of OSA (efficacy)
- Few/manageable side-effects (safety, reliability)
- Patient engagement, satisfaction and compliance
- Referrals

Patient Requirements

- Comfort, wearability
- Symptom alleviation
- Elimination of stigma
- A frictionless patient journey
- Value for time/money invested



Oventus O2Vent® Addresses the Needs of 100%¹ of OSA Patients



Conventional lower jaw advancement

O2Vent® / O2Vent Optima®

O2Vent® + ExVent® PEEP valve technology

Targeted combination therapy and predictive algorithm

56%² of patients treated successfully

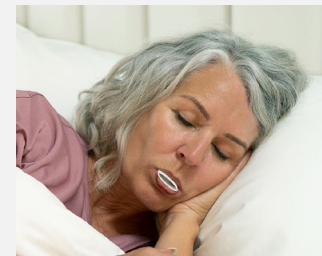
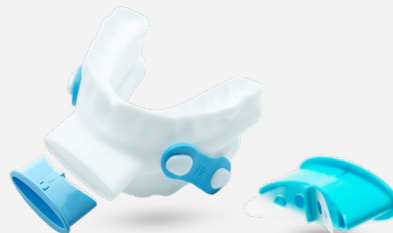
63%³ of patients treated successfully

80%^{3,4} of patients treated successfully

100%⁵ of patients treated successfully



Mandibular Advancement Devices



CUMULATIVE SUCCESS RATES WITH OVENTUS AIRWAY TECHNOLOGY*

Success = Apnea-Hypopnea Index (AHI) reduction to less than 10 events per hour

Available outside of the US. 510k approval pending*

1. Based on success rates of O2Vent + ExVent. Refer clinical resources on O2Vent.com. 2. Lavery D, Szollosi I, Moldavtsev J, McCloy K, Hart C. Airway open-airway closed: The effect of mandibular advancement therapy for obstructive sleep apnoea with and without a novel in-built airway. Poster session presented at: Australasian Sleep Society Sleep DownUnder, 2018, October 17-20; Brisbane, Australia 3. Lai, V, Tong, B, Tran, C, Ricciardiello, A, Donegan, M, Murray, N, Carberry, J, Eckert, D. 'Combination therapy with mandibular advancement and expiratory positive airway pressure valves reduces obstructive sleep apnea severity'. Sleep, vol 42, no. 8, August 2019, zsz 119. 4. Tong B, Tran C, Ricciardiello A, Donegan, Murray N, Chiang A, Szollosi I, Amatoury J, Eckert D. Combination therapy with CPAP plus MAS reduces CPAP therapeutic requirements in incomplete MAS responders. Poster session presented at: Australasian Sleep Society Sleep DownUnder, 2018, October 17-20; Brisbane, Australia 5. A Aishah, B Tong, A Osman, M Donegan, G Pitcher, B Kwan, L Brown, T Altree, R Adam, S Mukherjee, D Eckert, P002 Targeted non-CPAP combination therapy resolves obstructive sleep apnoea, SLEEP Advances, Volume 2, Issue Supplement_1, October 2021, Page A22. *ExVent available in Oventus' key markets of Australia and Canada, not yet approved in the US.

The Challenge: Complex Journey and Inconsistent Results

Sleep Facility



Patient referred to a sleep physician



Sleep test performed at home or in the lab



Follow up consultation



Recommend CPAP



CPAP Trial with Durable Medical Equipment (DME) Distributor or CPAP Reseller



Successful Trial – Patient continues on CPAP



If not successful on CPAP trial or abandons treatment, then likely to fall out of care



Subsequent sleep consultation for alternative treatment

Dental Clinic



Referred to a dentist or seeks one out independently



O2Vent Optima delivered



Dental follow up

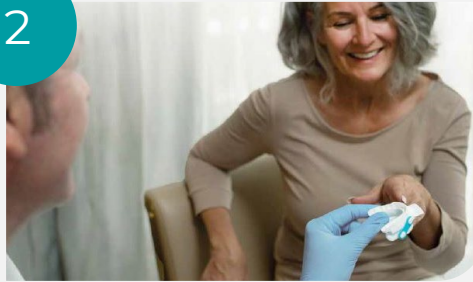


Refer back to sleep facility

By enabling dentists to take oral scans of patients' mouths within the sleep facility, the patient is able to complete the whole care cycle at one location.



1
Sleep doc consults/
diagnoses/
prescribes



2
Dentist within sleep centre* scans
patient for O2Vent Optima, delivers
device, handles reimbursement



3
Ongoing patient
management shared by the
sleep physician and dentist

*Sleep Apnea Diagnosis and Treatment is Often Partially or Fully Covered by Insurance (Varies by Market)

Virtual model developed in response to COVID-19

- Virtual collaboration between dentists and sleep groups
- Dentist-guided virtual impressions
- Home delivery of O2Vent therapy
- 98% fit rate validated, comparable to digital scans

With greatly reduced costs, therapy can be delivered at low cost to the patient, while maintaining industry standard profits for channel partners.



1

1. Patients start with a free consultation with one of Oventus' sleep professionals to review the process and see if they're a fit for O2Vent Optima

2

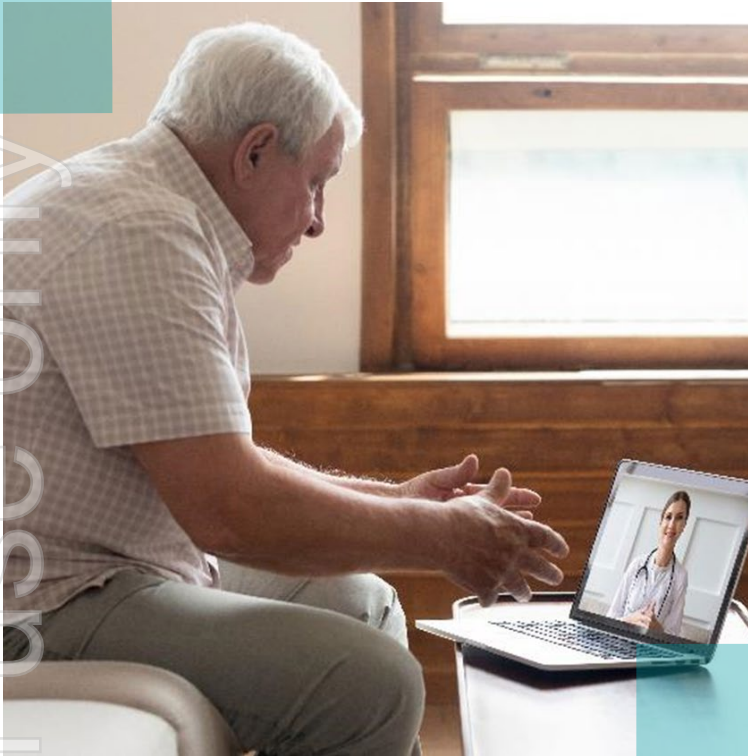
2. If they're a candidate, Oventus will ship the patient an impression kit and schedule a virtual impression appointment with a board certified dentist



3

3. During the virtual impression appointment, patients are guided to use the impression kit to obtain the data from which their O₂Vent is 3D printed to be delivered to the sleep facility or patient's home





COVID-19 has accelerated the transition to online research, purchasing and virtual care – the “Virtual Model”

- **Patient preferences** are now the key to the OSA treatment decision
- There is considerable **pent-up demand** for an alternative to CPAP and inconsistent appliances
- Patients prefer **at-home service** to multiple clinical and equipment supplier visits
- Patients are now **searching online** for alternative treatments from home
- **Telehealth and Virtual** diagnosis are now **mainstream**
- Nearly all **sleep apnea testing is done at home**, not the sleep lab

One Efficient, Scalable Patient Journey Across All Channels

Reduced capital requirements

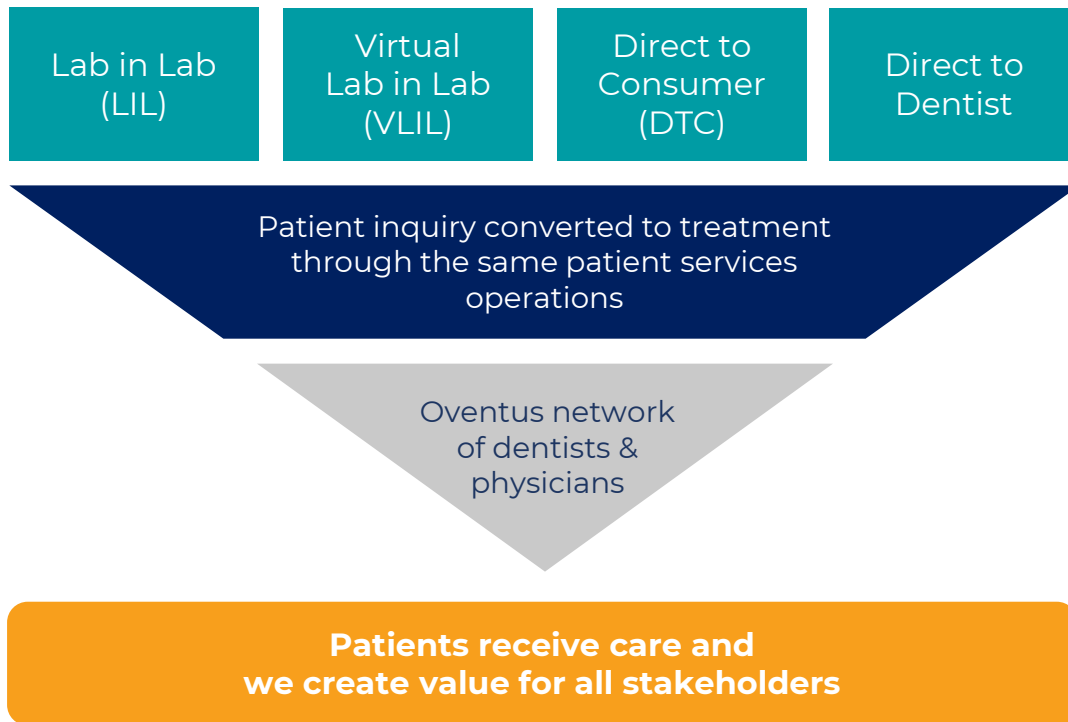
Lower fixed costs

Significantly increased scalability

Centralised patient management and implementation across all channels

Ability to deliver care in any setting

Ability to sell through home equipment providers and DTC

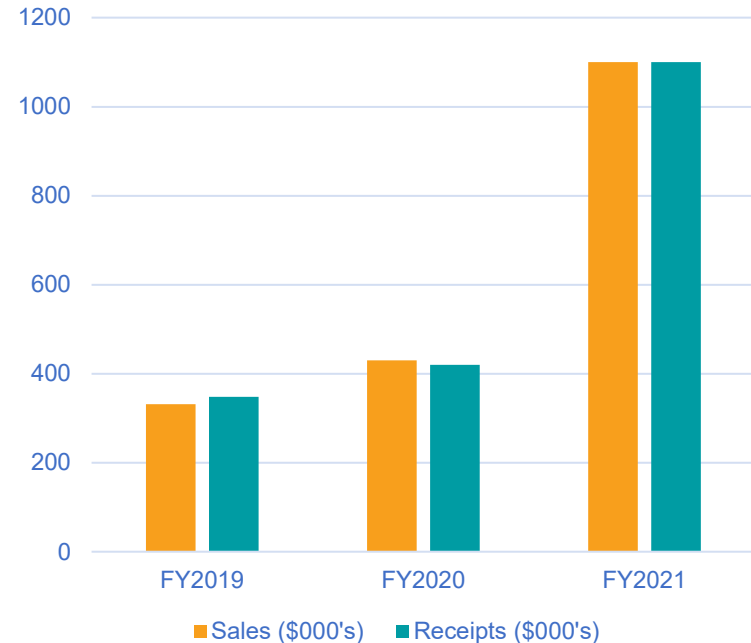


New “Go to Market” Strategy Driving Sales

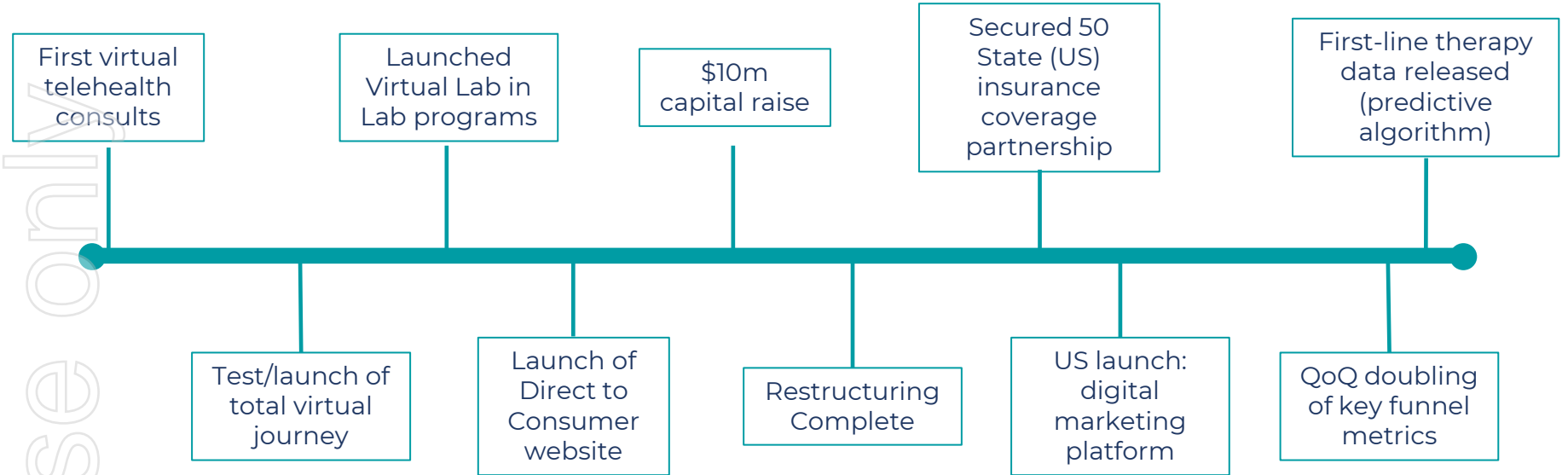
- Growth and financial discipline over FY21
 - Device sales: \$1.1m, up 192%
 - Cash receipts of \$1.1m up 160%
- Transition to virtual sales model enabled growth during pandemic related clinic/dental shutdowns
- Patient-focused customer capture model developed in H2 FY21 and ready for scale up
- US national dental and in-network insurance coverage finalised in Q4 FY21

Oventus is now positioned to engage and treat patients from home in every US state- a major milestone

Strong FY21 Growth



Key Momentum Drivers from FY21 and FY22 to Date



Pillars of our Direct to Customer Capture Model

DTC Demand Generation:

One automated CRM, one branded journey

01



Awareness

DIGITAL
MARKETING
PROGRAMS

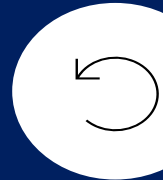
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Consideration

NURTURE
INTEREST

03



Remarketing

ENGAGE
NON-
PURCHASERS

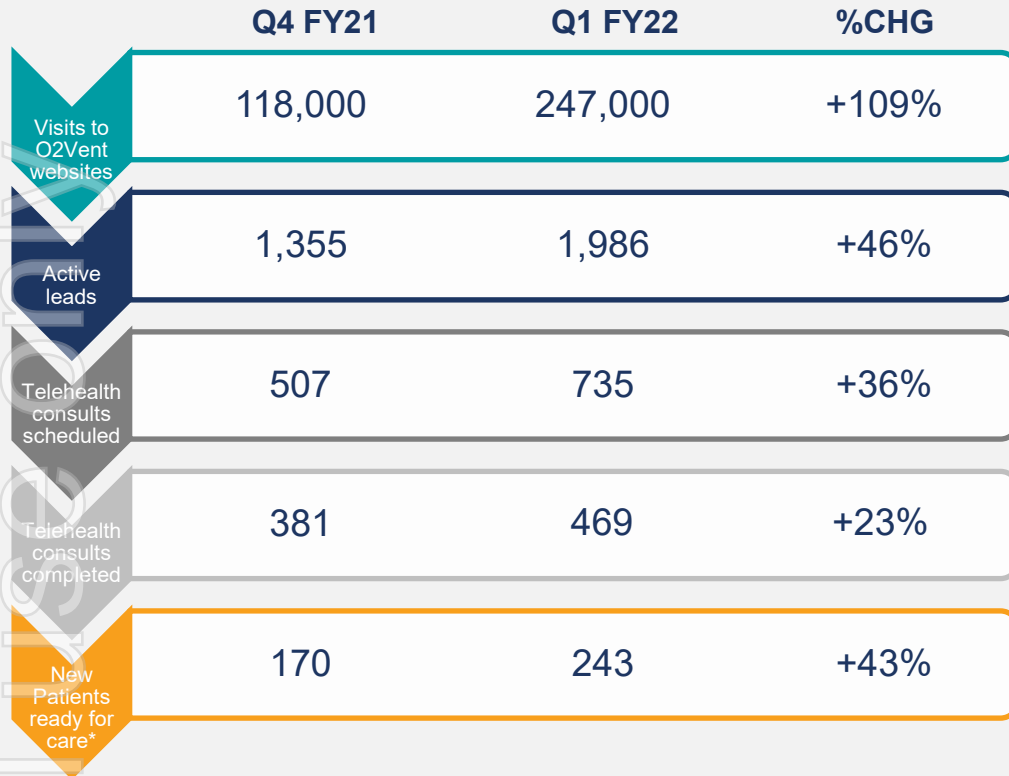
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Loyalty

MOTIVATE
REFERRALS

Targeted Online Marketing Boosting Leads Funnel

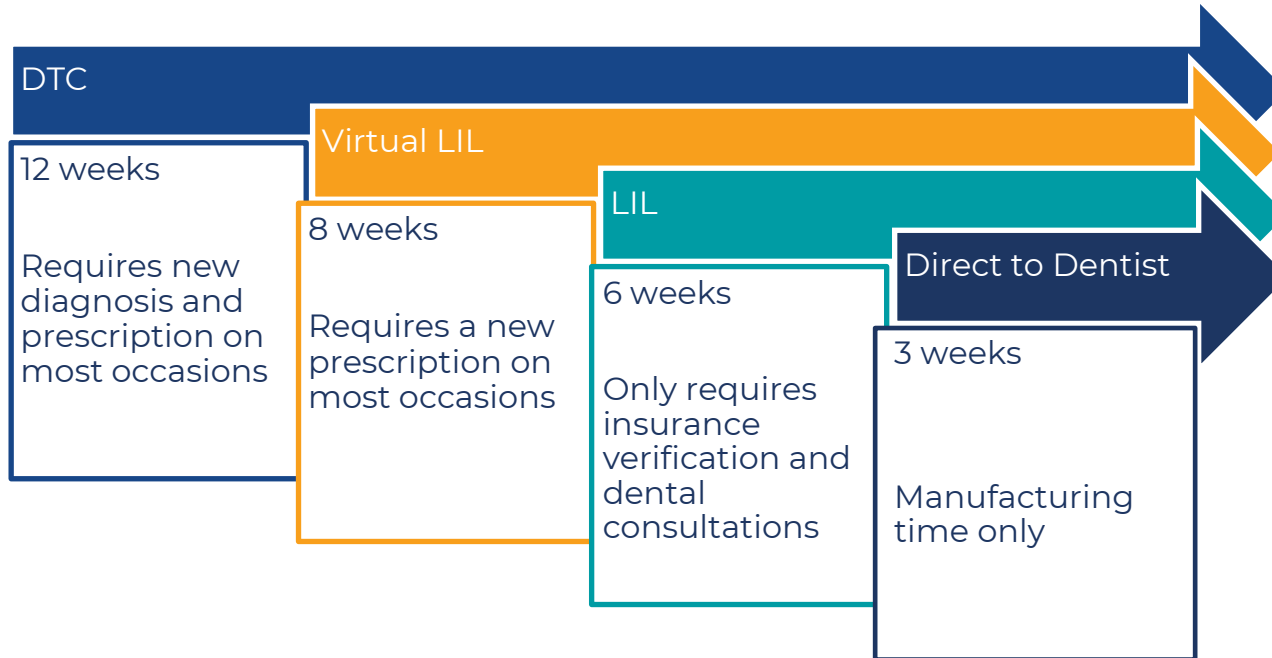


* screened, qualified and ready to move forward with treatment

Optimisation Process

- Measure and improve quality of campaigns (ongoing)
- Improve awareness of brand and product
- Build database of qualified leads
- Increase database retargeting as % of activity
- Reduce friction in CCM process
- Improve conversion rates

Revenue Lead Times by Channel

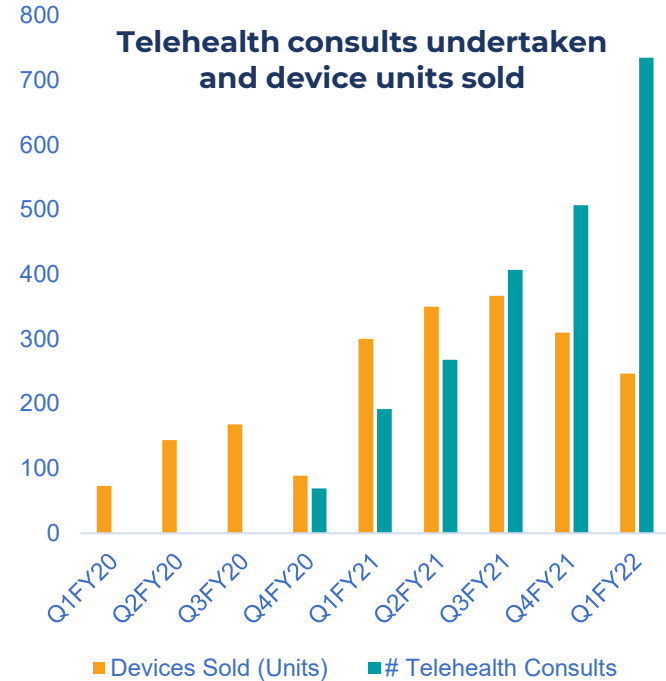


Longer sales cycle will mature to higher yield funnel by Jan 2022

Internal use only

DTC : Longer Sales Cycle but Greater Revenue Opportunity

- DTC and Virtual Lab In Lab = preferred pathway for our patients now
- Longer qualification process and insurance payment option = longer sales cycle
- New sales funnel management process is driving higher yields
- Initial 12-week lead time from capture to revenue
- Up to an additional 12 weeks to receive payment for in-network insurance patients
- December quarter will see funnel maturing and increasing revenues



Customer Capture:	Launch digital CRM globally, show incremental efficiency gains QoQ
Conversion to Therapy:	Improve conversion rates and time to treatment (patient journey)
Clinical Evidence:	Test and refine the Predictive Algorithm and position O2Vent as a proven first-line therapy
Intellectual Property:	Ongoing prosecution of 21 active applications
Operational Efficiency:	Reduce product delivery time and COGS
Financial Results:	Demonstrate clear path to breakeven



DR CHRIS HART
Founder
and CEO

As the inventor of the O2Vent technology, Chris is overseeing the launch of the O2Vent to patients and through clinicians via dentists and the 'Lab in Lab' model. Chris has relocated to the US to assist with roll-out of the Oventus Sleep Treatment Platform.



JAKE NUNN
Non-Executive
Director

California based, Jake has more than 25 years' experience in the life science industry as an investor, independent director, research analyst and investment banker. Jake is currently a venture advisor at New Enterprise Associates (NEA).



JOHN COX
President
and COO

John will lead the sophisticated roll out of the virtual & director to consumer models for Oventus. He brings 30 years experience in the MedTech sector, including direct experience in sleep and related technology marketing & operations.



PAUL MOLLOY
Non-Executive
Director

Based in Southern California, Paul has considerable global and US medical device industry expertise, with twenty-five years' experience leading a range of public, private and venture capital funded healthcare companies. He is currently President and CEO of ClearFlow Inc., a US-based medical device company.



SUE MACLEMAN
Chair and
Non-Executive
Director

Sue has more than 30 years' experience as a pharmaceutical, biotechnology and medical technology executive having held senior roles in corporate, medical, commercial and business development.



DR MEL BRIDGES
Non-Executive
Director

Over 35 years' experience founding and building international life science, diagnostic and medical device companies and commercialising a wide range of Australian technology.



STEVE DENARO
Company
Secretary

Experienced Company Secretary and Chief Financial Officer of various public companies and with major chartered accountancy firms in Australia and the UK.

Our Higher Calling: The Oventus Patient

“The O2Vent Optima has made such a difference to my quality of sleep and I no longer wake in the night with that ‘drowning feeling’.

It channels air to the back of my throat allowing me to breathe easily and sleep through the night.

I now wake more refreshed and can concentrate better during the day without feeling drowsy.”

Sarah Atkins





Dr Chris Hart

Founder & CEO

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