kestra®

Company Overview

July 2026

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The Kestra Opportunity

- Underserved Market with Urgent Clinical Need
- Differentiated, Clinically-Proven ASSURE System
- $10B U.S. Opportunity with Clear $1B Go-Get Today
- Scalable Business with Attractive Financial Profile
- Proven Leadership Team

Innovating At-Home Cardiac Care

Lifesaving technology for patients at elevated risk of Sudden Cardiac Arrest (SCA)

Who We Are

Kestra is a **wearable** medical device and **digital** healthcare company focused on **transforming** patient outcomes using **monitoring** and **therapeutic technologies** that are intuitive, intelligent, and connected.

Cardiac Recovery System®

The Cardiac Recovery System, anchored by the ASSURE® WCD, bridges a critical gap in sudden cardiac death protection—pairing proven therapy with actionable insights to guide recovery.

Cardiac Recovery System (CRS)

Seasoned MedTech Leadership Team

Recent additions strengthen commercial and public company leadership capabilities

Brian Webster
President & CEO
33 years

Lilly · PHYSIO CONTROL · Medtronic

Vaseem Mahboob
CFO
23 years

Endologix · GE · DIH

Traci Umberger
CAO & General Counsel
34 years

PHYSIO CONTROL · Medtronic

Al Ford
CCO
20 years

Axonics · CARDIAC science

Timothy Moran
Chief Business Officer
25 years

avertix · COVIDIEN · MOTUS GI

Debra Schotz
SVP Marketing
33 years

Jeff Laub
SVP Operations
26 years

Gordon Teddy
CIO
31 years

Beverly Magrane
VP QA/RA
42 years

Daniel Finney
VP R&D
23 years

Christine Schlenker
VP Revenue Cycle
27 years

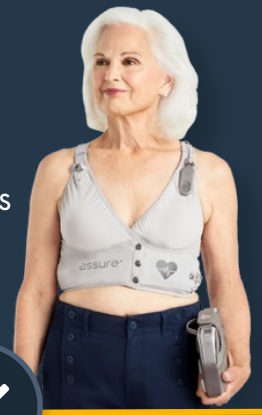
Neil Bhalodkar
VP Investor Relations
20 years

*Years listed reference professional experience within the MedTech industry

Key Milestones Fueling Commercial Progress

A track record of key achievements and execution

2014
Formed by Experienced Executives from Leading External Defibrillator Company



2019
Completed ACE-DETECT Pivotal Study

2020
Completed ACE-CONVERT Clinical Trial

2021
FDA Premarket Approval (PMA) Achieved
First Patient Protected by ASSURE WCD

2022
100M+
Covered Lives
Full Commercial Launch in August

2025
Initial Public Offering

33,000+
Patients Protected[1]
290M+
Covered Lives[1]

NASDAQ **KMTS**

Today
Completed Post-Approval Study

Positive Late-Breaking Results Presented at AHA 2025

ace Post Approval Study

1. As of January 2026

SCA Continues to Be a Leading Cause of Death

Rapid defibrillation is the proven therapy to restore the fibrillating heart to normal

Sudden Cardiac Arrest (SCA)

SCA is the sudden loss of heart function, resulting in immediate loss of blood flow.

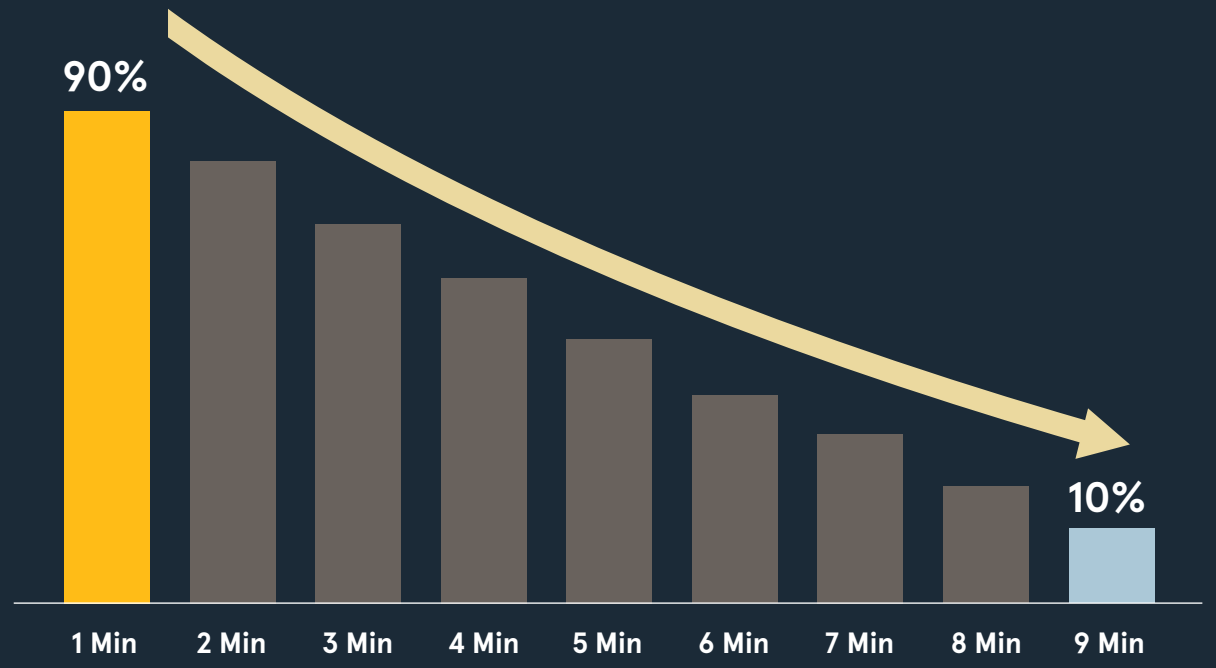
~436K
Deaths Per Year Are Caused by SCAs[1]

73%
Occur at Home or Residence[1]

50%
of SCAs Are Unwitnessed[1]

7 Min
Average Time from 911 Call to EMS Arrival[1]

Chances of Survival Post Cardiac Arrest[1]

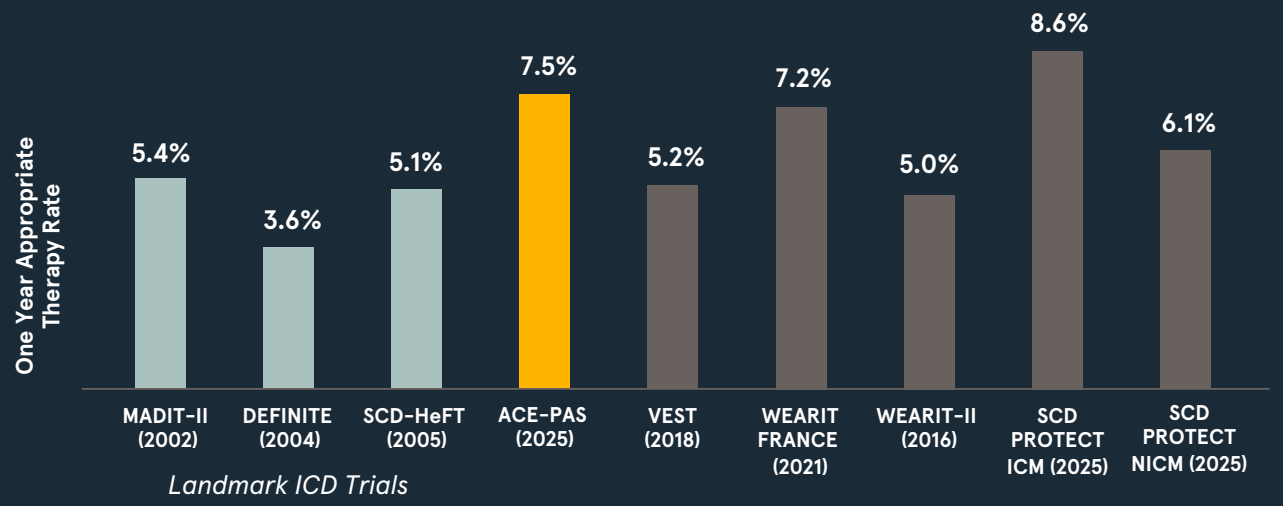


1. Based on data from the American Heart Association and other third-party estimates

First 90 Days Post Diagnosis Equals Highest Risk

Sudden cardiac arrest (SCA) does not wait

Appropriate WCD shock rates during the ICD waiting period comparable to early landmark ICD trials



WCD Rates have been annualized for comparison to ICD Trials

ICDs are a Class I indication to protect patients from SCA and have a mandatory 90 day waiting period for most patients

As shown in landmark ICD and WCD trials, these patients face a significant SCA risk but are **commonly left unprotected** during the ICD waiting period

Post-MI patients without an intervention have a 40-day waiting period

Moss, Arthur J., et al. "Prophylactic implantation of a defibrillator in patients with myocardial infarction and reduced ejection fraction." *New England Journal of Medicine*, vol. 346, no. 12, 21 Mar. 2002, pp. 877–883

Kadish, Alan, et al. "Prophylactic defibrillator implantation in patients with nonischemic dilated cardiomyopathy." *New England Journal of Medicine*, vol. 350, no. 21, 20 May 2004, pp. 2151–2158

Bardy, Gust H., et al. "Amiodarone or an implantable cardioverter–defibrillator for congestive heart failure." *New England Journal of Medicine*, vol. 352, no. 3, 20 Jan. 2005, pp. 225–237.

Olgin, Jeffrey E., et al. "Wearable cardioverter–defibrillator after myocardial infarction." *New England Journal of Medicine*, vol. 379, no. 13, 27 Sept. 2018, pp. 1205–1215.

Garcia, Rodrigue, et al. "Wearable cardioverter-defibrillator in patients with a transient risk of sudden cardiac death: The WEARIT-france cohort study." *EP Europace*, vol. 23, no. 1, 30 Nov. 2020, pp. 73–81.

Kutyifa, Valentina, et al. "Use of the wearable cardioverter defibrillator in high-risk cardiac patients." *Circulation*, vol. 132, no. 17, 27 Oct. 2015, pp. 1613–1619, https://doi.org/10.1161/circulationaha.115.015677.

Duncker, David, et al. "Sudden cardiac death in newly diagnosed non-ischaemic or ischaemic cardiomyopathy assessed with a wearable cardioverter-defibrillator: The German nationwide SCD-protect study." *European Heart Journal*, 29 Aug. 2025

Al-Khatib, Sana M., et al. "2017 AHA/ACC/HRS guideline for management of patients with ventricular arrhythmias and the prevention of sudden cardiac death." Circulation, vol. 138, no. 13, 25 Sept. 2018

Unlocking a $10B U.S. Market Opportunity

Recent high-impact clinical publications have the potential to inform clinical guidelines for WCD prescription

$1B+
Existing WCD Market

~140K patients protected annually

kestra® Zoll

+

~$9B
Unpenetrated U.S. TAM

~730K eligible patients annually

=

~$10B
Total U.S. Opportunity

~850,000 eligible patients annually

Drivers of Broader Adoption

- Better patient experience improves adherence across this extended wear period – solves compliance issue
- Proven med-tech market expansion when second competitor comes to market
- 40,000+ patient studied and published in 2025 provide strong support for improvement of guideline recommendations

* Based on internal and third-party estimates. TAM is based on current Medicare reimbursement rates, average WCD prescription duration, and approximately 850,000 cardiac patients per year eligible for a WCD.

$1B+ Global Sales Despite Legacy Product Challenges

Therapeutic benefits are clear but depend on patient compliance

2018 VEST Intention-to-treat Analysis[1]

Did not show statistically significant reduction in arrhythmic death and as-treated analysis suggested poor WCD compliance was the primary driver

75%

of deaths in WCD arm of study occurred when patients were not wearing the WCD

2020 VEST Per-protocol Analysis[1]

After censoring non-compliant patients, results showed:

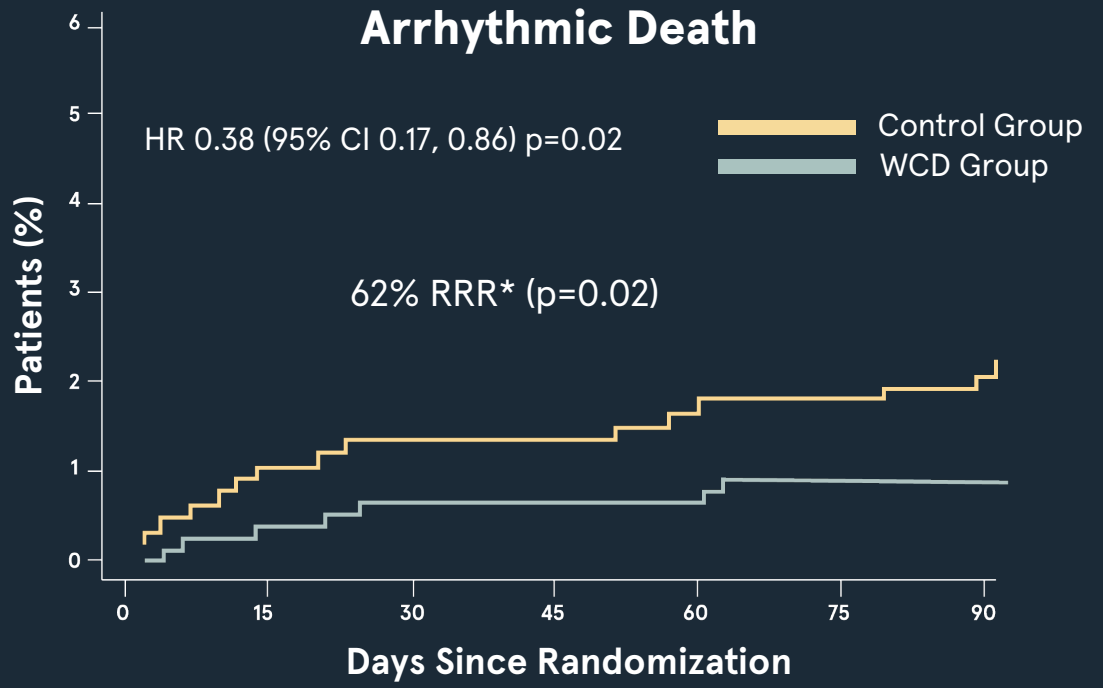
62%

Reduction in arrhythmic death among compliant WCD wearers

75%

Reduction in all-cause mortality among compliant WCD wearers

Incidence of Arrhythmic Death in 2020 Per-protocol Analysis of the VEST Trial[1]



1. Based on third-party study

*Although the initial intention-to-treat analysis of the WCD therapy in the VEST study published 2018 did not indicate a significantly lower rate in sudden death and total mortality when compared to GDMT alone, a subsequent as-treated analysis of the data showed a significantly lower percentage of patients died when they were wearing the WCD than when they were not. This suggested that poor patient compliance with wearing the WCD was a primary factor of the intention-to-treat-results.

Cardiac Recovery System Platform

A powerful cardiac care ecosystem establishing a halo of protection

ASSURE® WCD
Optimizing comfort & patient compliance

ASSURE Patient App
Connecting patients & providers

ASSURE Assist® Service
Providing immediate post-shock patient support

Kestra CareStation® Platform
Delivering actionable, alert-based clinical insights

Heart Alert™ Services
Proactive review of alerts with clinician & patient notification of clinically actionable events

ACE-PAS Demonstrates Real-World Effectiveness

WCD monitoring and detection capability reveals broadening clinical utility

ACE-PAS Confirms Performance at Scale (>21,000 Patients)

Key Findings

Primary Endpoints

- 100% all-shock conversion
- Exceptionally low inappropriate shock rate (0.0065 per patient-month)

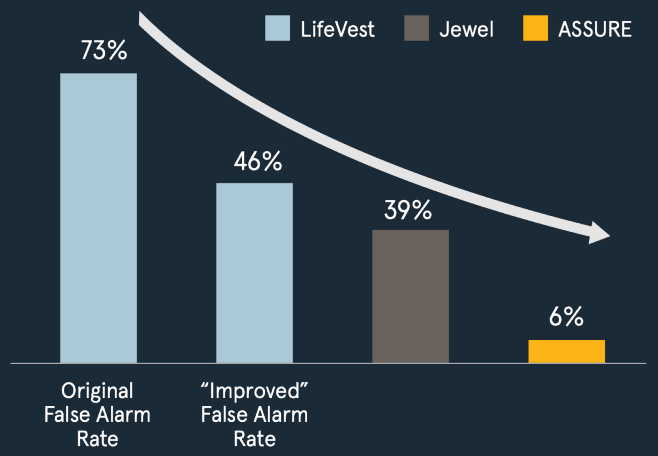
Secondary Endpoints

- 0.6% incidence per month (7.5 per 100 patient-years) of life-threatening VT/VF underscores need for early protection
- Detected actionable arrhythmias

Based on ACE-PAS study

Exceptionally Low False Alarms in Real-World Use

% of Patients Experiencing False Alarm



Real-World Insights to Inform Platform Evolution

Expanded Clinical Use

- High prevalence of complex patients with multiple cardiac comorbidities
- Frequent detection of clinically actionable non-VT/VF arrhythmias
- Extended monitoring windows aligned with GDMT optimization and recovery

Common Co-Morbidities

AF | Hypertension | Coronary Artery Disease

A Flexible Foundation for Long-Term Expansion

The ASSURE Platform is built to support new sensors, new data streams & future clinical applications

Powerful Today

- ✓ ASSURE® WCD with differentiated patient experience
- ✓ Integrated digital platform
- ✓ Continuous rhythm data supporting real-world clinical decisions
- ✓ Commercial infrastructure operating at scale

Designed for Durable Expansion

- ✓ Robust IP protection across algorithms, UX, hardware, sensors
- ✓ Regulatory, reimbursement & care delivery infrastructure
- ✓ Supports multi-sensor / future applications

Platform Extensibility in Action

Future Biobeat™ Sensor Integration

- ✓ First and only FDA-cleared wireless, cuffless 24-hour blood pressure monitoring sensor—enabling continuous, non-invasive vital sign capture with automated clinical reporting
- ✓ New modality to be added using core infrastructure
- ✓ Validates platform design for clinical expansion

FIRST & ONLY

Built on a Strong IP Foundation: 393 issued and pending patents worldwide

Commercial Team Expanding Rapidly

Achieving broad insurance coverage has led to an accelerated sales team buildout

Expanding Payor Coverage Supported by Established Medicare Coding

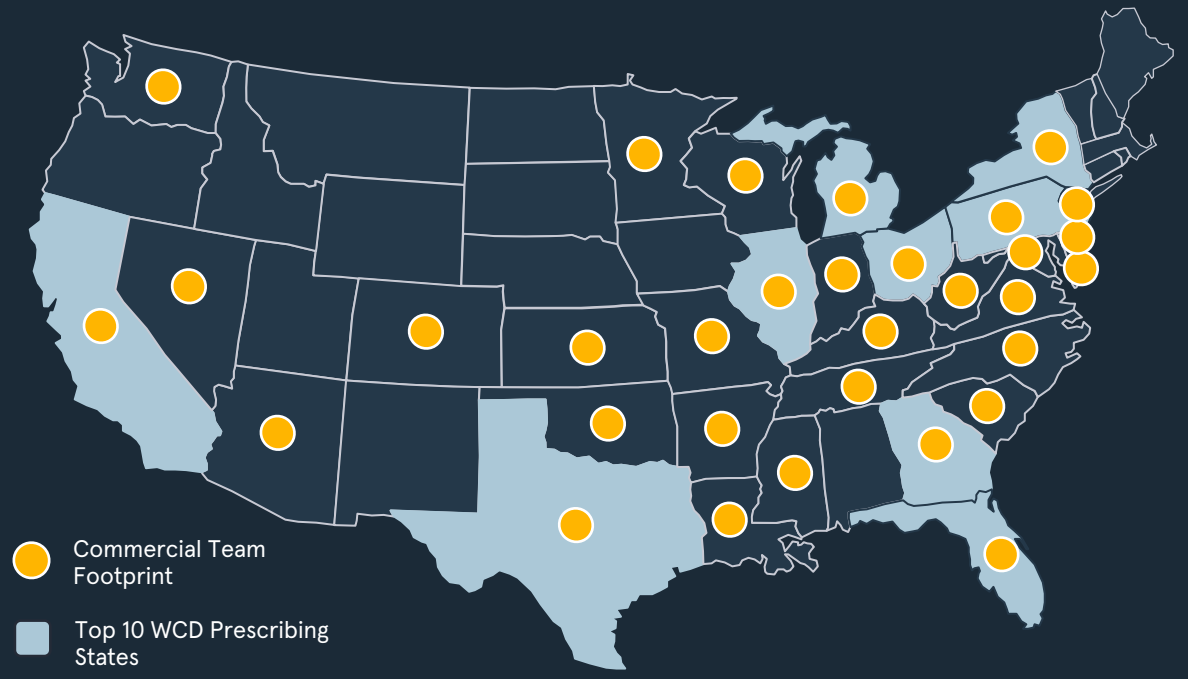
Medicare + National Commercial Plans

290M+ covered lives[1]

Stable Medicare Reimbursement Under Established WCD Coding (K0606)

+29%*
Cumulative Increase (2016–2026)

Commercial Scale Aligned to WCD Demand

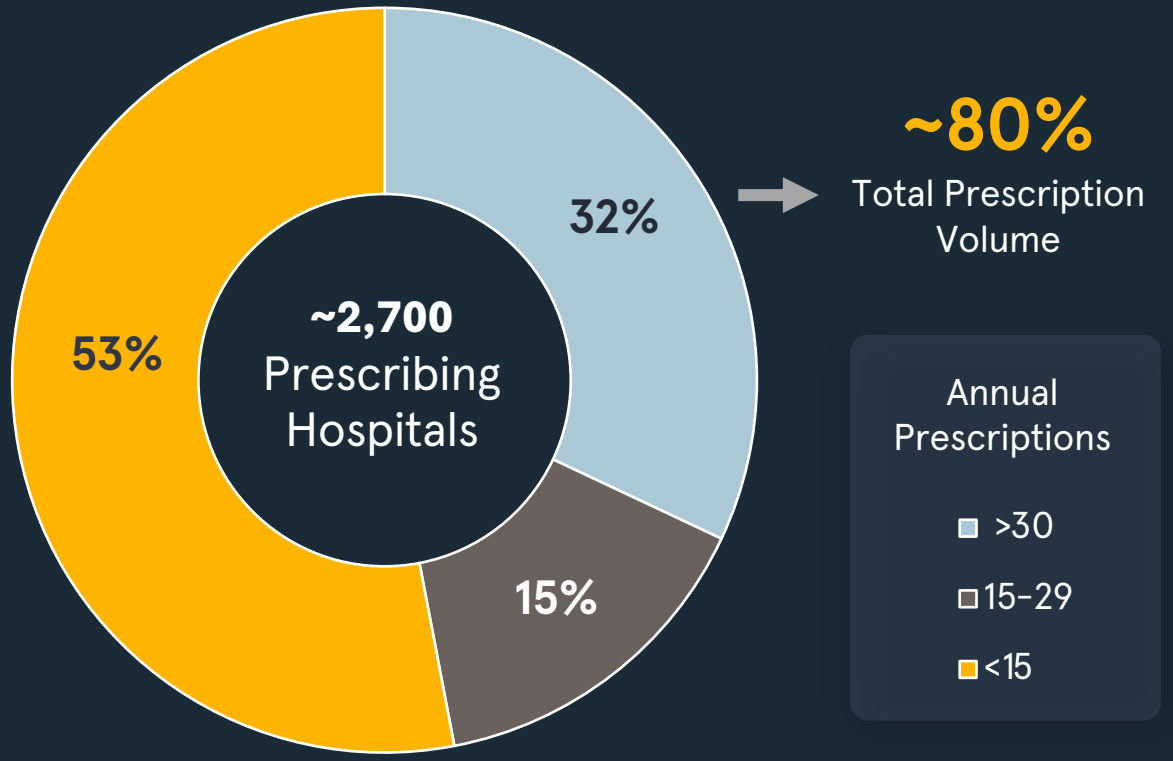


1. As of January 2026. Based on internal and third-party estimates
*Based on January 2026 DMEPOS Fee Schedule

Targeting High Prescribing Hospitals & Clinics

WCD prescriber concentration provides roadmap for sales territory prioritization

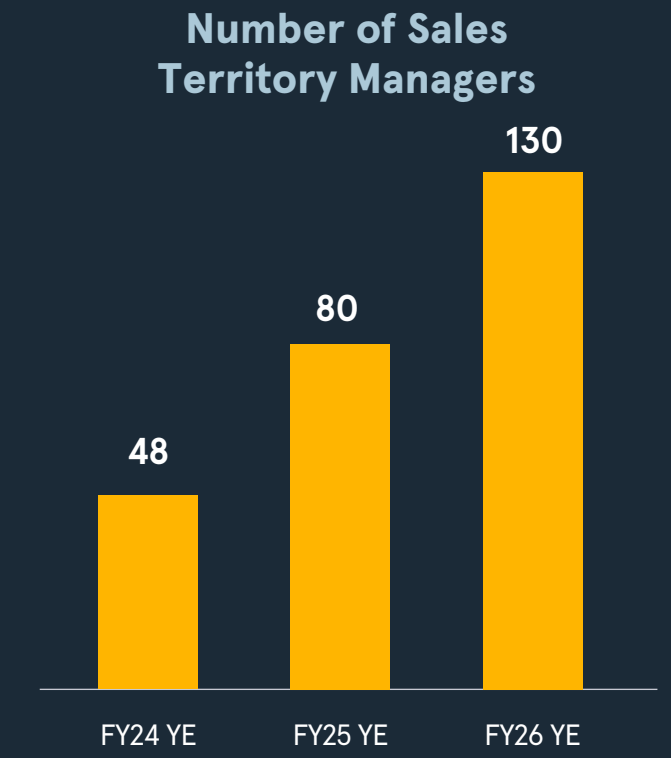
Annual U.S. Prescription Volume by Hospital[1]



~80%
Total Prescription Volume

Annual Prescriptions
- >30
- 15-29
- <15

Increasing Market Coverage



1. Based on internal and third-party estimates as of November 2024.

Business Model & Key Drivers

Significant progress since commercial launch on each of the key drivers for growth and scale

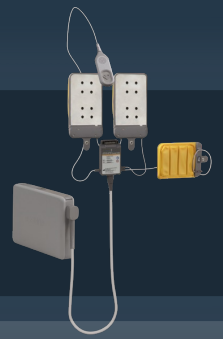
ASSURE WCD at Fitting

WCD Patient
Patient fitted & trained in-hospital

3-4 month average prescription

Discharge typically within 24 hours

WCD Equipment Rental & Re-Use Model



Reconditioned Components

Reassembled Kits

Key Drivers

Supply Chain Ramp & Capacity

> 7,500 unit WCD asset pool in place and over 80% of filled prescriptions use re-conditioned devices

Payor Coverage

~ 290M Covered Lives in the U.S. This is about 90% of all covered lives now under contract with Kestra

Revenue Cycle Management

Revenue Cycle Management (RCM) team established, including order in-take, billing and collections

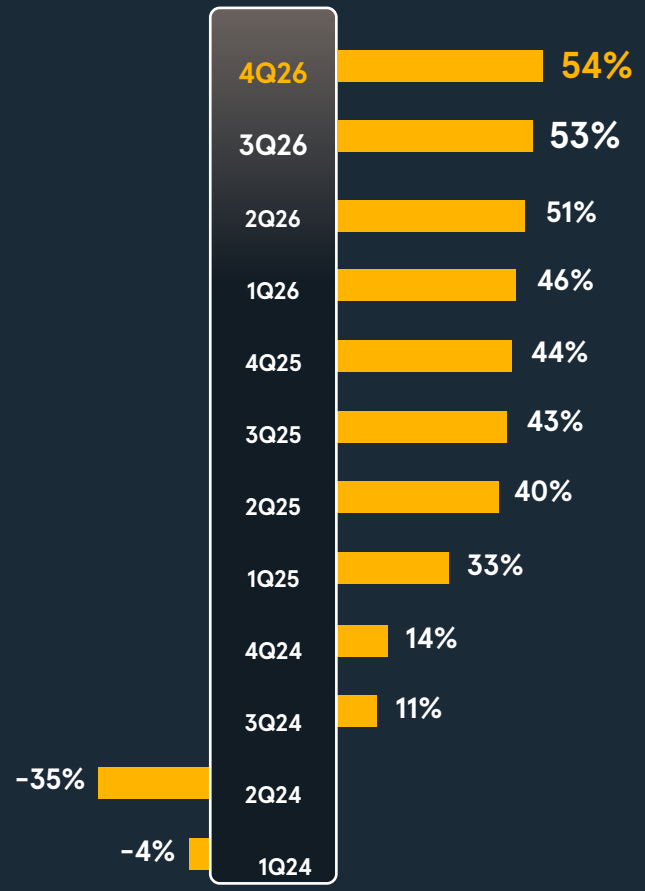
Commercial Team Expansion

Expansion of the commercial team in markets with high prescription density and high in-network payor coverage.

Rental Model Provides Attractive Unit Economics

10 quarters in a row of gross margin expansion

Gross Margin Expansion



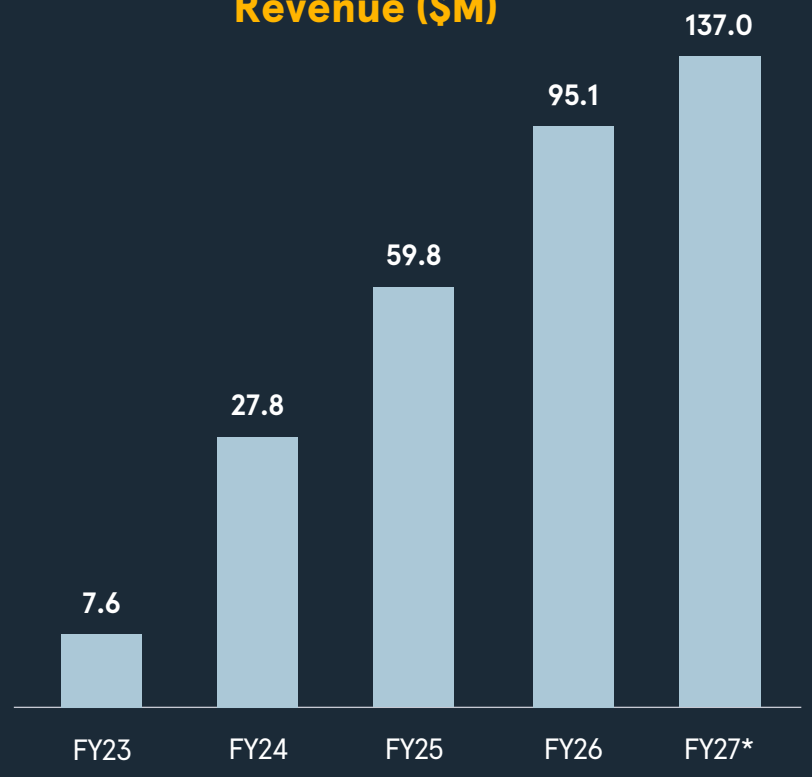
Key Drivers of Margin Expansion

- ✓ Increased reimbursement realization due to improved market access via payor contracts and resulting shift in patient mix towards in-network patients
- ✓ Investments in revenue cycle management to drive increased cash collections from payors
- ✓ As depreciation of WCDs is distributed across fittings and WCD fleet is re-used, cost of goods per patient decreases as the number of fittings increases
- ✓ Supply chain efficiencies from higher volume purchases of components and manufacturing process improvements

Strong Commercial Progress

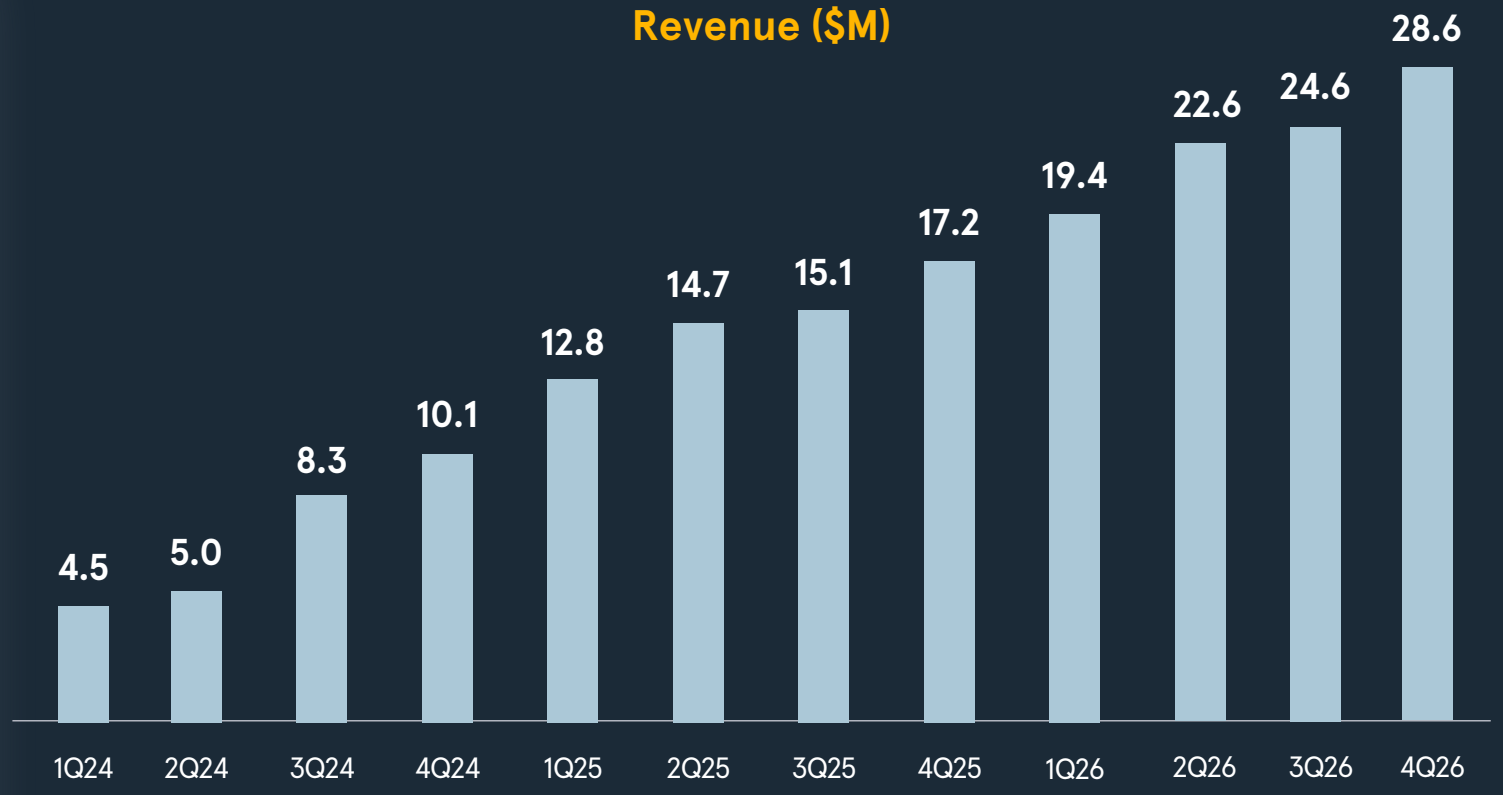
Delivering top-tier medtech growth rates

Revenue ($M)



Y/Y%	265%	115%	59%	44%

Revenue ($M)



Y/Y%	186%	193%	82%	71%	52%	53%	63%	66%

Fiscal Year (FY) ends April 30.

* Represents FY27 revenue guidance.

Foundation Set for Durable Long-Term Growth

kestra®

Large, Expanding Market

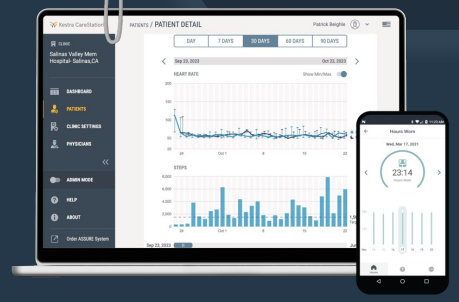
✓ Existing $1B+ WCD market growth has accelerated to low-mid teens

Compelling Clinical Data

✓ ACE-PAS has the potential to influence guidelines and unlock $9B unpenetrated TAM

Commercial Scale

✓ Rapid sales coverage expansion: 48→130 territories in 24 months



Attractive Unit Economics

✓ 70%+ gross margins at scale with significant operating leverage

Robust R&D Innovation Engine

✓ BioBeat integration validates platform extensibility, enabling first-to-market combined therapy & extended VSM solution

NASDAQ **KMTS**

Thank You

kestra®