



Corporate & Investor Presentation

Updated: January 28, 2021

Presentation of financial information & forward-looking statements

Historical financial and operating data in this presentation reflect the consolidated results of ResMed Inc., its subsidiaries, and its legal entities, for the periods indicated.

This presentation includes financial information prepared in accordance with accounting principles generally accepted in the United States, or GAAP, as well as other financial measures referred to as non-GAAP. The non-GAAP financial measures in this presentation, which include non-GAAP Income from Operations, non-GAAP Net Income, and non-GAAP Diluted Earnings per Share, should be considered in addition to, but not as substitutes for, the information prepared in accordance with GAAP. For reconciliations of the non-GAAP financial measures to the most comparable GAAP measures, please refer to the earnings release associated with the relevant reporting period, which can be found on the investor relations section of our corporate website (investor.resmed.com).

In addition to historical information, this presentation contains “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995. These forward-looking statements are based on ResMed’s current expectations of future revenue or earnings, new product development, new product launches, new markets for its products, integration of acquisitions, leveraging of strategic investments, litigation, tax outlook, and the length and severity of the recent coronavirus outbreak, including its impacts across our business and operations. Forward-looking statements can generally be identified by terminology such as “may”, “will”, “should”, “expects”, “intends”, “plans”, “anticipates”, “believes”, “estimates”, “predicts”, “potential”, or “continue”, or variations of these terms, or the negative of these terms or other comparable terminology.

ResMed’s expectations, beliefs, and forecasts are expressed in good faith and are believed to have a reasonable basis, but actual results could differ materially from those stated or implied by these forward-looking statements. ResMed assumes no obligation to update the forward-looking information in this presentation, whether as a result of new information, future events, or otherwise. For further discussion of the various factors that could impact actual events or results, please review the “Risk Factors” identified in ResMed’s quarterly and annual reports filed with the SEC. All forward-looking statements included in this presentation should be considered in the context of these risks. Investors and prospective investors are cautioned not to unduly rely on our forward-looking statements.

Company Overview & Strategy



Who we are / what we do

- Listed on NYSE & ASX, ~\$30B market cap
- World-leading digital health company with over 13.5 million 100% cloud-connectable devices
 - 15+ million patients in AirView monitoring ecosystem
 - 100+ million patient accounts in out-of-hospital care network
- Innovative designer and manufacturer of award-winning devices and cloud-based software solutions
 - Diagnose, treat, and manage sleep apnea, chronic obstructive pulmonary disease, and other respiratory conditions
- Products and solutions designed to improve patient quality of life, reduce impact of chronic disease, and lower healthcare costs
- Cloud-based software solutions and devices designed to provide connected care, improving patient outcomes and efficiencies for healthcare providers
 - Tools that allow fewer people to manage more patients
 - Empower patients to track own health outcomes



Why invest? – driving long-term shareholder value



Market Dynamics

- Underpenetrated markets in sleep and COPD
- Healthcare costs continue to increase
- Focus on improving patient outcomes
- Value-based technology solutions



Growth & Innovation

- Global leader in digital health for sleep and respiratory care
- Long-term growth opportunities
- 6,500+ patents and designs
- ~7-8% of revenue invested in R&D



Financial Results

- Historical revenue and profit growth
- Recurring revenue
- Operating excellence program
- Strong track record of disciplined capital deployment

Total Shareholder Return (NYSE shares as of 12/31/2020):

1-yr 38% ▪ **3-yr 160%** ▪ **5-yr 327%**

ResMed 2025: a patient-centric, digitally-enabled strategy



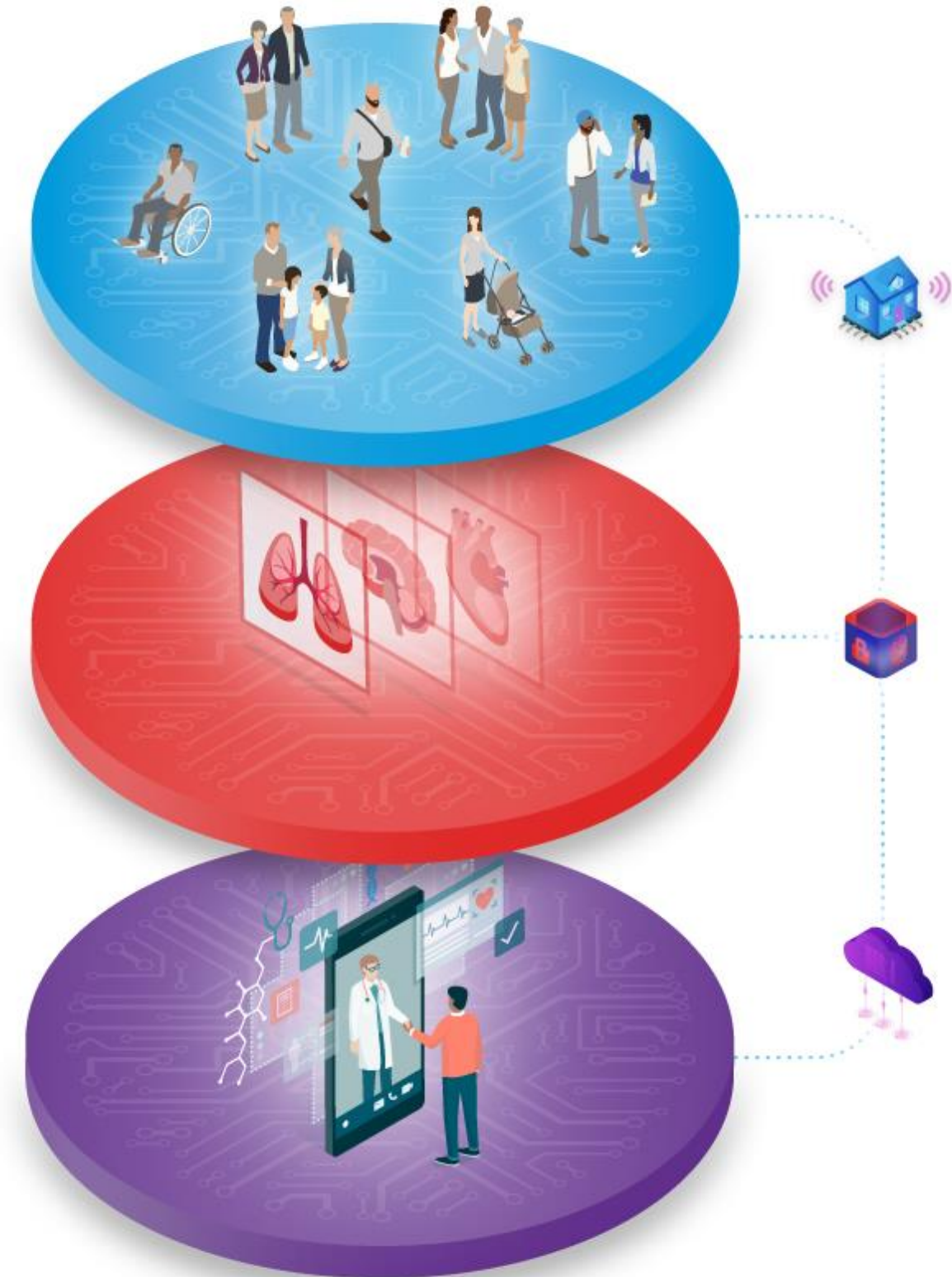
250 million lives improved in out-of-hospital healthcare in 2025!

Purpose • Empower people to live **happier, healthier, and higher quality lives** in the comfort of their home

Growth Focus • Global health epidemics in **sleep apnea, COPD**, other major chronic conditions, and **SaaS** solutions that improve care in out-of-hospital settings

Growth Advantage • Transform care through **innovative solutions** and **tech-driven integrated care** to drive superior outcomes, experiences, and efficiency

Growth Foundations • High-performing, diverse, and entrepreneurial people
• Industry-leading innovation and business excellence
• Digital health technology and scientific leadership



Our Business: Sleep



Sleep business strategy

Deliver a world-class patient experience through innovative solutions that lower overall costs for treating sleep apnea patients and improve clinical outcomes



OPTIMIZE EFFICIENCIES FOR PROVIDERS

- Home medical equipment / home care provider-facing solutions that drive workflow efficiencies
- Long-term adherence solutions that improve patient management and meet the needs of referring physicians



DELIVER BEST-IN-CLASS PATIENT EXPERIENCE

- Patient-facing solutions, from identification to treatment, that streamline the experience and improve long-term adherence



EMBRACE AND ENABLE INTEGRATED CARE MODELS

- Payer-facing solutions that enable population management, backed by our data insights, outcomes research, and market access

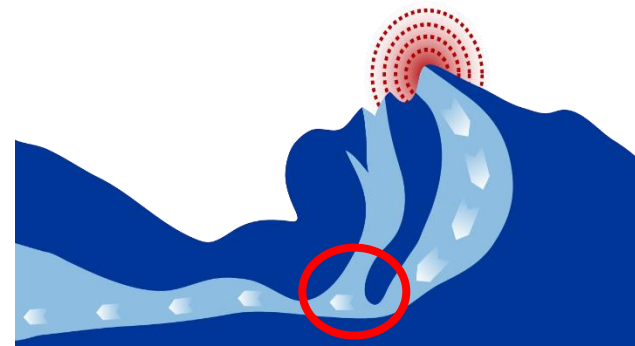
Collaboration – Operating Excellence – Lean Innovation – High Performance Culture – Talent

What is sleep-disordered breathing?

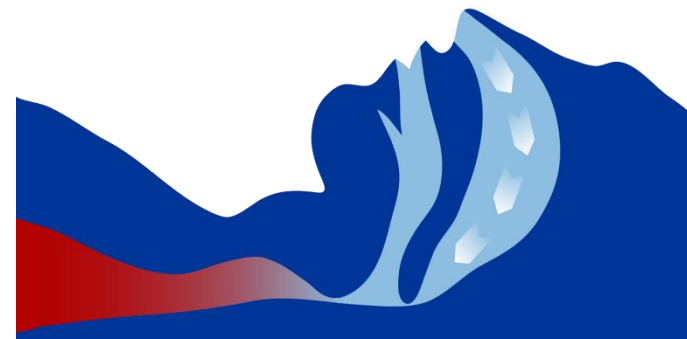
- Abnormal respiration during sleep – the cessation of breathing or “sleep suffocation”
- Most prevalent is **obstructive sleep apnea** – collapse of the upper airway despite ongoing effort
- Other types include central sleep apnea – lack of breathing *and* lack of effort – and mixed apnea



Normal airway



Partially obstructed airway



Obstructed airway



Arousal

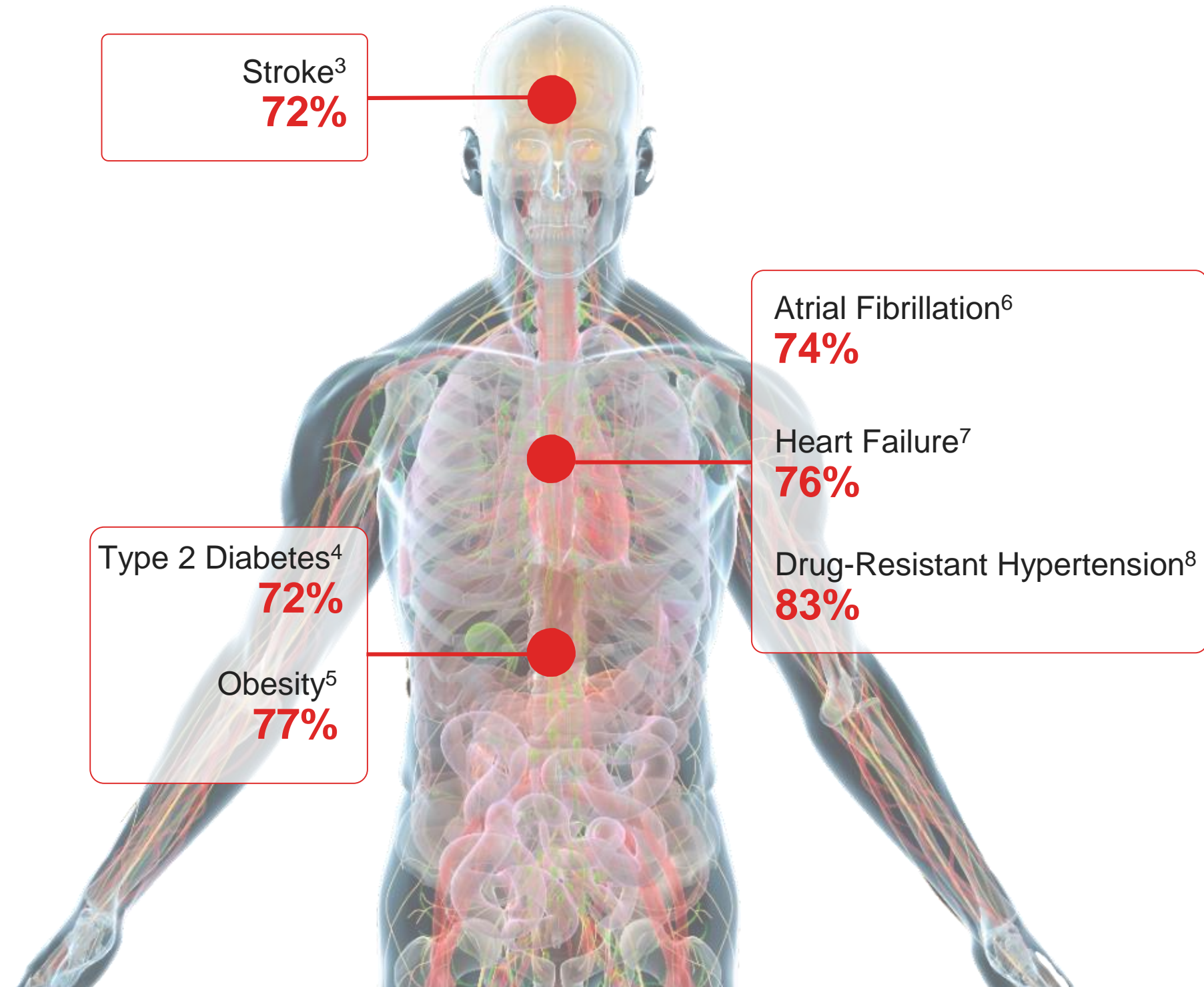
Sleep apnea is more than 80% undiagnosed...and is highly prevalent in other chronic conditions

For every 100 U.S. adults...

4 KNOW THEY HAVE SLEEP APNEA^{1,2}



22 DON'T KNOW THEY HAVE IT^{1,2}

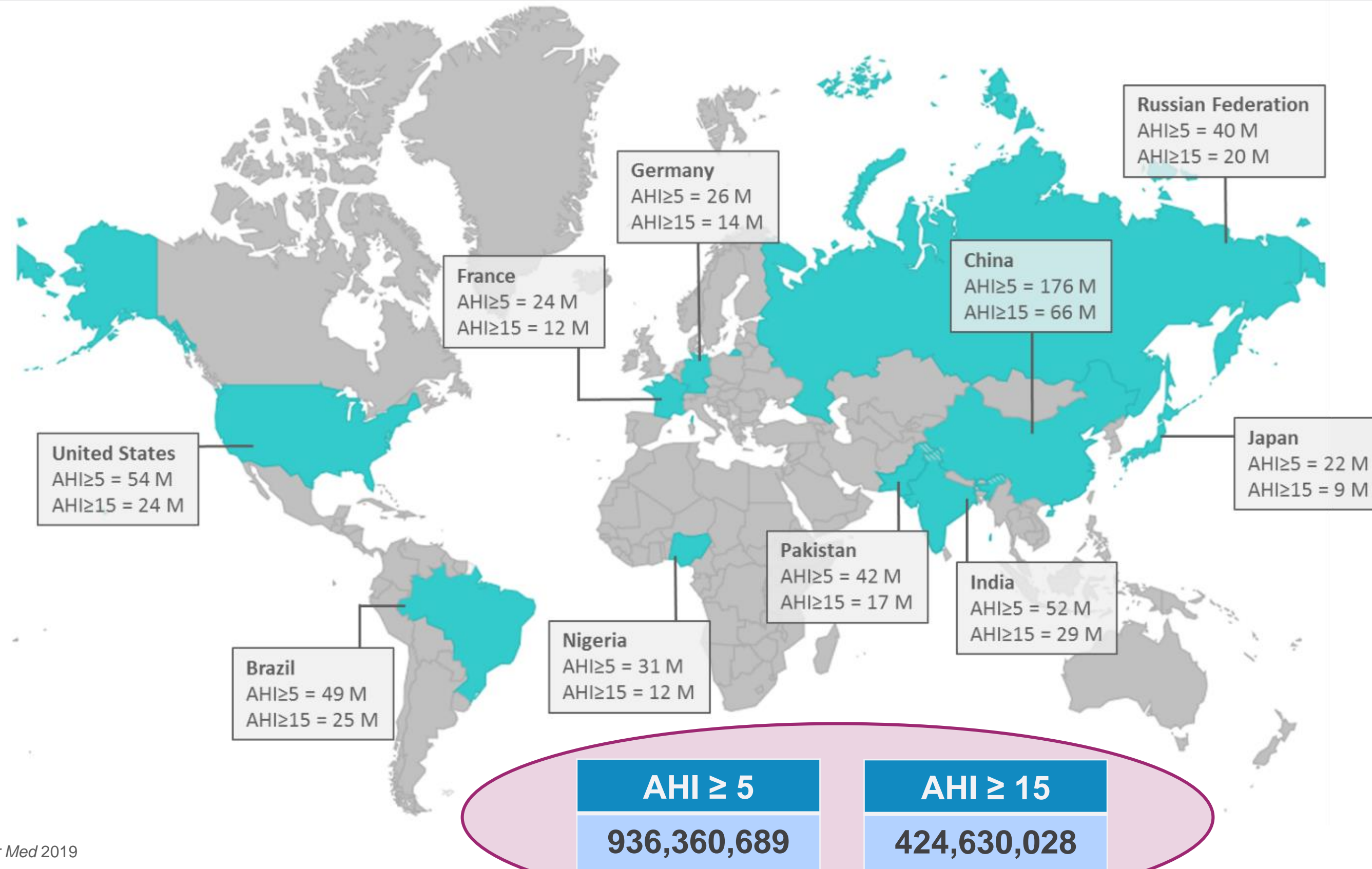


1 Peppard PE et al. *Am J Epidemiol* 2013
 2 Young T et al. *Sleep* 1997

3 Johnson KG and Johnson DC. *J Clin Sleep Med* 2010
 4 Einhorn D et al. *Endocr Pract* 2007
 5 O'Keefe T and Patterson EJ. *Obes Surg* 2004

6 Bitter T et al. *Dtsch Arztebl Int.* 2009
 7 Oldenburg O et al. *Eur J Heart Fail* 2007
 8 Logan AG et al. *J Hypertens* 2001

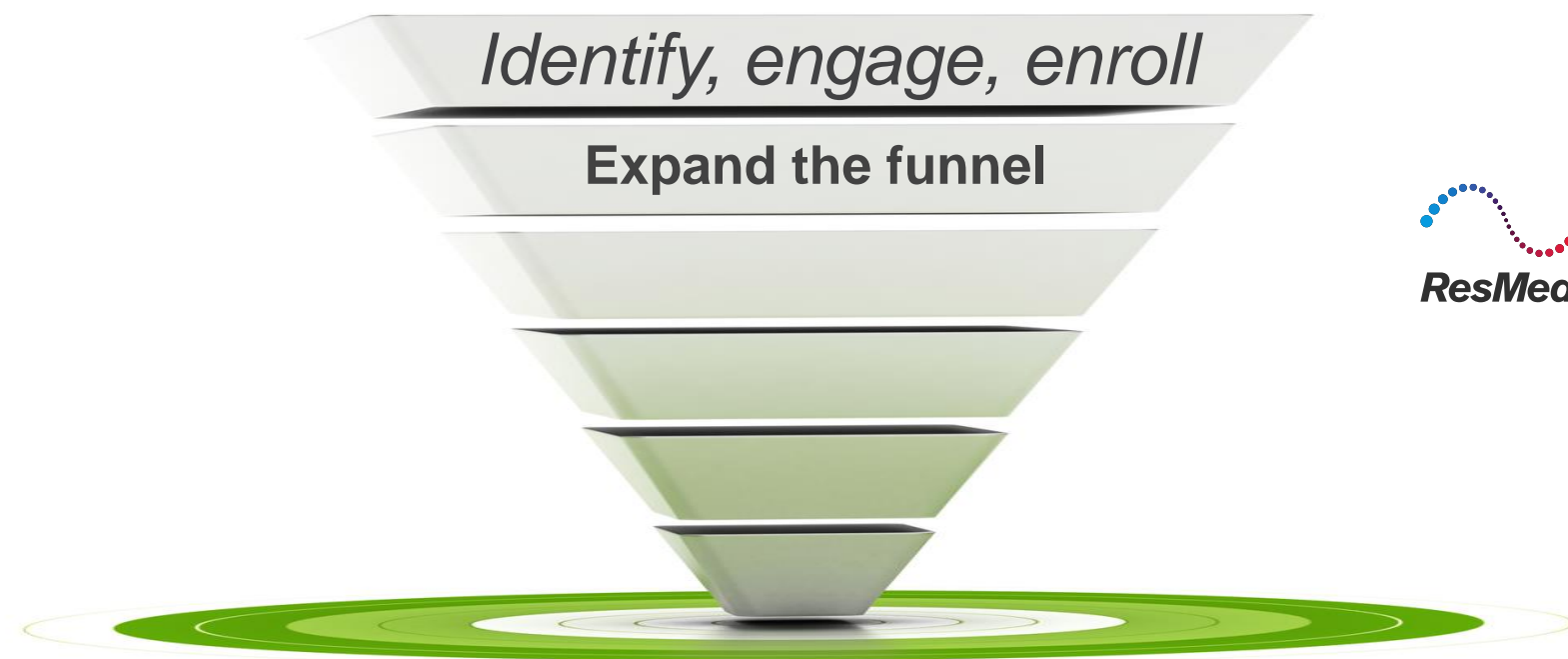
The global prevalence of sleep apnea is enormous and growing...



Our partnerships will address sleep health as a public health crisis

Sleep research joint venture with Verily

- Develop software solutions to help identify, diagnose, treat, and manage those with OSA
- To study the health and financial impacts of untreated sleep apnea
 - Prove the ROI for treating OSA



With Verily, we can unlock richer, more holistic insights about sleep apnea and the value of treating it

Long-term CPAP treatment decreases mortality rates and reduces the risk of comorbidities

Recent prospective cohort study from the UK published in ERJ Open Research reconfirms treating OSA with CPAP improves health outcomes

30

year study duration

4,502

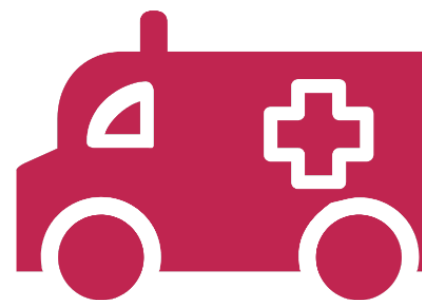
diagnosed OSA patients

15

year average follow-up time

Those who did not use CPAP were **5.63x** more likely to die than a long-term (>5 years) CPAP user

The study also reconfirms with new data that untreated OSA leads to a greater risk in developing:



Myocardial Infarction (heart attack)



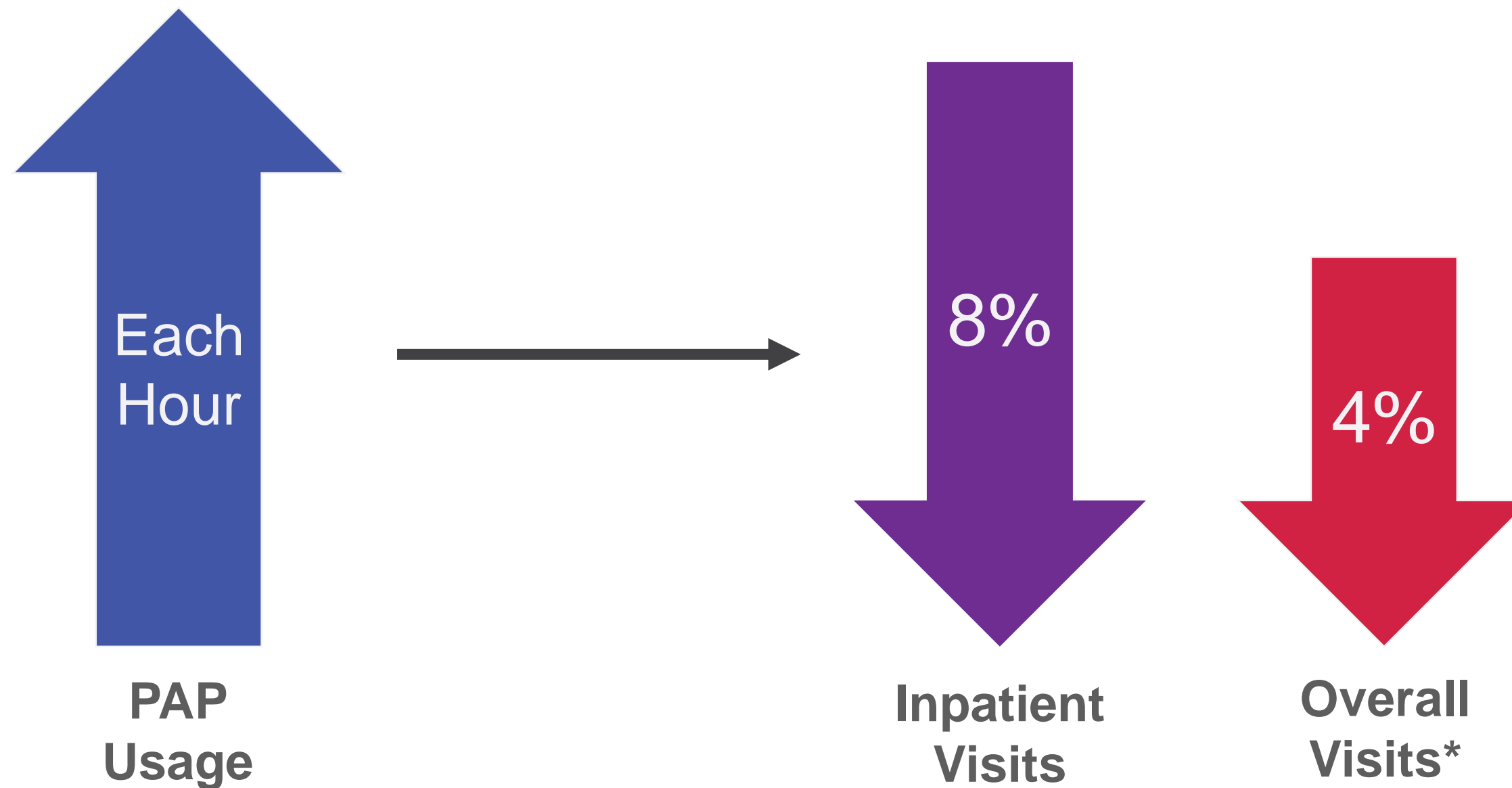
Type 2 Diabetes Mellitus



Ischemic Heart Disease

Demonstrated positive dose-response relationship between increased CPAP usage and lower healthcare costs

For every **one hour per night** increase in PAP usage there was an **8% decrease** in inpatient visits and a **4% decrease** in overall acute care visits.¹



1. Kirsch DB et al. *J Clin Sleep Med* 2019

* Overall visits* includes inpatient, ED, and observation visits.

Transforming the treatment & management of sleep apnea

Quiet



AirSense™ 10



AirSense™ 10

AUTOSET FOR HER



AirCurve™ 10

Compact



AirMini™

Comfortable

Minimalist

Small. Light. Simple.



AirFit™ F30
Full face mask



AirFit™ N30



AirFit™ P10
Nasal Pillows System

Ultra Soft

Patented memory foam offers unique comfort.



AirTouch™ F20
Full face mask



AirTouch™ N20
Nasal mask

Connected



Freedom

Sleep in any position.



AirFit™ F30i



AirFit™ N30i
Nasal cradle mask



AirFit™ P30i
Nasal pillows mask

Universal Fit

Classic designs that fit nearly every face.



AirFit™ F20
Full face mask



AirFit™ N20
Nasal mask



AirView™
Cloud-based patient management system



myAir™
Patient engagement program

Our Business: Respiratory Care



Respiratory care strategy

Changing the lives of COPD patients by bringing new solutions for unmet patient needs



WIN IN THE CORE

- Reach more COPD patients through connected non-invasive ventilation
- Drive profitable growth in life-support ventilation



INNOVATE AND EXPAND INTO ADJACENCIES

- Treat patients earlier in COPD disease progression through a connected ecosystem
- Continue to leverage investments in life support and NIV
- Better prove connected health value propositions



TRANSFORM COPD HEALTHCARE DELIVERY

- Build intelligent therapy solutions enabled by sensor technologies, data analytics, AI and ML with improved patient/care giver engagement
- Create value propositions in longitudinal care, predict exacerbations, and prevent hospitalization
- Support new business models & tailored products in emerging growth markets

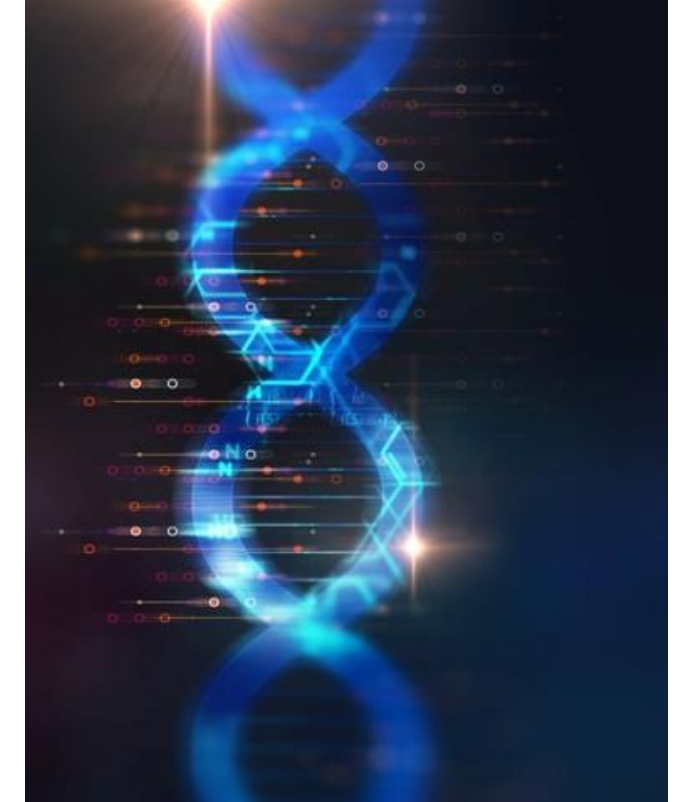
Collaboration – Operating Excellence – Lean Innovation – High Performance Culture – Talent

What is chronic obstructive pulmonary disease (COPD)?


COPD is a serious lung disease that over time, makes it hard to breathe

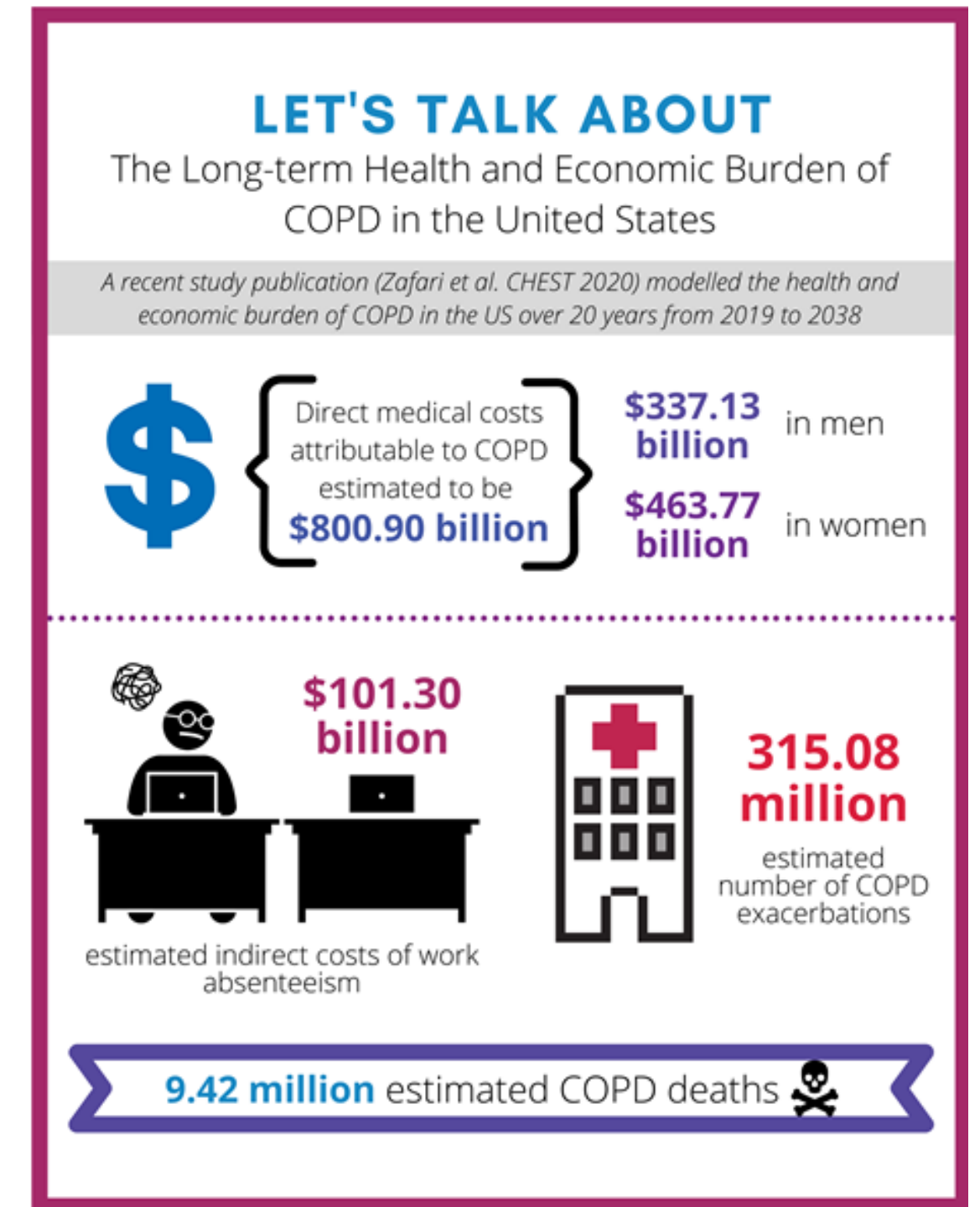
Causes include:

- Smoking, vaping, & secondhand smoke
- Pollution
- Occupational exposure to noxious gases
- A history of childhood infections (could be a catalyst)
- Genetic inheritance, leading to its onset



COPD is a large and growing market

-  More than 380 million people worldwide are estimated to have COPD¹
 - Largely undiagnosed COPD sufferers in high-growth markets such as China, India, Brazil and E. Europe may be well over 100 million¹
-  Cost to healthcare systems from COPD is enormous:
 - Europe: ~€48 billion per year²
 - United States: ~\$50 billion per year³
-  More than 3 million people worldwide die each year due to COPD⁴



1. Adeloje D et al. *J Glob Health* 2015

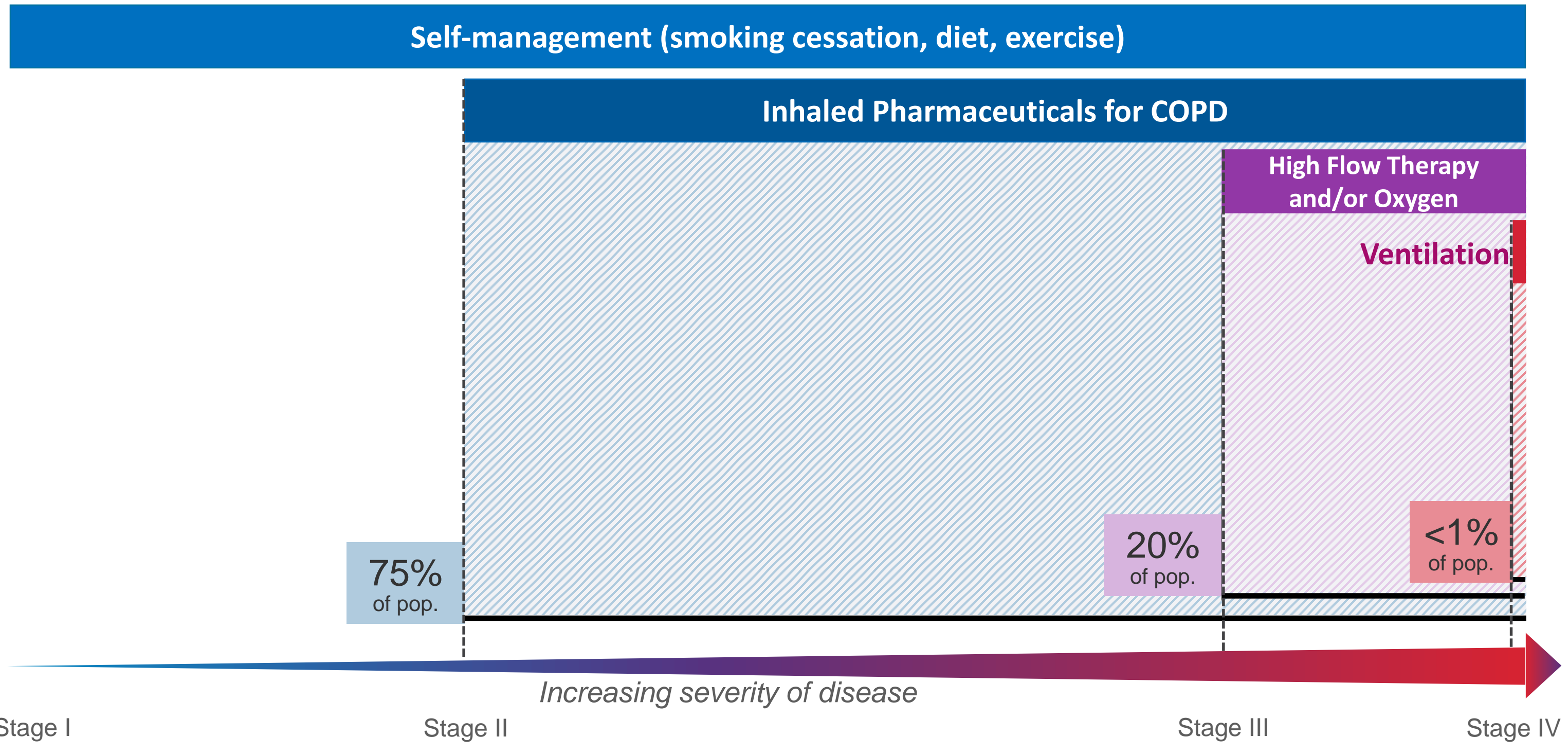
2. ERS White Book. <https://www.erswhitebook.org/chapters/the-economic-burden-of-lung-disease/>

3. NHLBI. *Morbidity & Mortality: 2009 Chart Book on Cardiovascular, Lung, and Blood Diseases*

4. WHO 2017 [https://www.who.int/news-room/fact-sheets/detail/chronic-obstructive-pulmonary-disease-\(copd\)](https://www.who.int/news-room/fact-sheets/detail/chronic-obstructive-pulmonary-disease-(copd))

There is a need for end-to-end solutions for COPD patients

Global population of COPD patients: ~380 million¹



COPD progression

Stage I

Stage II

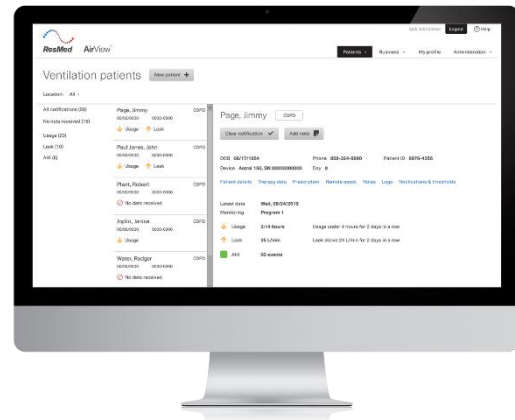
Stage III

Stage IV

Increasing severity of disease

We have the full spectrum of solutions for respiratory care

Patient Management



AirView™ for Respiratory

Digital Therapeutics



Propeller

High-Flow Therapy



AcuCare™ High Flow Nasal Cannula



Lumis™ HFT

Bilevel Ventilation



AirCurve 10™

Non-invasive Ventilation (NIV)



Lumis™



Stellar™

Life Support Ventilation



Astral™



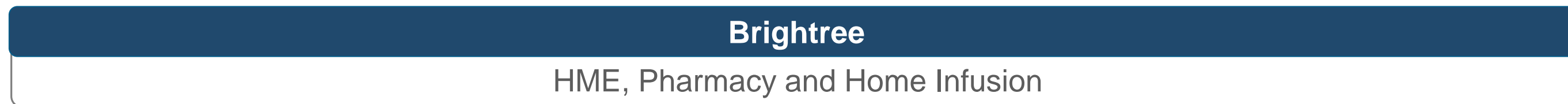
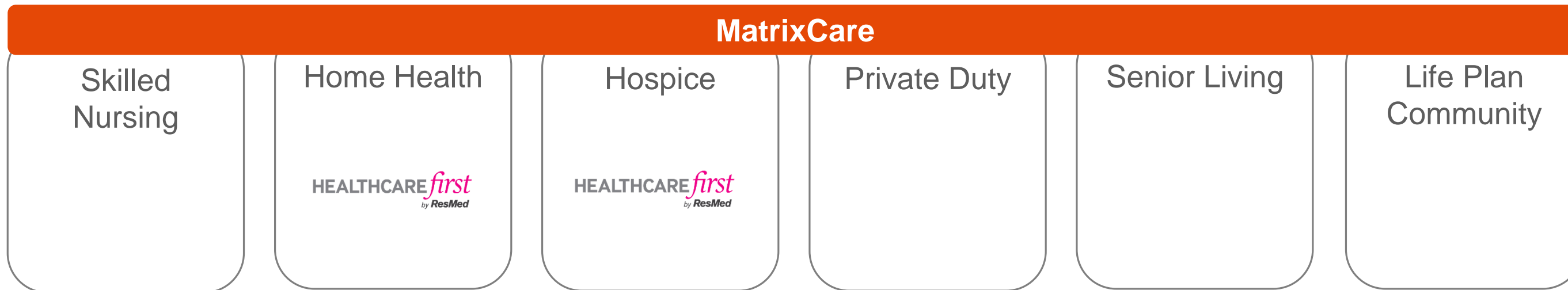
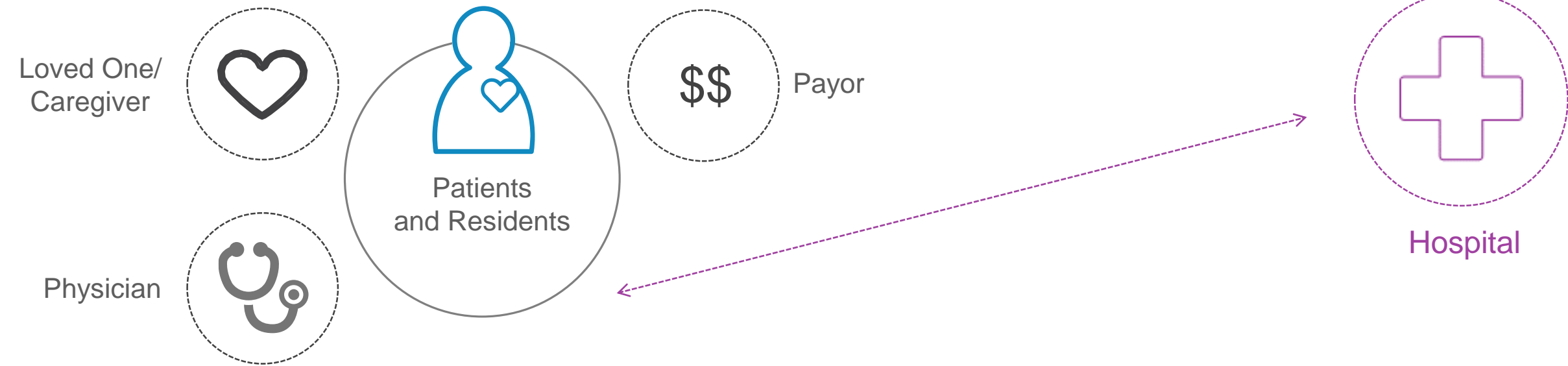
Astral™ with RCM

Patient Acuity

Our Business: Software as a Service (SaaS)



Leading provider of cloud-based software for out-of-hospital care providers across multiple settings



SaaS portfolio well positioned to improve outcomes and lower costs across out-of-hospital healthcare

Better patient experience. Improved clinical outcomes. Lower overall cost of care.

- 
- **Intelligent workflow**
 - **Privacy**
 - **Security**
 - **Advanced analytics**
 - **Interoperability**

- Single view of the patient across care continuum
- Comprehensive interoperability to improve care transitions, coordination, and collaboration
- Seamless access to information for patients and those who care for them
- Data insights and population management to enable better care / better results
- Stronger connections between providers, health systems, and payers

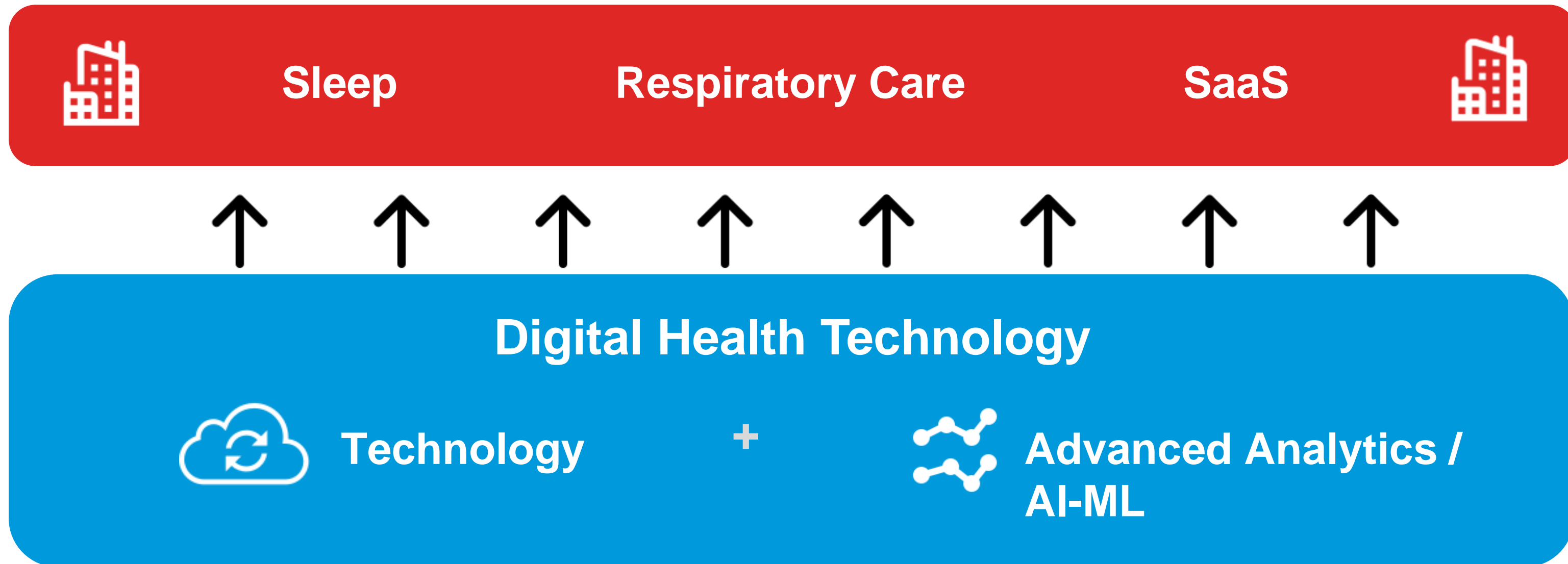
Connected systems deliver the best outcomes for value-based care

Digital Health Technology

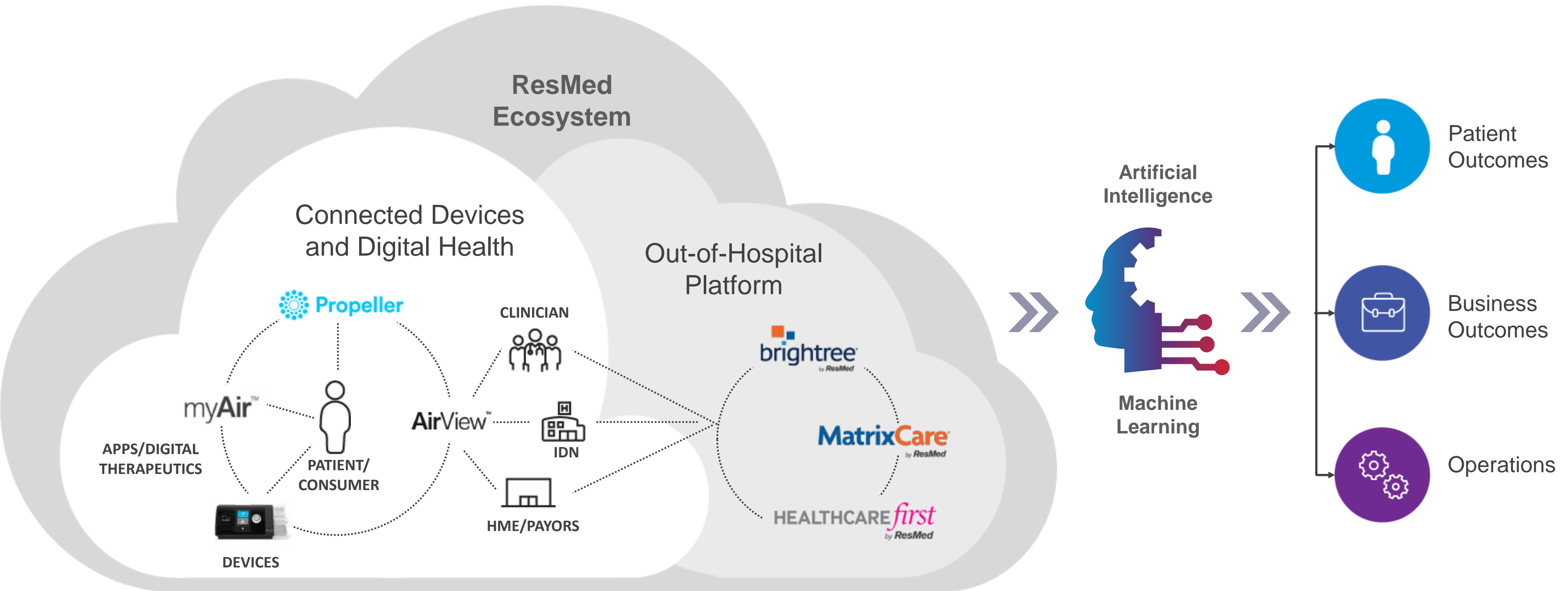


Digital health technology is our foundation

Purpose: Enable all ResMed businesses to achieve their business objectives by leveraging technology, data, and advanced analytics.

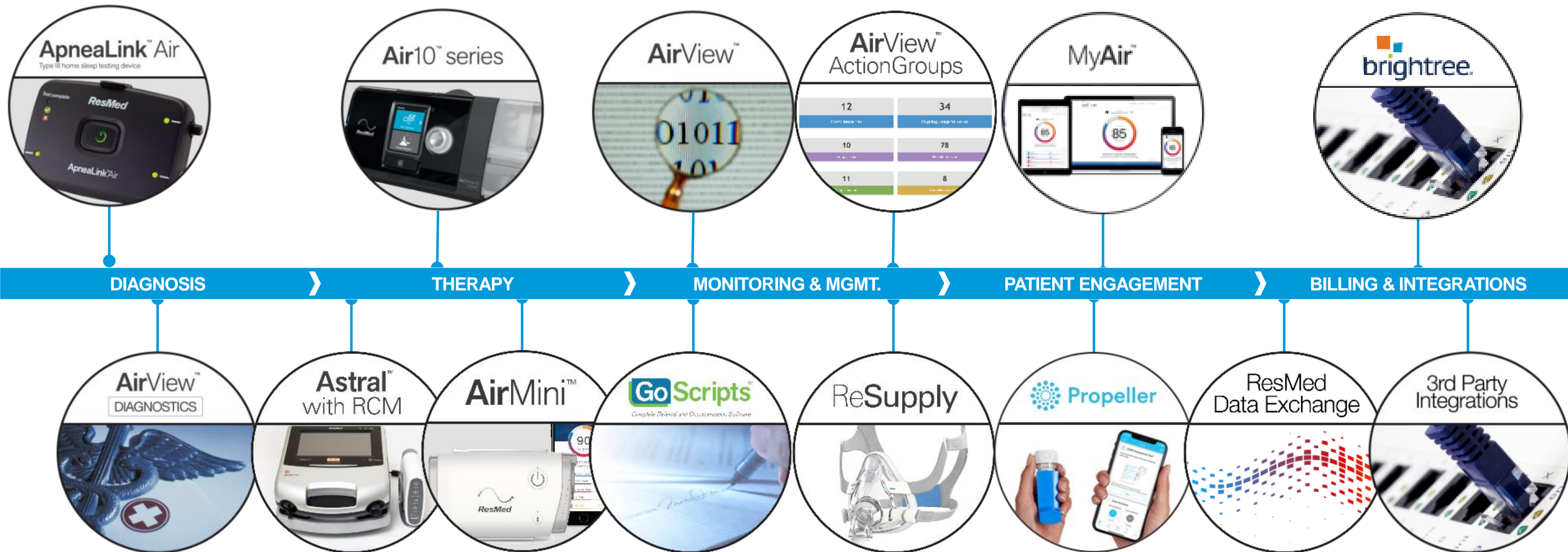


Our digital health solutions improve outcomes and lower costs



We transform 8+ billion nights of medical data into useful outcomes

End-to-end digital health solutions in sleep, respiratory care, and out-of-hospital healthcare



Global leader in digital health

AirView™ has
15+ million patients

1.5+ million diagnostic tests
processed **in the cloud**

~100 API calls per
second from integrators

>13.5 million
100% cloud connectable
devices worldwide

~100 million accounts in
out-of-hospital care network

3+ million patients have
signed up for **myAir™**

Recent Quarterly Results

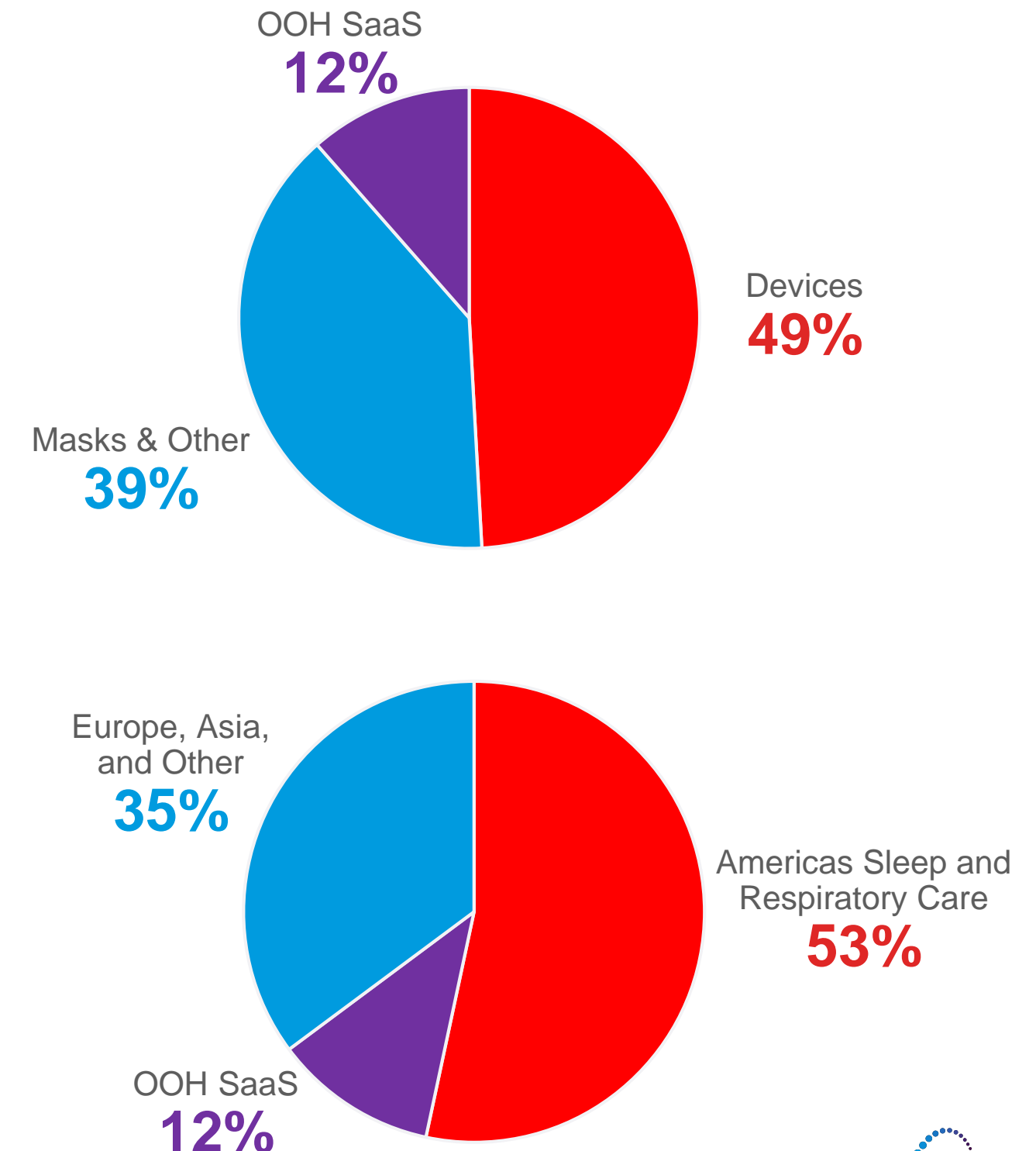


Q2 FY21 financial results

<i>\$ in millions, except per share amounts</i>	2Q21
Revenue	\$800.0 +9% (+7% CC)
Non-GAAP gross margin*	59.9% +20 bps
Non-GAAP operating income*	\$254.5 +16%
Non-GAAP EPS*	\$1.41 +17%

* Refer to Non-GAAP reconciliations in the Appendix.

*Diversified revenue
by business & by geography*

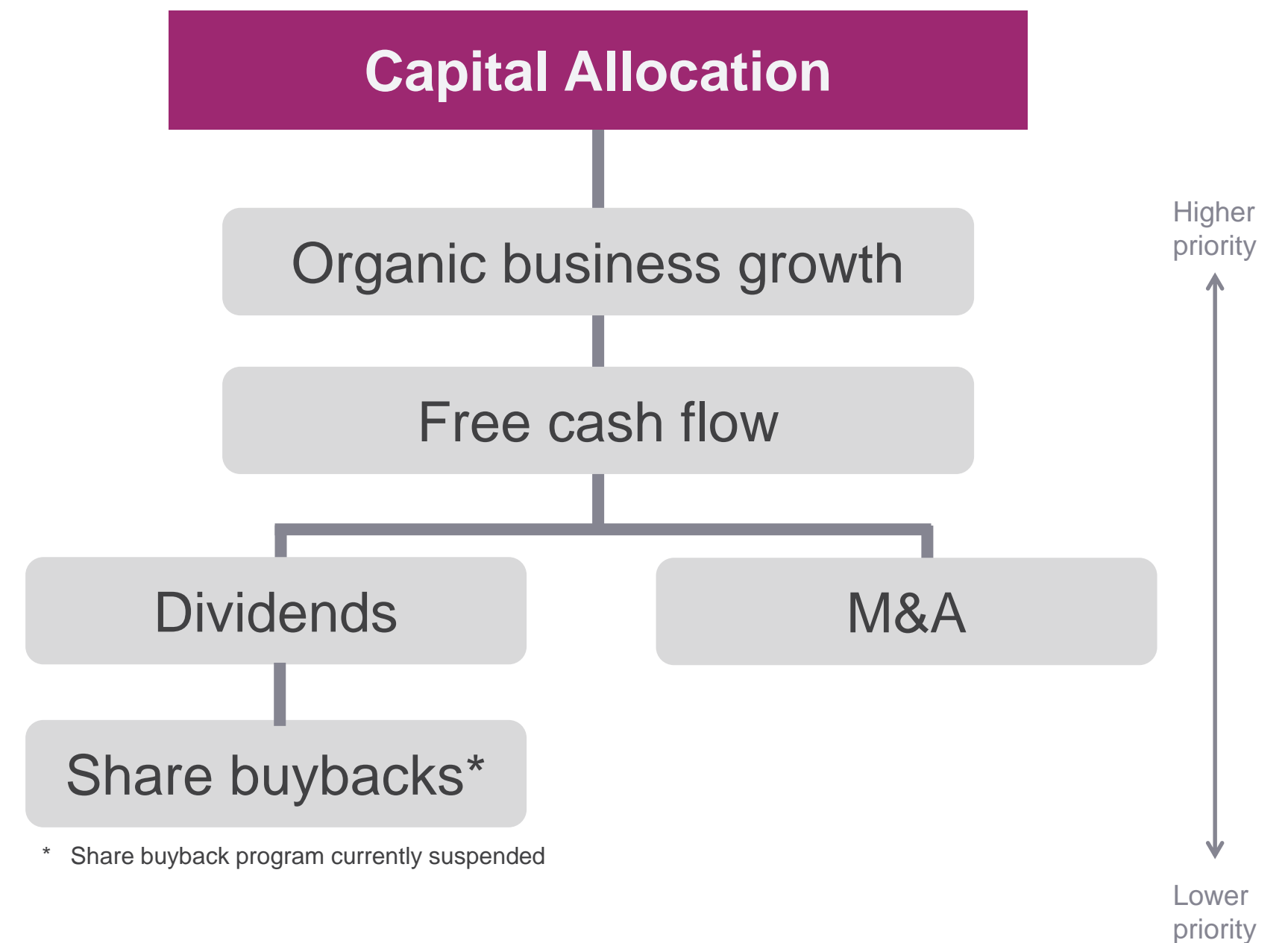


Capital allocation

<i>\$ in millions</i>	2Q21
Cash and cash equivalents	\$256
Debt	\$826
Net debt	\$570
Free cash flow	\$135
Unused borrowing capacity	\$1,435

NOTE: Values may not calculate due to rounding

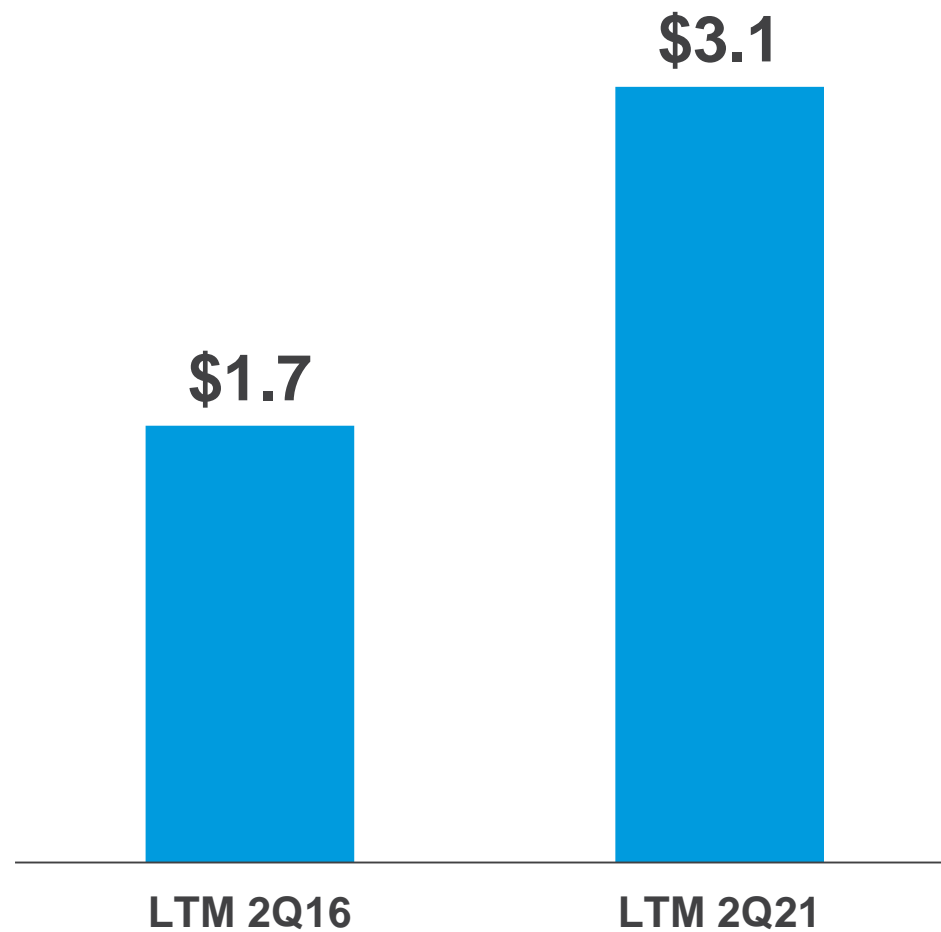
During 2Q21
\$55M invested in R&D (<i>7% of revenue</i>)
Paid \$57M in dividends to shareholders



Track record of strong financial returns for shareholders

Revenue (\$B)

12% CAGR



Non-GAAP Operating Income (\$M)

17% CAGR



Non-GAAP EPS

15% CAGR



Total shareholder return, TSR (NYSE shares as of 12/31/2020): 1-yr 38% | 3-yr 160% | 5-yr 327%

NOTE: See reconciliation to GAAP in Appendix

Our **vision** is to empower people to take control of their health so they can sleep better, breathe better, and live better lives outside the hospital




Connected therapy devices

Connected medications

Masks


Software solutions

Services (Resmed 360)




Improve the patient experience

+




Increase long-term adherence

+




Lower the cost of delivery

+




Improve health outcomes

+



Measurably improve economic outcomes

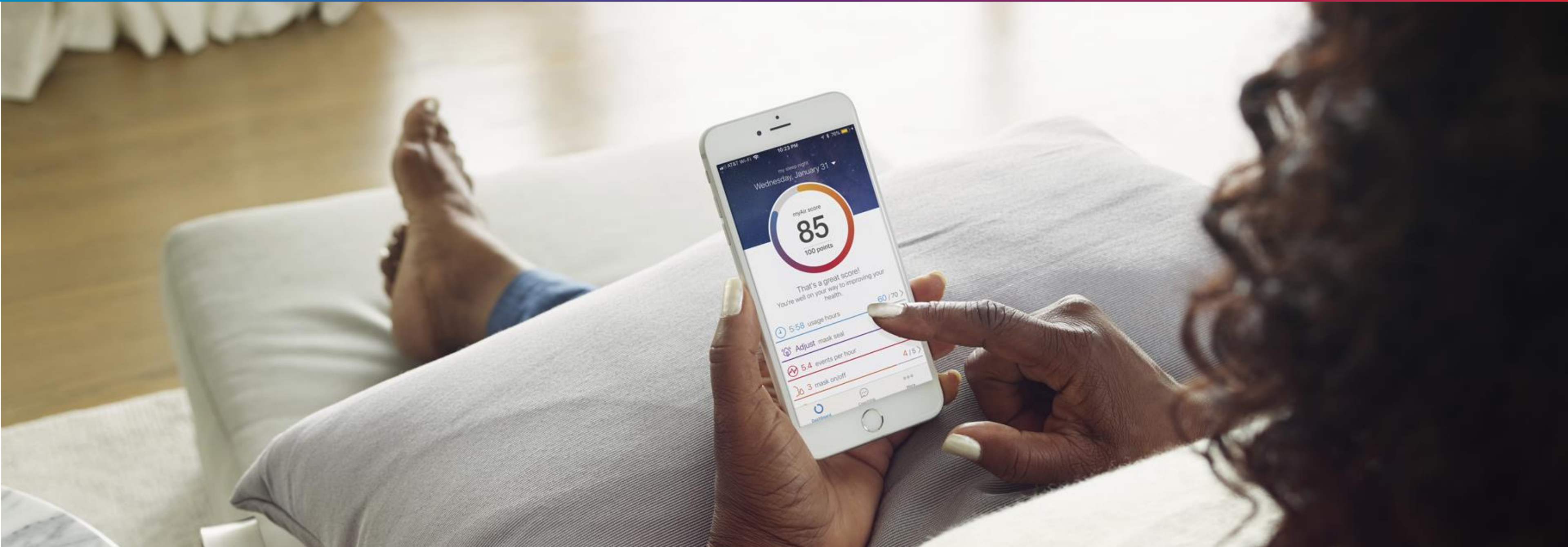
+



Improve QOL outcomes

Our **business aim** is to make our device therapies and connected systems indispensable by combining them with intelligent data products

In the last 12 months, we changed over 118 million lives with our digital health products and cloud-based software solutions



*Our aspiration is to improve
250 million lives in 2025*

Contact Investor Relations

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Email: investorrelations@resmed.com

Website: investor.resmed.com

APPENDIX



Reconciliation of non-GAAP financial measures

The measures “non-GAAP gross profit” and “non-GAAP gross margin” excludes amortization expense from acquired intangibles related to cost of sales and are reconciled below:

(Unaudited; \$ in thousands, except for per share amounts)

	Three Months Ended		Six Months Ended	
	December 31, 2020	December 31, 2019	December 31, 2020	December 31, 2019
Revenue	\$ 800,011	\$ 736,157	\$ 1,551,955	\$ 1,417,213
Add back: Deferred revenue fair value adjustment ^(A)	-	657	-	2,102
Non-GAAP Revenue	\$ 800,011	\$ 736,814	\$ 1,551,955	\$ 1,419,315
GAAP Cost of sales	\$ 337,528	\$ 309,027	\$ 650,811	\$ 598,464
Less: Amortization of acquired intangibles ^(A)	(11,164)	(12,052)	(23,143)	(25,488)
Less: Restructuring - cost of sales ^(A)	(5,232)	-	(5,232)	-
Non-GAAP cost of sales	\$ 321,132	\$ 296,975	\$ 622,436	\$ 572,976
GAAP gross profit	\$ 462,483	\$ 427,130	\$ 901,144	\$ 818,749
GAAP gross margin	57.8 %	58.0 %	58.1 %	57.8 %
Non-GAAP gross profit	\$ 478,879	\$ 439,839	\$ 929,519	\$ 846,339
Non-GAAP gross margin	59.9 %	59.7 %	59.9 %	59.6 %

(A) ResMed adjusts for the impact of the amortization of acquired intangibles, restructuring expenses, deferred revenue fair value adjustment, litigation settlement expenses, and the (gain) loss on equity investments from their evaluation of ongoing operations, and believes that investors benefit from adjusting these items to facilitate a more meaningful evaluation of current operating performance.

ResMed believes that non-GAAP diluted earnings per share is an additional measure of performance that investors can use to compare operating results between reporting periods. ResMed uses non-GAAP information internally in planning, forecasting, and evaluating the results of operations in the current period and in comparing it to past periods. ResMed believes this information provides investors better insight when evaluating ResMed’s performance from core operations and provides consistent financial reporting. The use of non-GAAP measures is intended to supplement, and not to replace, the presentation of net income and other GAAP measures. Like all non-GAAP measures, non-GAAP earnings are subject to inherent limitations because they do not include all the expenses that must be included under GAAP.

Reconciliation of non-GAAP financial measures, cont'd

The measure “non-GAAP income from operations” is reconciled with GAAP income from operations below:

(Unaudited; \$ in thousands, except for per share amounts)

	Three Months Ended		Six Months Ended	
	December 31, 2020	December 31, 2019	December 31, 2020	December 31, 2019
GAAP income from operations	\$ 221,716	\$ 197,809	\$ 438,612	\$ 368,912
Amortization of acquired intangibles - cost of sales ^(A)	11,164	12,052	23,143	25,488
Amortization of acquired intangibles - operating expenses ^(A)	7,689	8,556	15,932	13,599
Restructuring - cost of sales ^(A)	5,232	-	5,232	-
Restructuring - operating expenses ^(A)	8,673	-	8,673	-
Deferred revenue fair value adjustment ^(A)	-	657	-	2,102
Litigation settlement expenses ^(A)	-	(600)	-	(600)
Non-GAAP income from operations	<u>\$ 254,474</u>	<u>\$ 218,474</u>	<u>\$ 491,592</u>	<u>\$ 409,501</u>

(A) ResMed adjusts for the impact of the amortization of acquired intangibles, restructuring expenses, deferred revenue fair value adjustment, and the (gain) loss on equity investments from their evaluation of ongoing operations, and believes that investors benefit from adjusting these items to facilitate a more meaningful evaluation of current operating performance.

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Reconciliation of non-GAAP financial measures, cont'd

The measure “non-GAAP net income” and “non-GAAP diluted earnings per share” are reconciled with GAAP net income and GAAP diluted earnings per share in the table below:

(Unaudited; \$ in thousands, except for per share amounts)

	Three Months Ended		Six Months Ended	
	December 31, 2020	December 31, 2019	December 31, 2020	December 31, 2019
GAAP net income	\$ 179,514	\$ 160,554	\$ 357,886	\$ 280,702
Amortization of acquired intangibles - cost of sales, net of tax ^(A)	8,566	9,210	17,742	19,478
Amortization of acquired intangibles - operating expenses, net of tax ^(A)	5,900	6,538	12,214	10,392
Restructuring - cost of sales, net of tax ^(A)	4,663	-	4,663	-
Restructuring - operating expenses, net of tax ^(A)	7,730	-	7,730	-
Deferred revenue fair value adjustment, net of tax ^(A)	-	503	-	1,610
Litigation settlement expenses, net of tax ^(A)	-	(528)	-	(528)
(Gain) loss on equity investments ^(A)	-	-	(8,476)	-
Non-GAAP net income ^(A)	<u>\$ 206,373</u>	<u>\$ 176,277</u>	<u>\$ 391,759</u>	<u>\$ 311,654</u>
Diluted shares outstanding	146,421	145,575	146,350	145,479
GAAP diluted earnings per share	\$ 1.23	\$ 1.10	\$ 2.45	\$ 1.93
Non-GAAP diluted earnings per share ^(A)	\$ 1.41	\$ 1.21	\$ 2.68	\$ 2.14

(A) ResMed adjusts for the impact of the amortization of acquired intangibles, restructuring expenses, deferred revenue fair value adjustment, and the (gain) loss on equity investments from their evaluation of ongoing operations, and believes that investors benefit from adjusting these items to facilitate a more meaningful evaluation of current operating performance.

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Our response to COVID-19: Focused on preservation of life

Our ResMed Team

- Work-from-home policy for all employees when job can be performed remotely
- Specific actions to protect and support employees working in our manufacturing and distribution sites, including:
 - split shifts (A/B/C)
 - increased cleaning, personal hygiene, and safety protocols including temperature checks
 - personal protective equipment for all staff (PPE)
- Increased cadence of communications and engagement with employees

Our Stakeholders

- Fair and ethical allocation of products globally supported by an epidemiological model
- Transitioned manufacturing lines to support production of ventilation products to meet global demand
 - Tripled manufacturing of ventilators
 - Scaled up ventilation mask production more than 10x
- Updated and ongoing clinical information
- Increased digital health technology and remote patient care services for customers

Business Continuity

- Established key workstreams and a central task force to guide and manage ResMed through the crisis
- Ongoing communication with suppliers and partners to ensure continuity and identify gaps
- Active engagement with key government officials and healthcare systems worldwide
- Ongoing business modeling and scenario planning
- Prudent cash and expense management

Striving for excellence in environmental, social, and governance processes

Eliminating unnecessary waste	Minimizing pollution	Product stewardship	Responsible compliance	Increased awareness and continual improvement
<p>We work to eliminate unnecessary waste in all our systems & processes, such as minimizing our use of natural resources.</p>	<p>We are minimizing pollution, in particular our non-biodegradable waste to landfill.</p>	<p>We design and develop products with reduced impact on the environment through their lifecycle.</p>	<p>We fulfill all relevant and applicable compliance obligations in the countries and communities that we operate in.</p>	<p>We drive internal awareness of environmental impacts and monitor our performance through collaboration with others to make continual improvements</p>
				

Recognized by others for leading in this space:

- #106 on Newsweek’s 2021 “America’s Most Responsible Companies”, #15 in Healthcare & Life Sciences
- #105 on WSJ’s 2020 “Management Top 250”, #18 in Healthcare / Life Sciences



Turning big data into actionable information

Pioneering *innovation* and providing *clinical evidence* that support better patient outcomes and improved business efficiencies for customers



AirView™



Labor
Costs²



New
Patient
Setups³

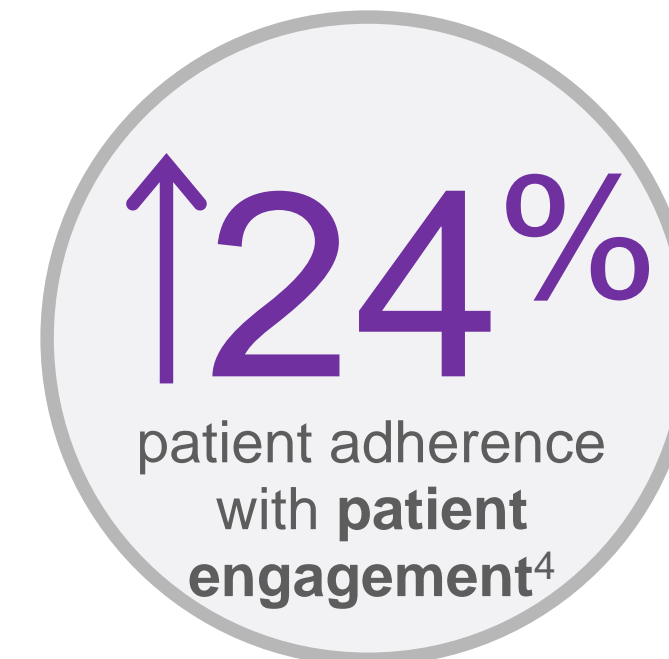


myAir™



World's largest study for adherence

> 128,000 patients

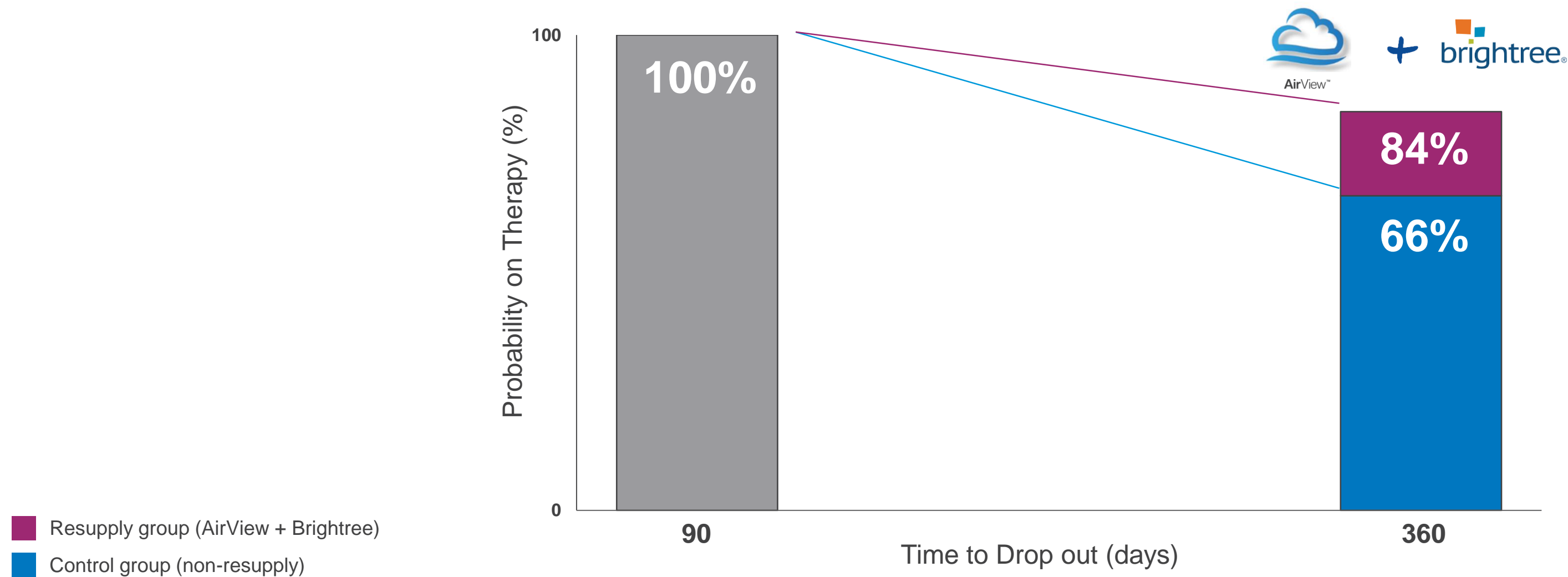


1. Hwang, et al., AJRCCM 2017
2. Munafo, et al. Sleep Breath 2016
3. Data based on monthly patient setups and compliance rates of DME customers from February 2014 – March 2015. Historical results for this provider over the stated time
4. Crocker, et al., Abstract CHEST 2016

Improving adherence to therapy with patient monitoring and resupply

ResAdhere: remote monitoring + mask resupply drive improved adherence

In a study of ~100k patients with AirView cloud-connected devices...

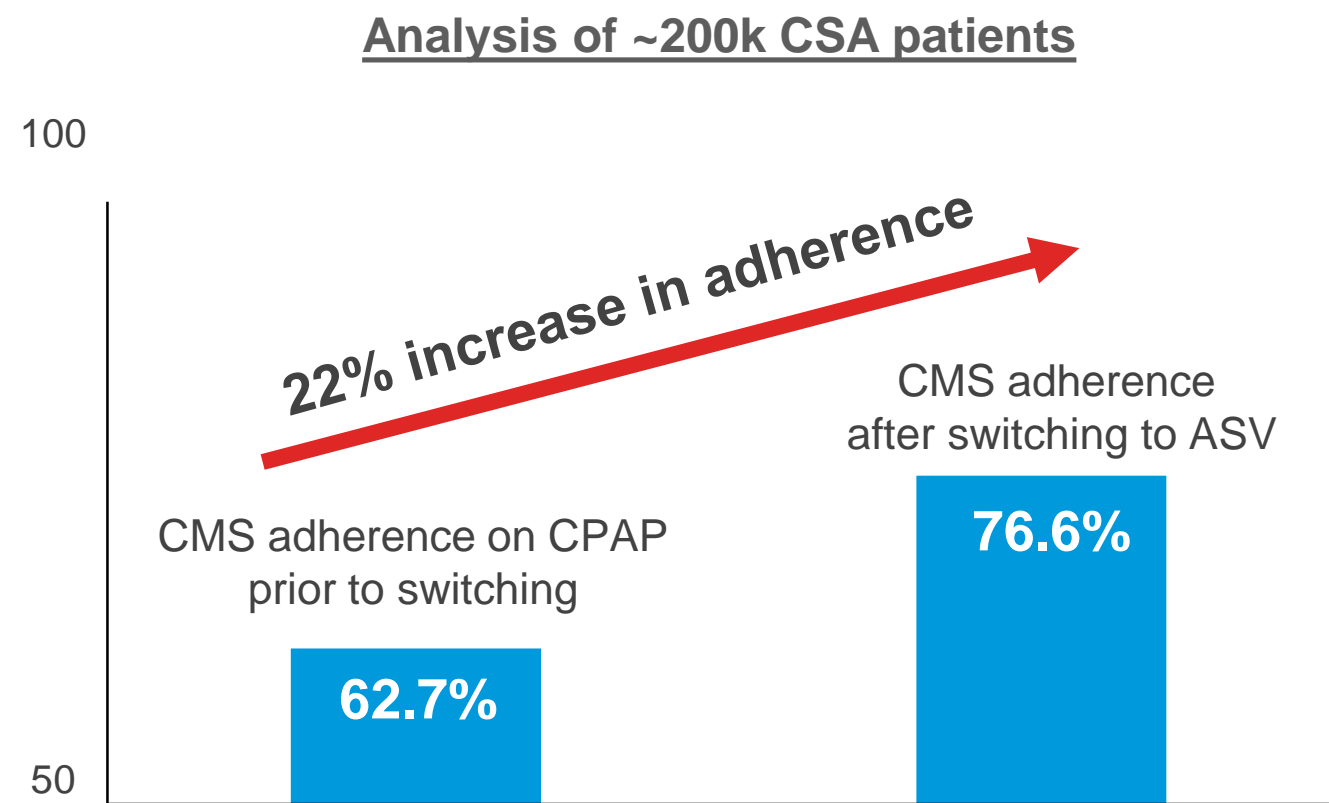


...the likelihood of therapy termination decreased by >50% after one year
and there was a significant increase in daily PAP usage

Big data analysis drives insights for treatment of central sleep apnea

Patients with treatment-emergent central sleep apnea (CSA) are 2x more likely to terminate therapy

- Opportunity to rethink conventional therapeutic options
- Minimize risk of therapy termination through early diagnosis
- Regularly monitor patients to support adherence to treatment



- Switching from therapy CPAP to ASV improved relative adherence by 22%
- Patients who switched from CPAP to ASV had fewer apneas and hyponeas during sleep

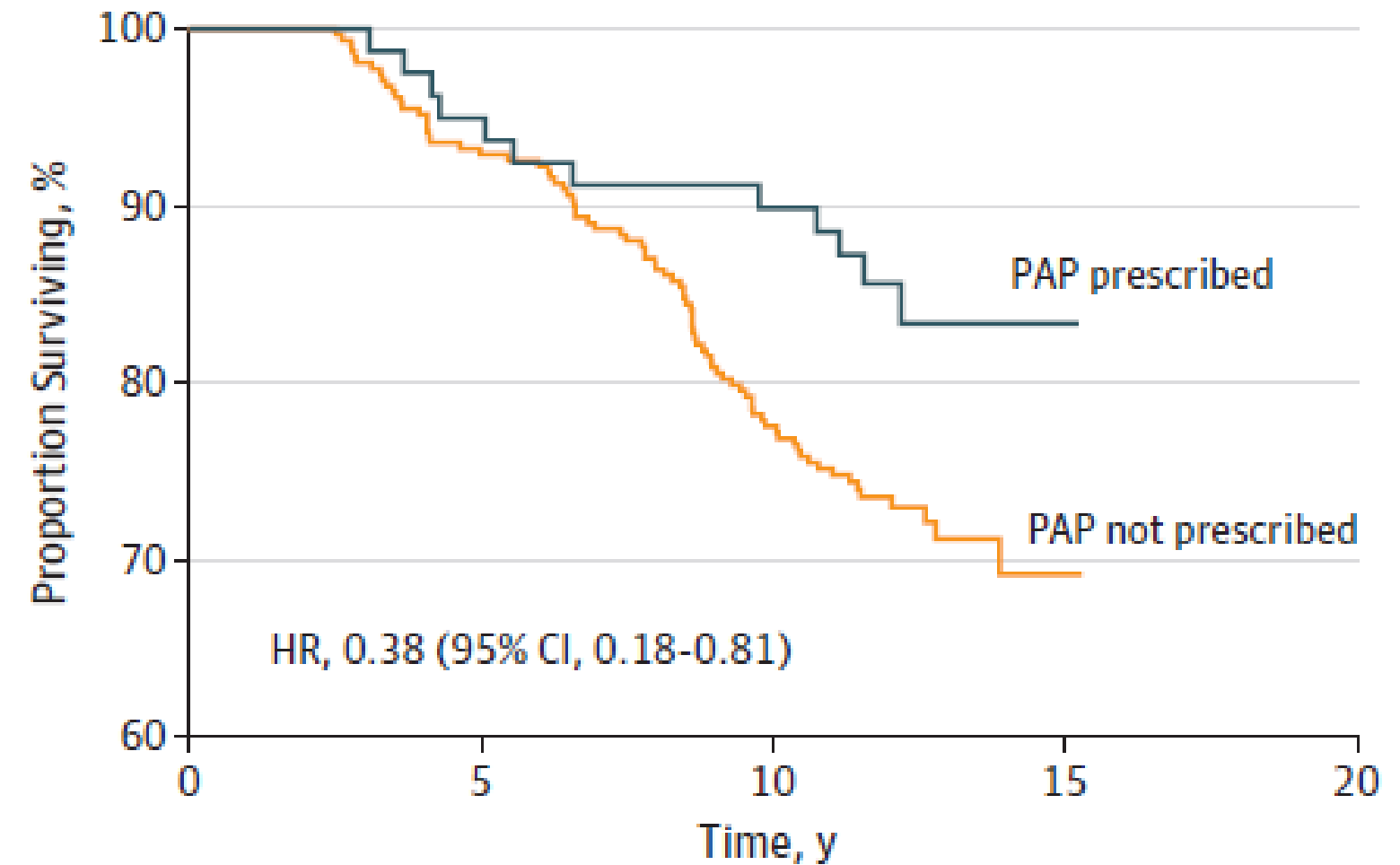
Reducing mortality with PAP therapy

U.S. multicenter, population-based cohort study

Sleep Heart Health Study



- Study included 392 patients with sleep apnea, with 11 years of follow-up
- Positive airway pressure therapy associated with a **62% lower risk of all-cause mortality**
- Death rate was twice as high for persons who did not receive positive airway pressure therapy
 - (24.7 vs 12.8 deaths per 1000 person years, $p = 0.03$)



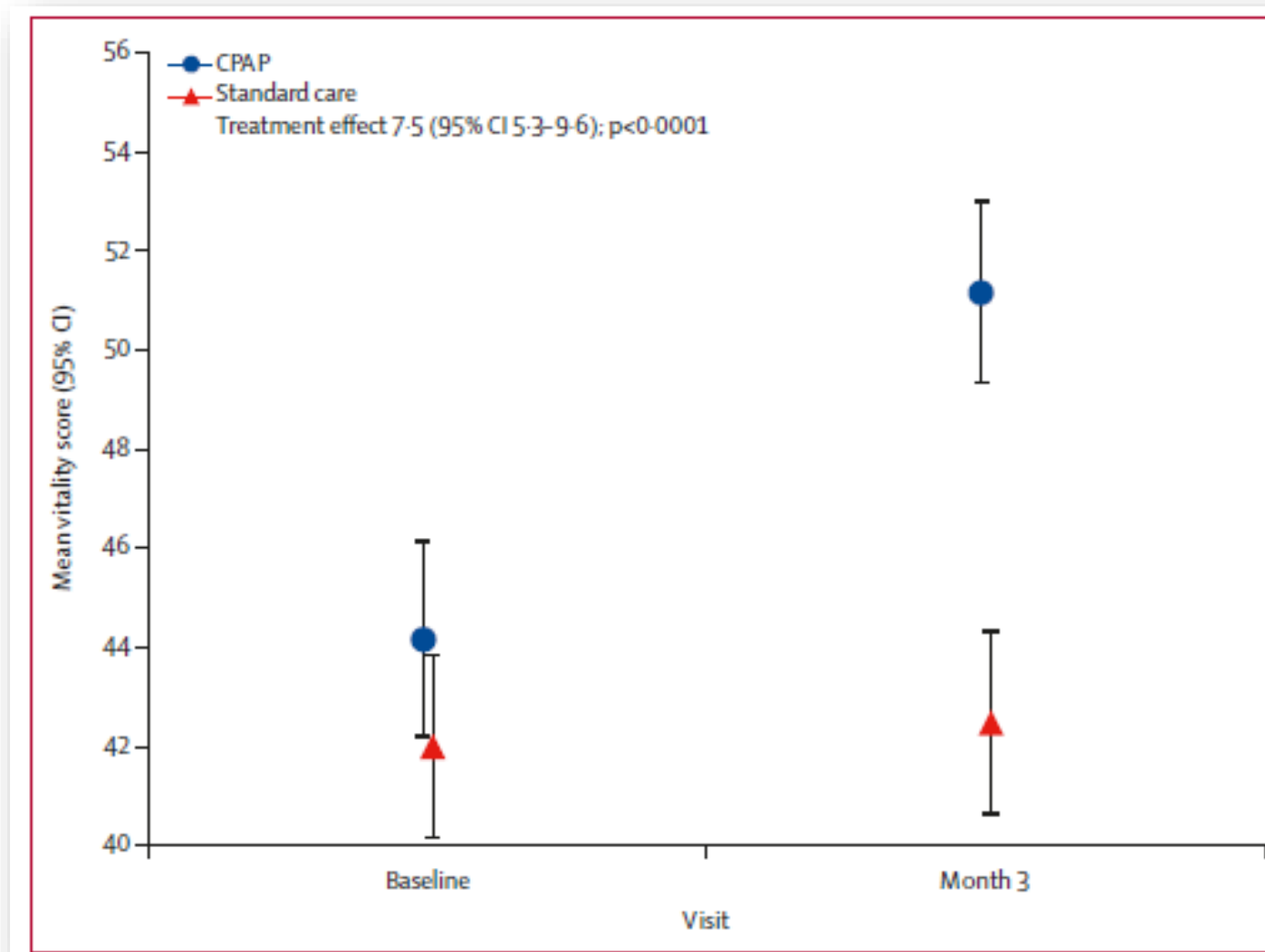
Study demonstrates the effectiveness of CPAP therapy and quality of life improvements for those with mild obstructive sleep apnea

MERGE trial: clinical effectiveness of CPAP treatment in patients with mild obstructive sleep apnea

- Demonstrated improvement in Quality of Life (SF-36 vitality scale) for CPAP patients vs. standard care
- Symptomatic benefits:
 - Reductions in sleepiness
 - Improvements in fatigue and depression

Compelling evidence supports the need and benefits of treating mild OSA

Combined with recently published global prevalence research, 936M patients worldwide can benefit from PAP treatment

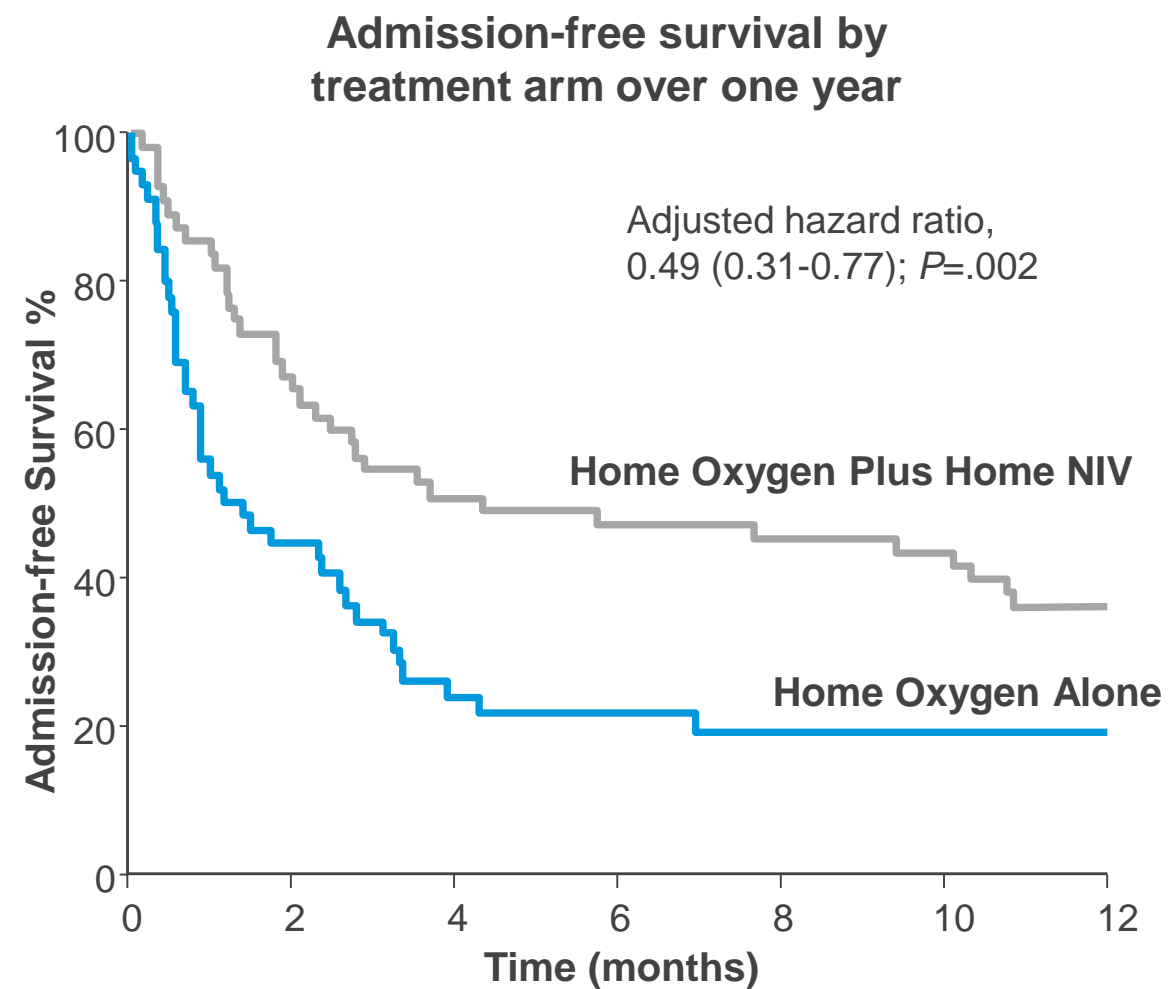


Change in SF-36 Vitality Scale in Patients with Mild OSA per AASM 2012



Opportunity to shift care from hospital to home

- Healthcare costs are on the rise
- Combining non-invasive ventilation (NIV) with home oxygen therapy (HOT)
 - Reduces hospitalization and mortality by 51%
 - Increases time to hospital readmission or death by ~90 days



- Combination of HOT with NIV reduced hospital readmissions by 58.3%
- Combination of therapies provided improved patient quality of life and saved >\$50k per quality of life adjusted year

1 P. Murphy et al., Effect of Home Noninvasive Ventilation With Oxygen Therapy vs Oxygen Therapy Alone on Hospital Readmission or Death After an Acute COPD Exacerbation. A Randomized Clinical Trial, JAMA .Published online May 21, 2017. doi:10.1001/jama.2017.4451.

Digital health solutions for inhaled COPD pharmaceuticals

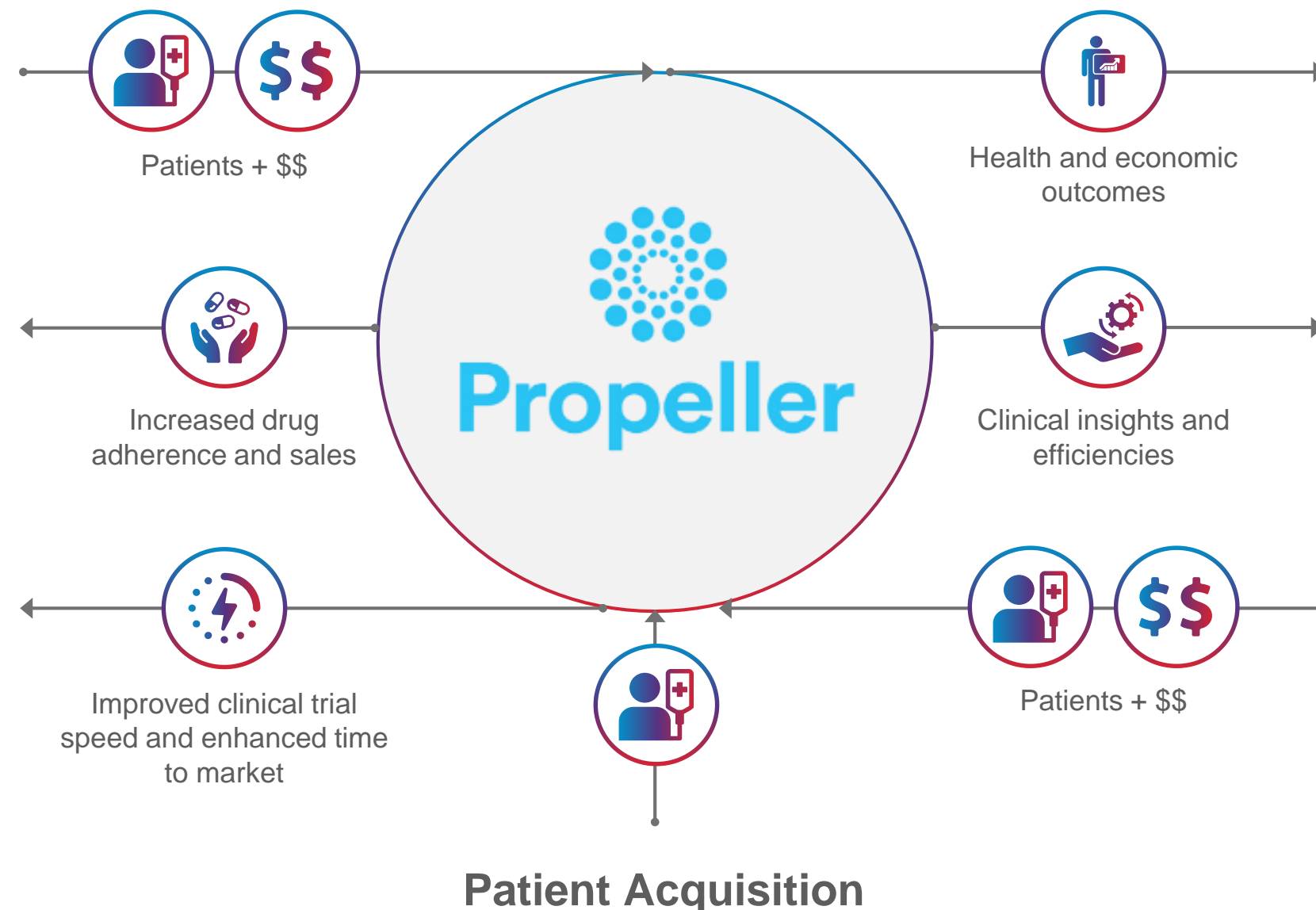
- ResMed has end-to-end digital health solutions for COPD patients across stages I, II, III, IV of the disease
- Uses sensors with inhalers to track medication usage and provide personal feedback and insights
- Establishes ResMed as a leading provider of COPD and asthma patient management solutions
- Enables digital integration of care through the progression of the disease

UPSTREAM

Customers include:



Pharma companies signed represent 90% of long-acting respiratory inhalation drugs



DOWNSTREAM



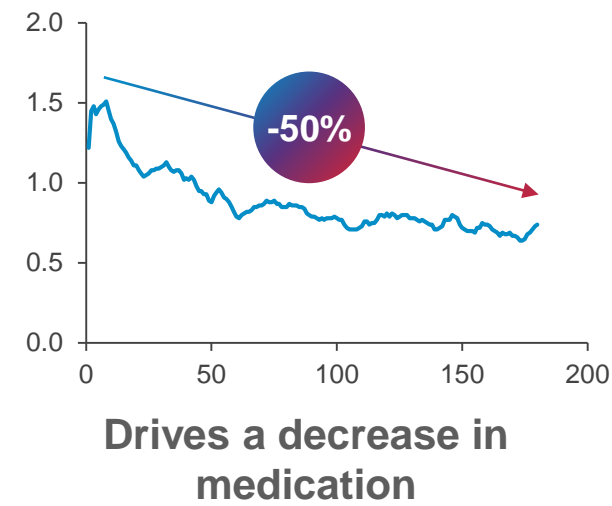
Propeller has demonstrated compelling clinical outcomes

Impact of the Propeller solution tracking inhaler usage and location

Uncontrolled COPD

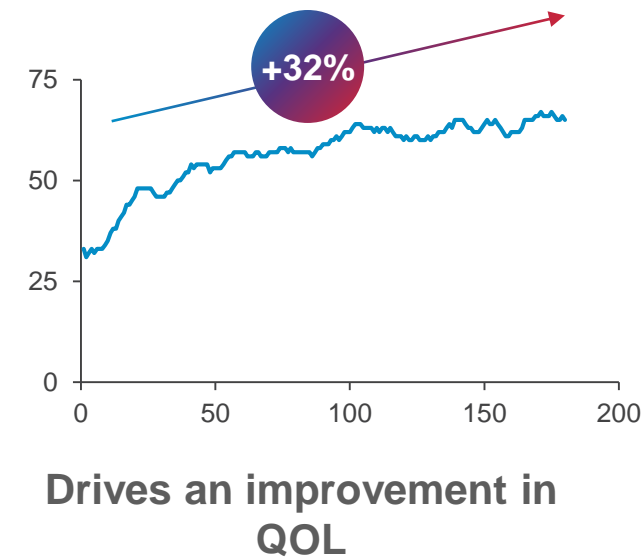
SABA use over time

per day



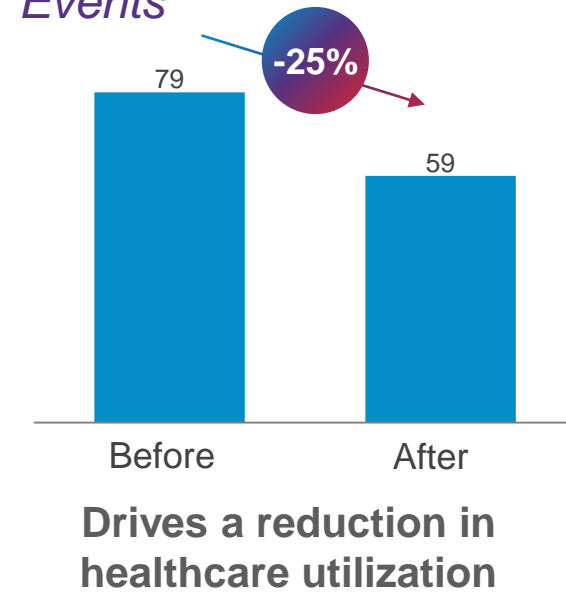
Symptom free days

%



Healthcare utilization

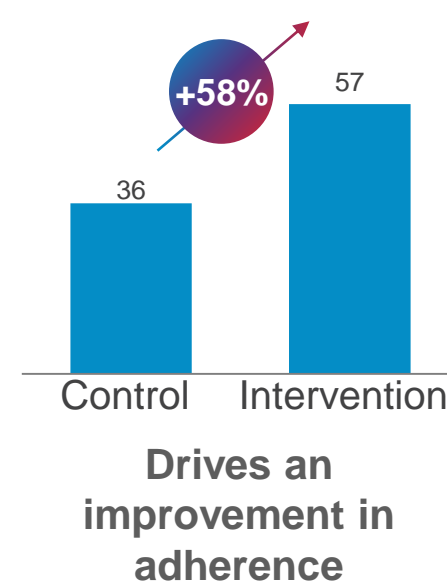
Events



Uncontrolled Asthma

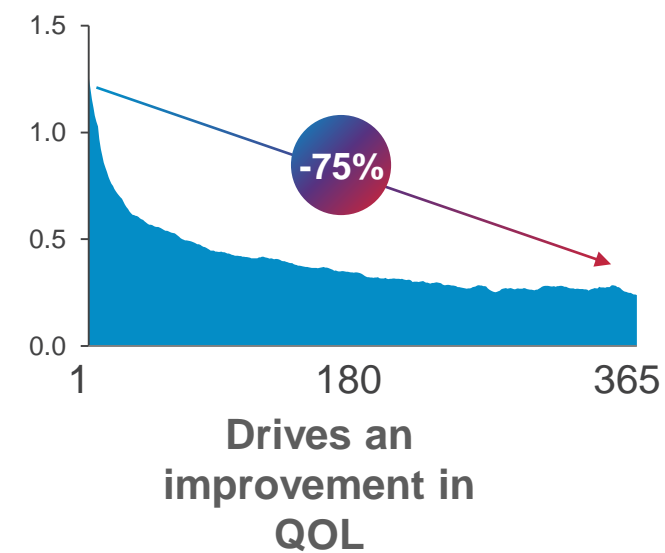
Adherence

%



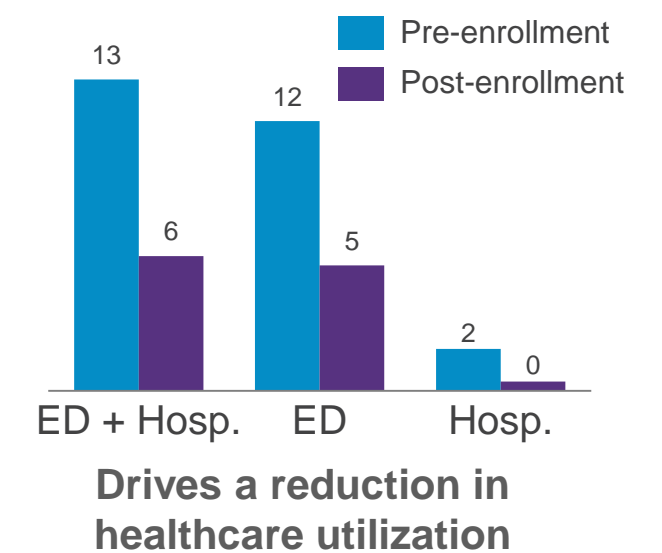
QoL: Rescue Inhaler use per day

times used



Acute care utilization

Events per 100 patient years



Propeller's digital medicine platform drives reduced healthcare utilization



Study Overview:

Cleveland Clinic enrolled people into Propeller as part of their routine clinical care and monitored them for at least one year. Providers monitored drug use and adherence to inhaled controller medications, providing follow-up as needed.

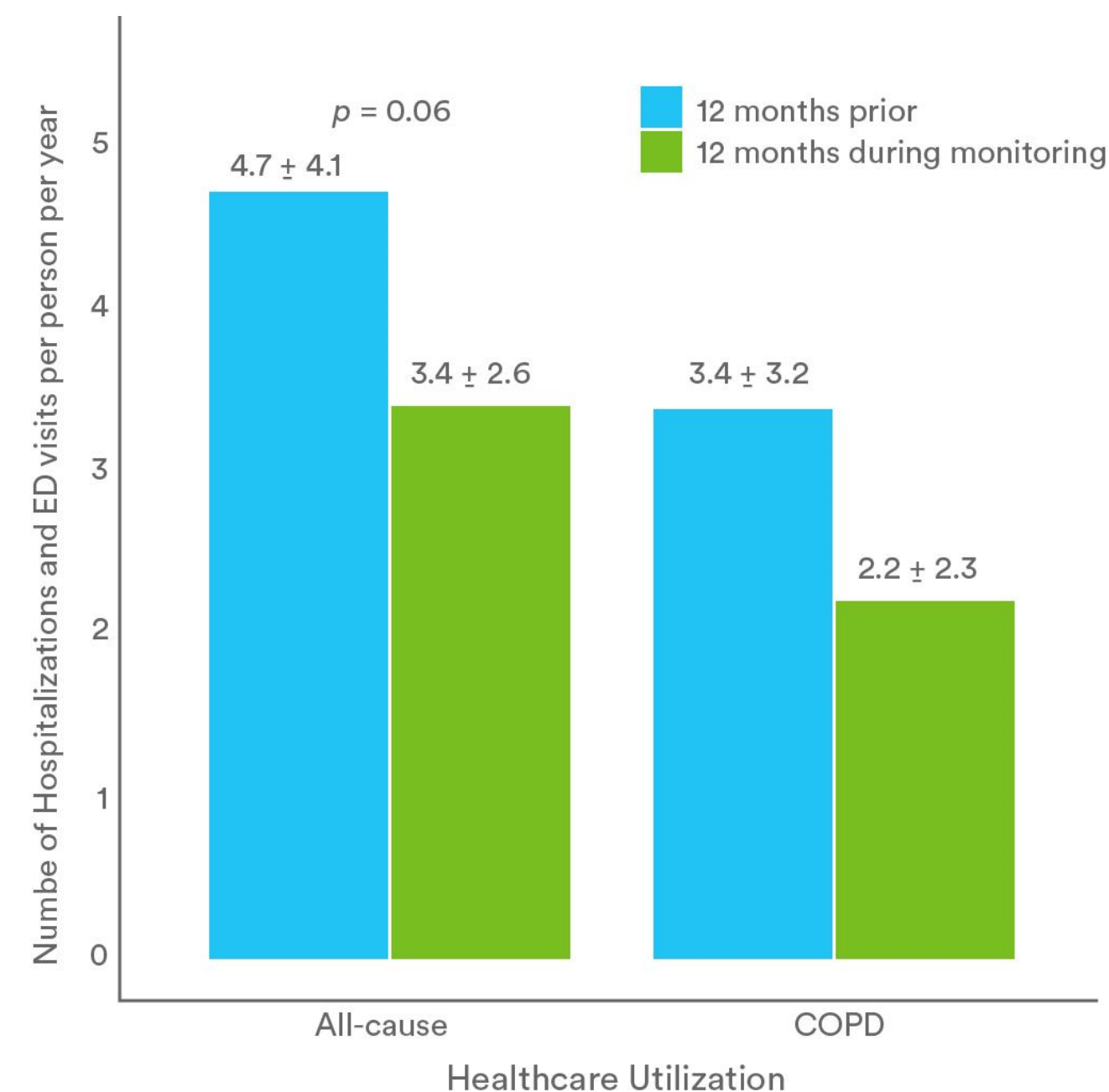
Population:

- COPD patients with ≥ 1 utilization (Emergency Department (“ED”) visit or hospitalization) in prior 12 months
- N = 39; mean age: 69 years, 51% male, 69% African American, mean FEV1¹ predicted: 47.2%, mean CAT: 19²











1. FEV1 = Forced Expiratory Volume in 1 second – the volume of air that can be forcibly blown out in the first second after full inspiration. Values between 80% and 120% are considered normal
2. CAT = COPD Assessment Test – an eight-item questionnaire designed to quantify the impact of COPD symptoms on a patient's health status.. Scored between 0-40, <10 Low, 10-20 Medium, 21-30 High, >30 Very high

Alshabani K, et al. Electronic inhaler monitoring and healthcare utilization in chronic obstructive pulmonary disease. J Telemed Telecare. 2019

Results:



History of successful SaaS acquisitions

Company	Location	Date	Key Product	Status
	Halifax, NS Canada	Aug 2012	U-Sleep	Integrated into AirView.
	Knoxville, TN	Feb 2015	GoJaysec	Rebranded as GoScripts.
	Denver, CO	Jul 2015	CareTouch 360	Rebranded as ResMed ReSupply.
	Lawrenceville, GA	Feb 2016	Brightree Core	Operating as a wholly-owned subsidiary.
	Girard, PA	Jun 2017	MyForms	Integrated into Brightree.
	Joliet, IL	Jul 2017	Brightree ConnectPRO	Integrated into Brightree.
	Springfield, MO	Jul 2018	firstHOMECARE Software (EHR)	Integrated with Brightree and MatrixCare.
	Bloomington, MN	Nov 2018	MatrixCare One	Operating as a wholly owned subsidiary.
	Media, PA	Dec 2018	Apacheta ACE (a mobile enterprise application platform)	Operating as a part of Brightree, with an independent brand.
	Brentwood, TN	Jan 2020	SNAP SNAP+RPM	Operating as a part of Brightree, with an independent brand