



Disrupting Convention in Women's Reproductive Health Through Continuous Innovation

Investor presentation
February 2025

NASDAQ: FEMY



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Femasys Overview

Empowering Women & Enabling Choice

Technological advancements in female reproductive health are long overdue, driving our focus to develop in-office, accessible, safe and innovative options as true solutions.

MAIN AREAS OF FOCUS

Infertility

- FemaSeed® Intrauterine Insemination
- FemVue® Contrast-Generating Device

Contraception

- FemBloc® Permanent Birth Control

Cancer Diagnostic

- FemCerv® Endocervical Tissue Sampler



Investment Highlights

Mission

- Develop disruptive broad portfolio of women's health products
- Address multi-billion-dollar global market opportunities
- Improve patient care and health economics

Differentiator

- Minimal competition with well defined reimbursement strategies
- Commercial-readiness with in-house CMC and device manufacturing
- Global regulatory approvals (U.S., Europe, Canada, Japan & Israel)

Foundation

- Woman-founded and led, experienced leadership team
- Intellectual property portfolio with ~200 patents globally issued
- 6 commercial-stage products and 1 late-stage candidate

NASDAQ: FEMY (IPO June 2021)

Stock Price (as of 01/31/25)	\$1.18
Share Count	23.8M
Market Capitalization (as of 01/31/25)	\$28.1M
Cash (as of 09/30/24)	\$7.6M

Key Leadership



Kathy Lee-Sepsick
President, CEO, Founder

30+ years of experience

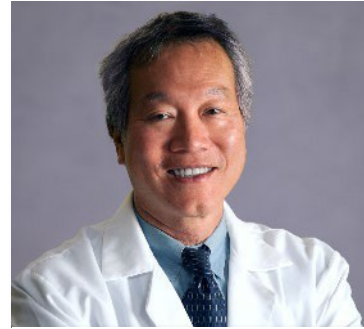
Terumo Medical,
Novoste, Salumedica



Dov Elefant
Chief Financial Officer

30+ years of experience

Collectar Biosciences,
Akari Therapeutics,
Lev Pharmaceuticals,
EpiCept



James Liu, MD
Chief Medical Officer

40+ years of experience

Chair, Dept OB/ GYN
University Health
System, Chair Dept
Reproductive Biology at
Case Western, and
Division Head
University of Cincinnati



Dan Currie
Chief Operating Officer

30+ years of experience

Ciba Vision, Novoste,
Salumedica



Christine Thomas
Chief Regulatory &
Clinical Officer

20+ years of experience

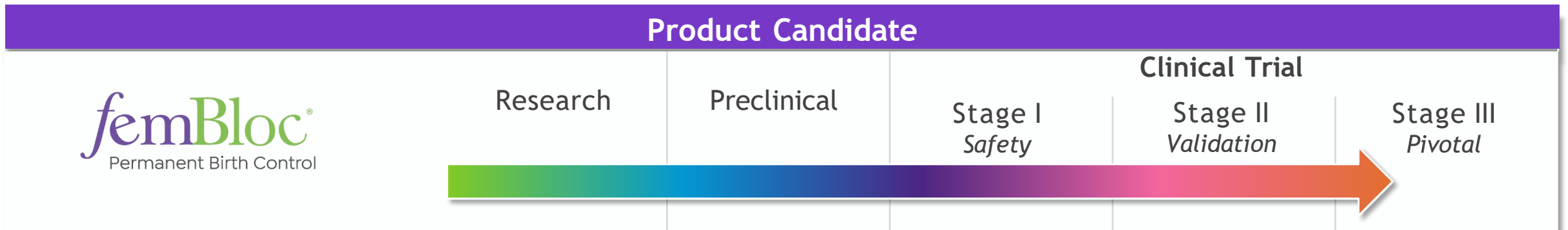
GE Healthcare, Boston
Scientific, Smiths
Medical, RTI Surgical

Solutions for Women Through the Continuum of Care

Commercially Available Products (U.S., Europe & Canada)

<i>femaSeed</i>	<i>Intratubal Insemination for first-line infertility treatment</i>
<i>femVue</i>	<i>Contrast-Generating Device for fallopian tube diagnosis</i>
<i>femCath</i>	<i>Delivery Catheter for selective fallopian tube evaluation</i>
<i>femCerv</i>	<i>Endocervical Tissue Sampler for cervical cancer diagnosis</i>
<i>femChec</i>	<i>Controlled Contrast-Generating Device for fallopian tube diagnosis</i>

Product Candidate



Commercialization Strategy

Initial Focus

Infertility Specialists &
Gynecologists performing infertility



Initial Market Release

- U.S. - direct sales team
 - conglomerates (Boston IVF & HRC Fertility)
- Spain - distribution partnership
 - private and public centers

Expanded Focus

Gynecologists &
Additional countries



Expanded Market Release

- Wider distribution and geographical expansion pending country specific requirements
- Activate patient awareness campaigns
- Additional product offerings will accelerate

Fertility Portfolio

femaSeed[®]

Intratubal Insemination

- Innovative first-line insemination option; enhances natural fertilization
- Completed pivotal trial supports safety & efficacy
- Substantially less cost and less risk than the long-standing IVF alternative

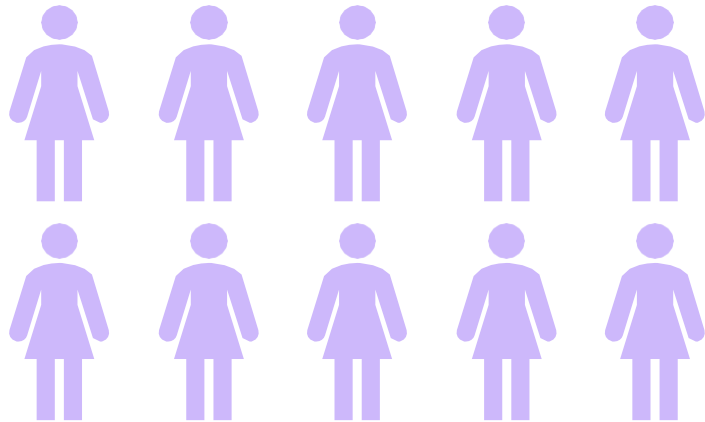
femVue[®] Companion Diagnostic

First in-office ultrasound evaluation of fallopian tubes



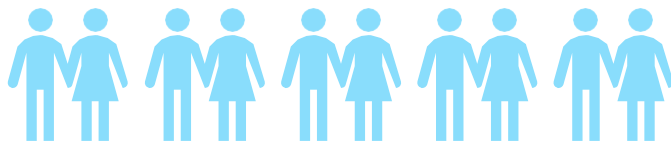
No Affordable infertility Options Introduced in Decades

~ 10M women in the U.S. struggle with infertility¹



~ 50% due to male factor²

Sperm counts worldwide have declined by >50%³

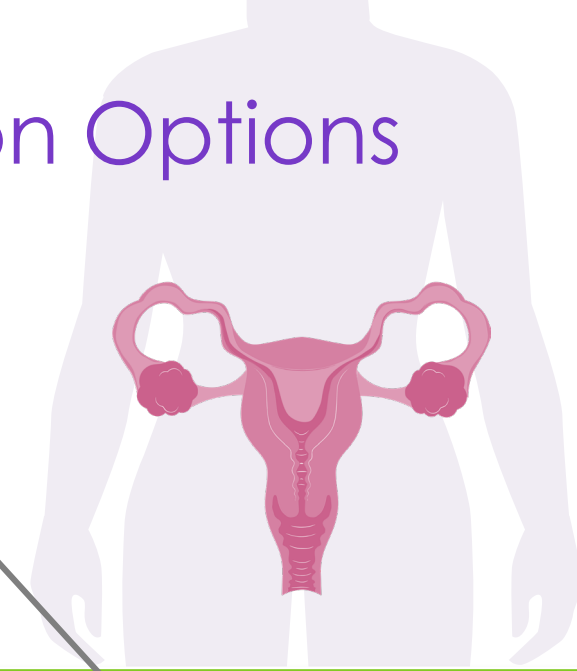


Key Trends:

- 43 U.S. states have recorded lowest fertility rate in last three decades⁴
- 9.14 million women have received infertility services at some time in their lives⁵

Significant Need for Next Generation Options

> \$1B Annual market opportunity

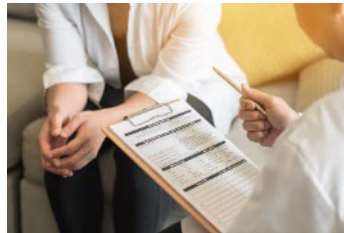


Patient Journey

4.3M
seek evaluation only



DISCUSSION



DIAGNOSIS



DRUGS



IUI



IVF

~1M
cycles/ year

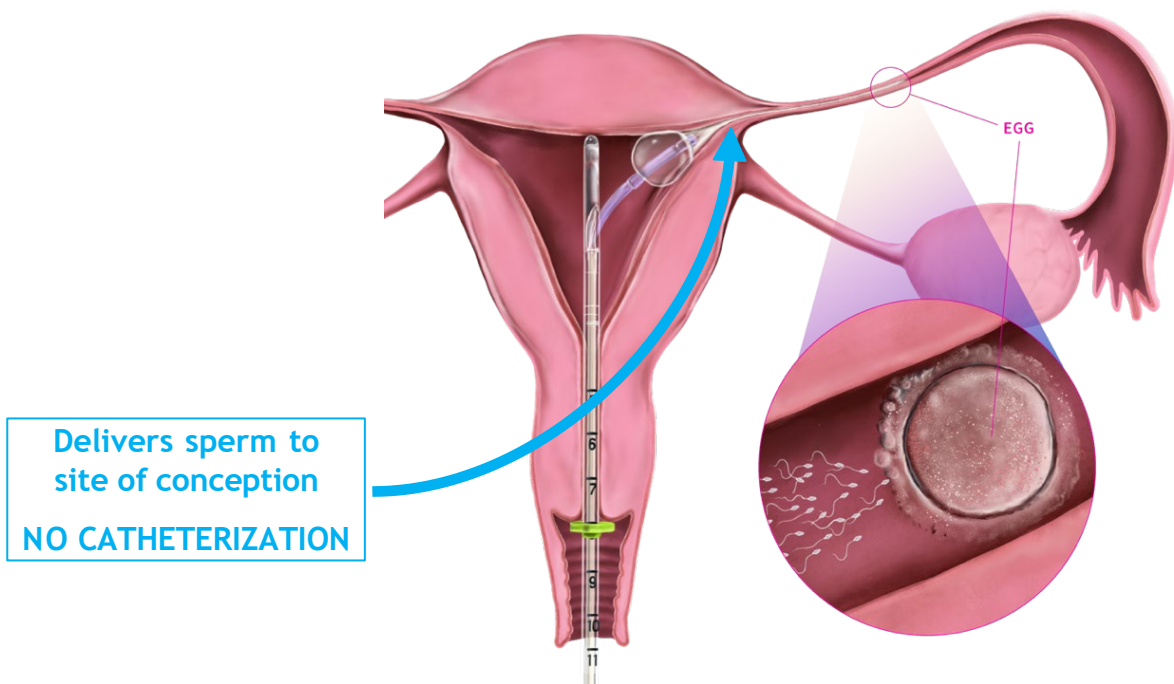
~200k
cycles/ year

Infertility Portfolio: from Diagnosis to *Treatment*

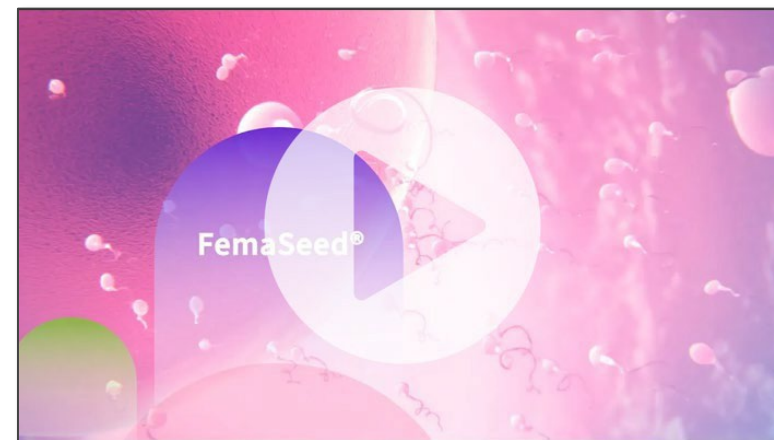
femaSeed® Safe • Cost-Effective • Enhance Fertilization

Intended Population:

- Infertile women/ couples
- Patients desiring insemination, including same sex couples & single women



Requires at least one open fallopian tube
(FemVue diagnosis performed first)



Video will open in browser window.

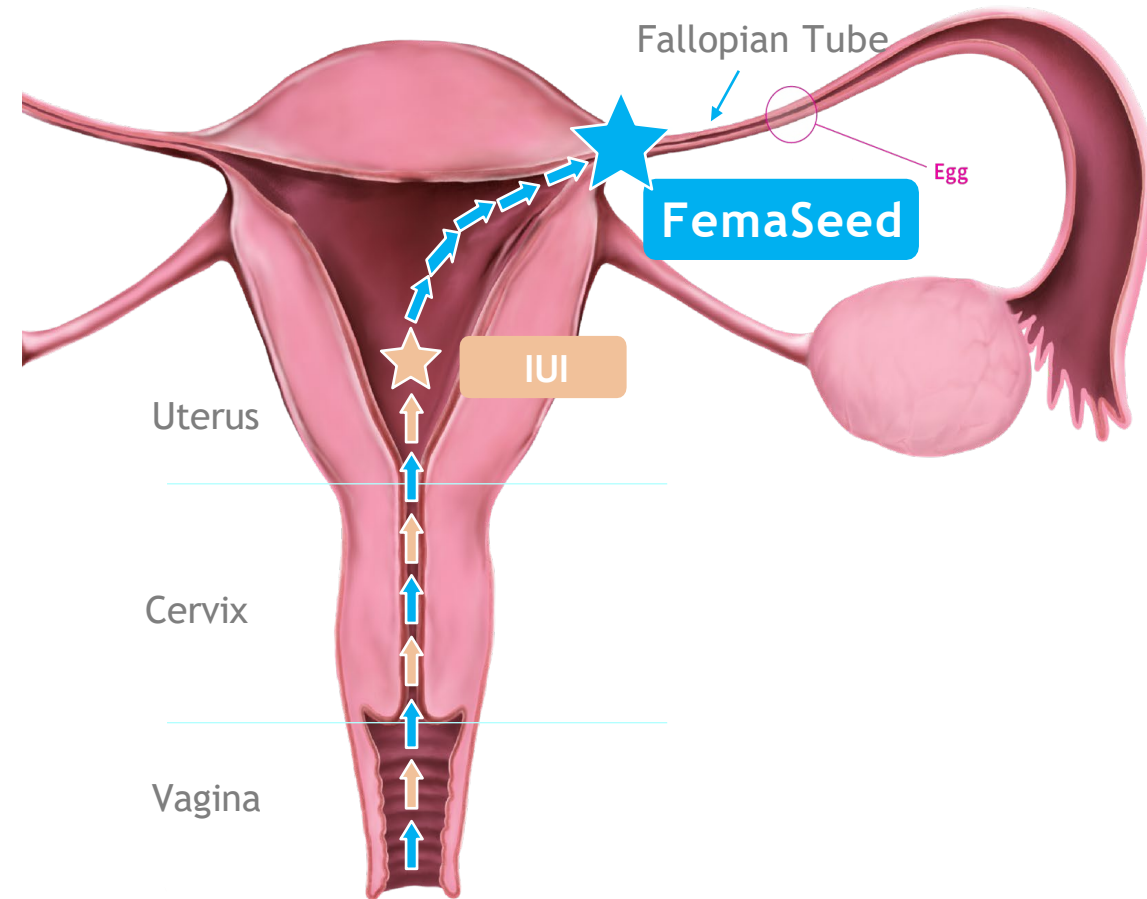
FemaSeed Top Line Data from Pivotal Trial Demonstrates Significant Progress in Fertility Treatment

Trial Design (NCT 04966847); enrollment completed Q4 2023

- Prospective, unblinded pivotal trial evaluating the safety and efficacy of FemaSeed
- Primary endpoint: 3 -week pregnancy rate
- Safety: 7-week follow-up period post FemaSeed

Trial Results*

- ✓ **26.3% pregnancy rate** for women with male factor/ unexplained infertility
- ✓ More than double pregnancy rate when compared to historic intrauterine insemination (IUI) for similar patient population (*17.5% FemaSeed vs 6.7% IUI per cycle*)
- ✓ Majority of women who became pregnant did so after first FemaSeed procedure
- ✓ No new safety concerns; all AEs consistent with IUI



FemaSeed Offers Significant Competitive Advantages

	femaSeed	Assisted Reproductive Approaches		Artificial Insemination
		IVF	ICSI	IUI
No surgery	✓			✓
No egg retrieval or storage	✓			✓
No required injections	✓			✓
Delivery to fallopian tubes (<i>site of conception</i>)	✓	NA	NA	
Cost-effective	✓			✓
Minimal safety risks	✓			✓
Low male sperm count efficacy	✓	✓	✓	
Single fallopian tube solution	✓	NA	NA	
Widespread accessibility	✓	Varies	Varies	✓

FemaSeed Priced to Support First-Line Treatment Option

Population	Infertile Women/Couples Seeking Treatment		Subset of Infertile (After 1-3 IUI cycles or as indicated)
	IUI	femaSeed	IVF
Average Total Cost	\$500-\$4,000¹ <i>total per cycle depending on ultrasound monitoring and use of ovulation drugs²</i>	+ device <i>per cycle above IUI cost</i>	\$30,000 <i>total per cycle, including ultrasound monitoring, ovulation drugs, egg extraction, freezing³</i> <i>Genetic testing optional; monthly storage fees extra.</i>
Reimbursement	<ul style="list-style-type: none"> 3-6 cycles covered Required prior to IVF in many coverage policies 	<ul style="list-style-type: none"> Patient out-of-pocket charge Ancillary services covered under existing codes 	<ul style="list-style-type: none"> 14/20 covered states have IVF fertility insurance coverage
Market Research ⁴ N=1,000 infertile women	85% of women would have preferred FemaSeed <u>instead of</u> IUI		88% of women would have preferred FemaSeed <u>prior to</u> IVF

NOTES:

- <https://www.fertilityiq.com/iui-or-artificial-insemination/the-cost-of-iui>
- Parenthood, Planned. "What Is Intrauterine Insemination (IUI)?" Planned Parenthood, <https://www.plannedparenthood.org/learn/pregnancy/fertility-treatments/what-iui>.
- Ravitsky, et al. The forgotten men: rising rates of male infertility urgently require new approaches for its prevention, diagnosis and treatment. *Biology of Reproduction*, 2019, 101(5), 872-874.
- Data on file with Femasys



In-Office Sterilization

*fem*Bloc[®]
Permanent Birth Control

- First and only non-surgical, in-office, permanent birth control option
- In late-stage clinical development with on-going pivotal trial in U.S.
- Potential to be the safest and most natural approach at substantially less cost than the long-standing surgical alternative

Lack of Innovation in Last Century for Permanent Birth Control

U.S. Market Information

\$3B annual market opportunity

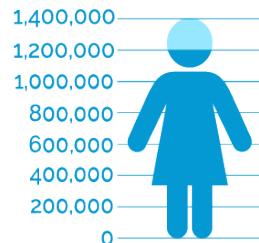
>13M Women who no longer intend to have children^{1,2}



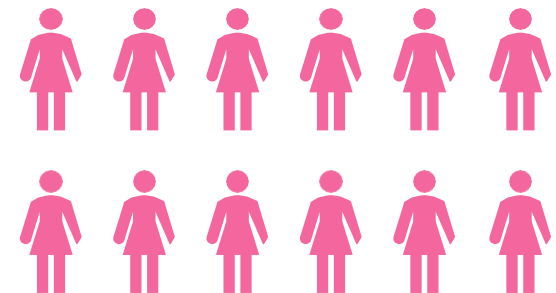
\$20B total market expansion

1.2M

women choose surgical tubal ligation as a form of permanent birth control every year^{2,4}



>12M use non-permanent birth control long-term^{2,3}



¹ Jones et. al, Current contraceptive use in the United States, 2006–2010, and changes in patterns of use since 1995. National health statistics reports; no 60. Hyattsville, MD: National Center for Health Statistics. 2012.

² Daniels et. al, Current contraceptive status among women aged 15–49: United States, 2017–2019. NCHS Data Brief, no 388. Hyattsville, MD: National Center for Health Statistics. 2020.

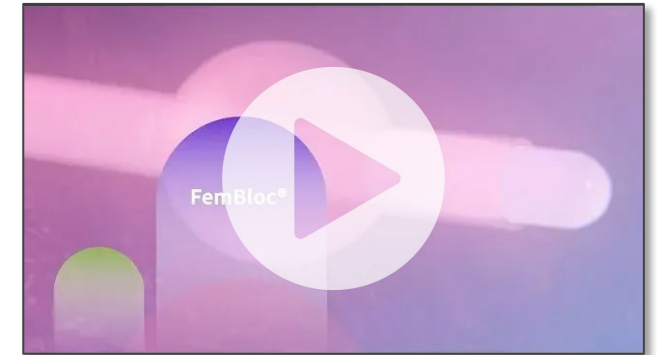
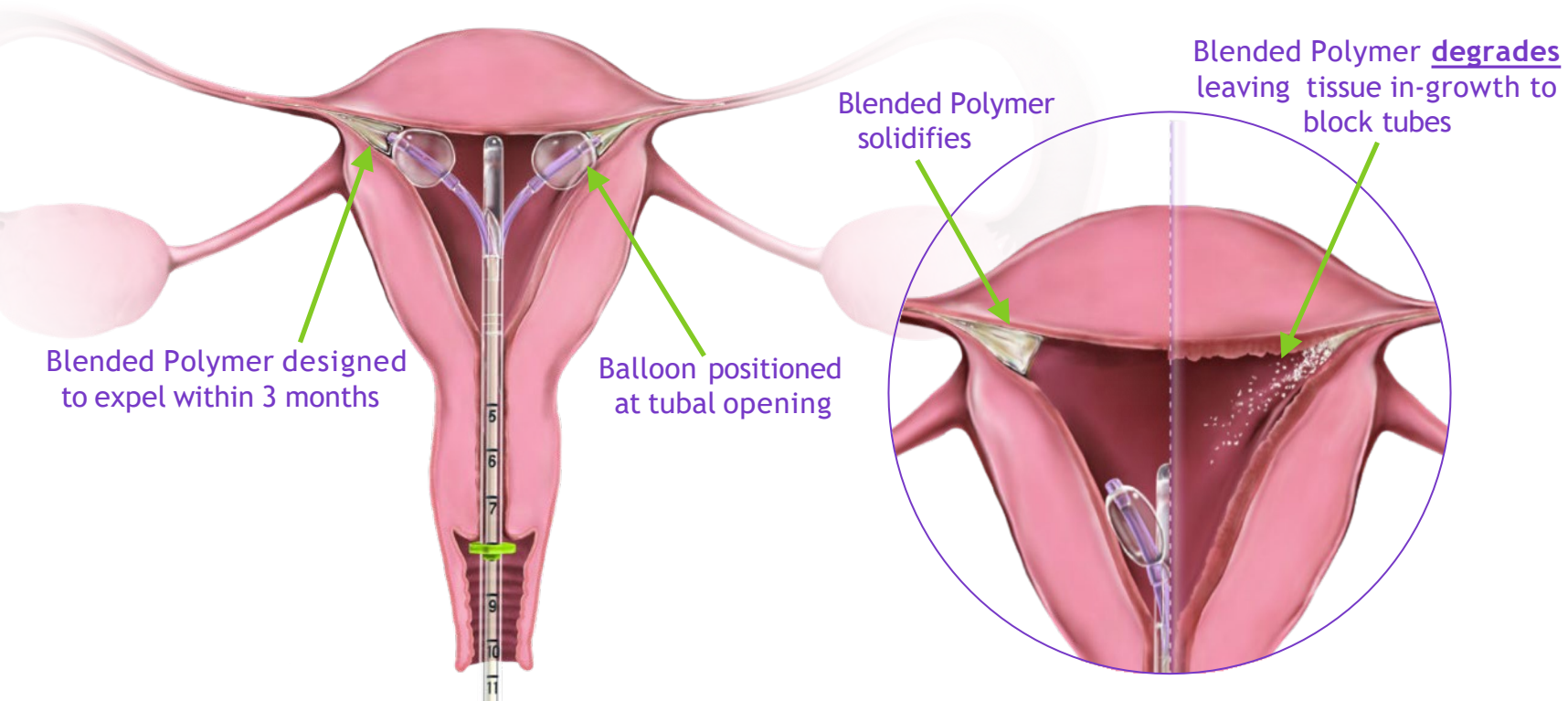
³ National health statistics reports; no 60. Hyattsville, MD: National Center for Health Statistics. 2012.

⁴ Martinez GM. Receipt of family planning services in the United States: 2022–2023. NCHS Data Brief, no 520. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <https://dx.doi.org/10.15620/cdc/169629>

FemBloc Permanent Birth Control & Confirmation Test

femBloc®

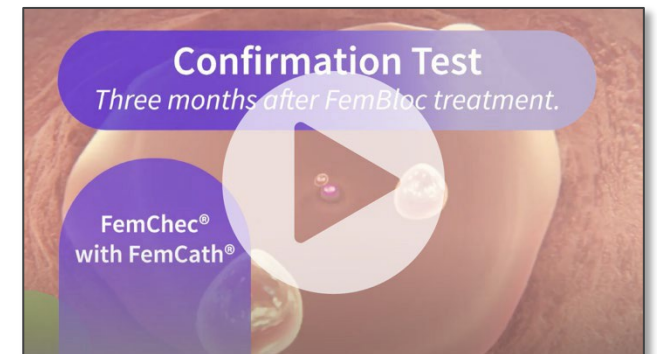
Safe • Convenient In-Office • Lower Cost



Video will open in browser window.



Ultrasound-Based Confirmation Test
(to ensure success)



Video will open in browser window.

FemBloc Clinical Studies for U.S. FDA Approval (PMA)

Stage III: FINALE Pivotal Clinical Trial

Trial Design (*IDE approved June 2023; currently enrolling in U.S.*)

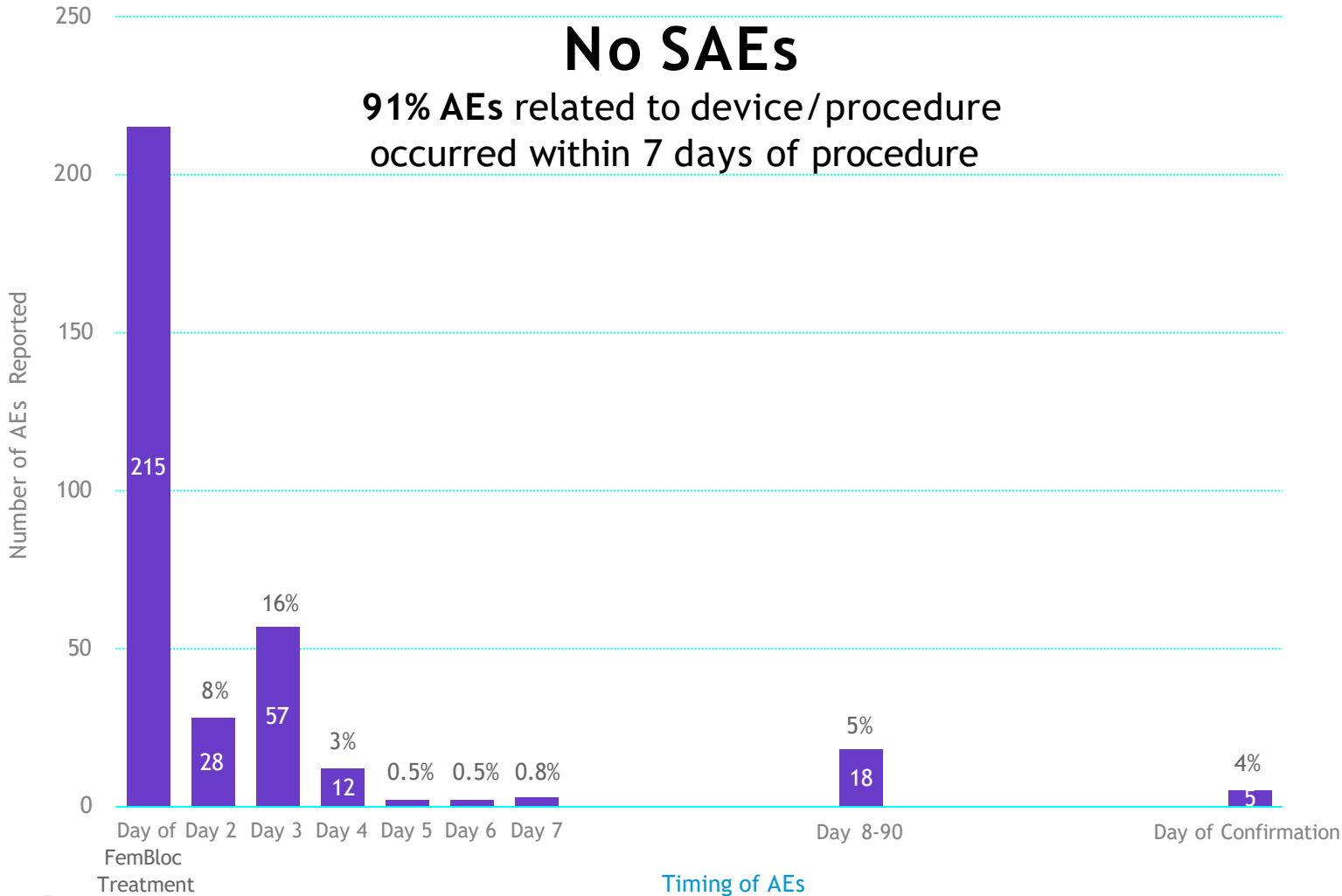
- Prospective, multi-center, open-label, single-arm study with historical control
 - Roll-in study design (50 subjects in part A for safety)
 - Primary Endpoint: pregnancy rate at 1-year after using FemBloc (N=401)
- Additional Analysis:
 - Safety, including 2-5 years post-market
 - Interim analysis: after 300 women have relied on FemBloc for 1-year

Completed Earlier FemBloc Clinical Studies (N=321)

Early Clinical (N=93)	Stage I: Safety (N=183); IDE approved	Stage II: Validation (N=45); IDE approved
Evaluated delivery system and blended polymer	No serious AEs reported; 5-year follow-up for safety	Selection of confirmation test for pivotal trial; 5-year follow-up for safety

FemBloc Safety Profile

(N = 228 subjects from Stage I & II; 5-year follow-up on-going)

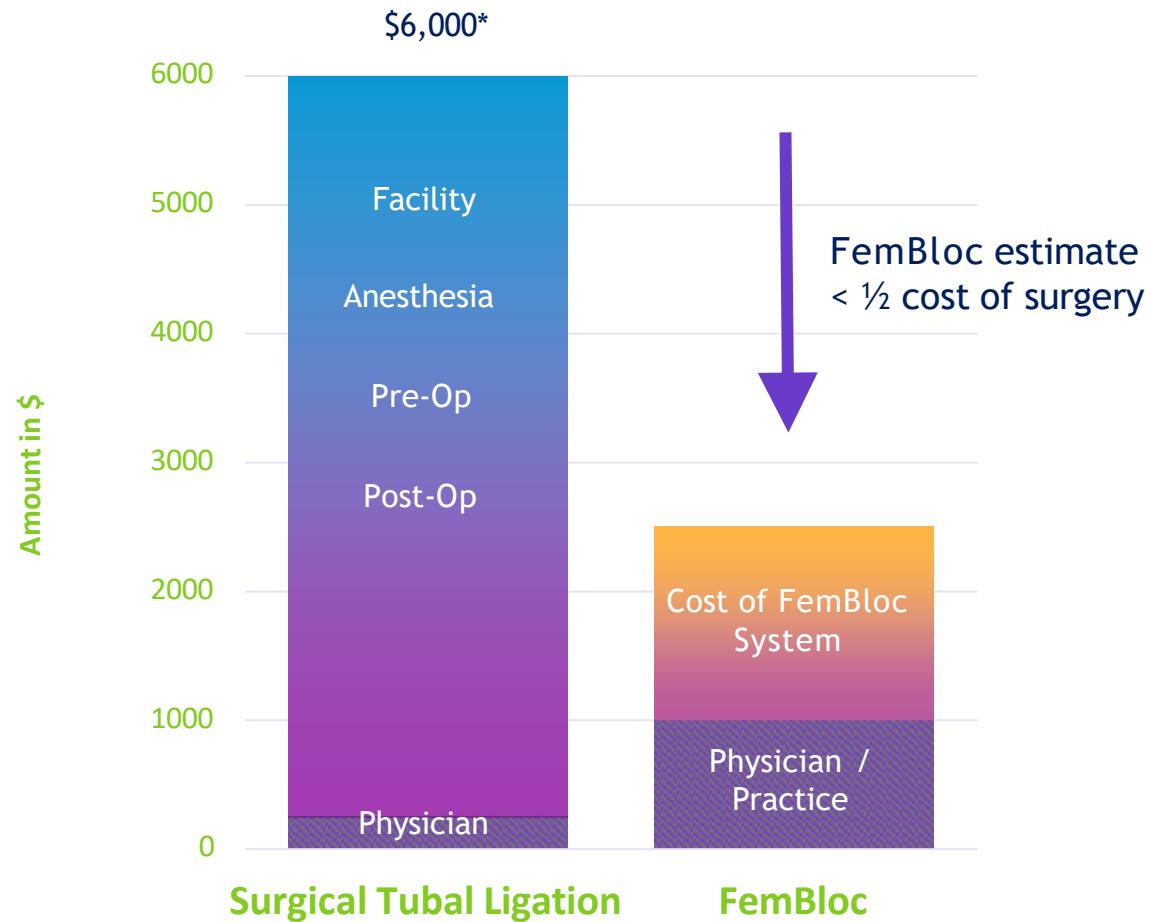


Other Key Findings:

- **Investigator Rating:**
 - 96% extremely or very satisfied with FemBloc
- **Most common AEs:**
 - 59% bleeding/ spotting
 - 55% pain/ cramps
- **Mean pain score per visual analog scale (0-10):**
 - 4.6 FemBloc
 - 3.4 confirmation test

FemBloc Improves Health Economics

U.S. Cost Breakdown Compared to Surgical Alternative



NO COST TO PATIENT
(covered under Affordable Care Act)

FemBloc Efficiencies

- In-office procedure expands practice services
- Can perform multiple procedures in same room
- Quick to perform; ease of room turnover
- Patient immediately resumes normal activities

*Planned Parenthood 2019, <https://www.plannedparenthood.org/learn/birth-control/>;
Doximity 2019; U.S. Bureau of Labor Statistics, 2019.

FemBloc Offers Significant Competitive Advantages

	<i>femBloc</i> [®]	Permanent Birth Control		Temporary
		Surgical Sterilization (94% effective*)	Essure [®] <i>No longer marketed</i> (95% effective*)	IUD
Permanent	✓	✓	✓	
Office procedure	✓		Some	✓
No special capital equipment	✓			✓
No anesthesia	✓			✓
No implant (coil/clip)	✓			
No surgery (risks/cost)	✓			✓
No hormones	✓	✓	✓	
Coverage in place/anticipated	✓	✓	✓	✓
Worldwide accessibility	✓	Varies	Off Market	✓



*Garipey AM, Lewis C, Zuckerman D, et al. Comparative Effectiveness of Hysteroscopic and Laparoscopic Sterilization for Women: A Retrospective Cohort Study. *Fertility and Sterility*, 2022, 117(6):1322-1331. Doi: 10.1016/j.fertnstert.2022.03.001.

Milestones

Inflection points that create value for investors

Broaden market
release of infertility
product portfolio in
U.S. & Spain

Increase regulatory
country approvals/
registrations for
product portfolio

Progress FemBloc
U.S. pivotal trial
to Part B

Expand GYN product
offerings with new
product initiative(s)

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Foundation

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- 6 commercial-stage products and 1 late-stage candidate





Contact Details

Investor Relations:
IR@femasys.com

Media Inquiries:
PR@femasys.com

