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## **Market-Leading Innovators**

First FDA-cleared pump to deploy algorithms that adapt to each person's unique insulin requirements

## **Key Operating Highlights**

>19K

iLet Installed Base<sup>1</sup> \$17.6M

Q1'25 Net Sales ~51%

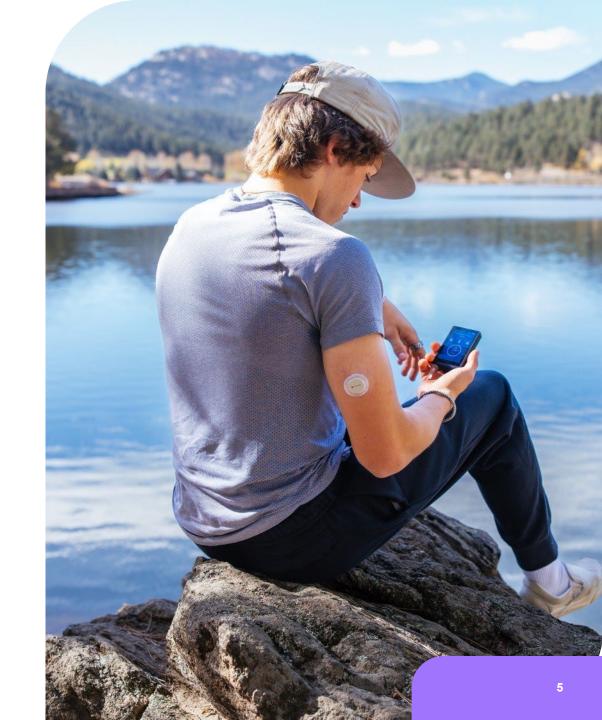
Q1'25 **Gross Margin** 

~71%

**New Patient Starts** from MDI in Q1'25

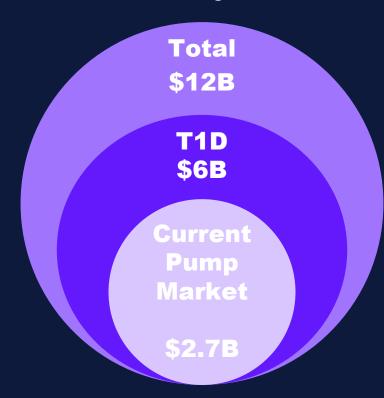
63

Sales Territories in the U.S.



# Large and Underpenetrated Insulin Pump Market

Total Addressable Market for Insulin Delivery in the U.S.



#### **Type 1 Diabetes**



**1.9M** 

People in the U.S.



~1.2M

On multiple daily injections (MDI)



~0.7M

On pump therapy



~37%

Pump penetration

## Type 2 Diabetes (Insulin-Intensive)<sup>1</sup>



1.9M

People in the U.S.



1.7M +

On multiple daily injections (MDI)



<0.2M

On pump therapy



<10%

Pump penetration

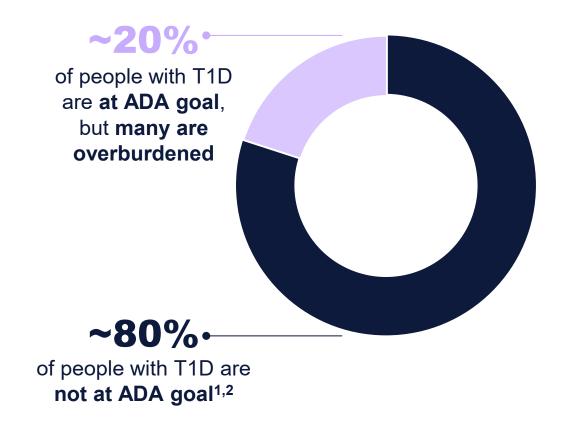
Source: Internal estimates informed by data from the CDC, Seagrove Partners, and publicly-reported 2024 product sales data.

Note: Type 1 Diabetes (T1D).

1. Type 2 Diabetes population in the United States who require intensive insulin therapy.

## Poor Clinical Outcomes for People with T1D in the U.S.

~80% not at treatment goal, defined by the ADA as HbA1c <7%



Meeting goal & content ~380K People with Meeting goal & overburdened T<sub>1</sub>D

T<sub>1</sub>D

Not meeting goal & overburdened

Source: Internal estimates informed by data from the CDC, Seagrove Partners, and publicly-reported 2024 product sales data.

## **Significant Unmet Market Needs Remain**

#### Pump complexity is a major obstacle to adoption

#### **Complexity of Pumps**



User

Adjusts everyday as needed

Carb Counting for Meal Doses

Manual Correction Doses

Temporary Basal Rate



**Physician** 

**Adjusts every 3 months** 

Insulin-to-Carb Ratio
Correction Factor
Basal Rate

### **Obstacles to Pump Use**

- Burdensome for users to manage everyday
- Difficult for physicians to setup and manage, particularly primary care providers
- Costly for users to purchase pump and monthly supplies

#### **T1D Unmet Needs**





Penetration remains low and treatment outcomes are poor







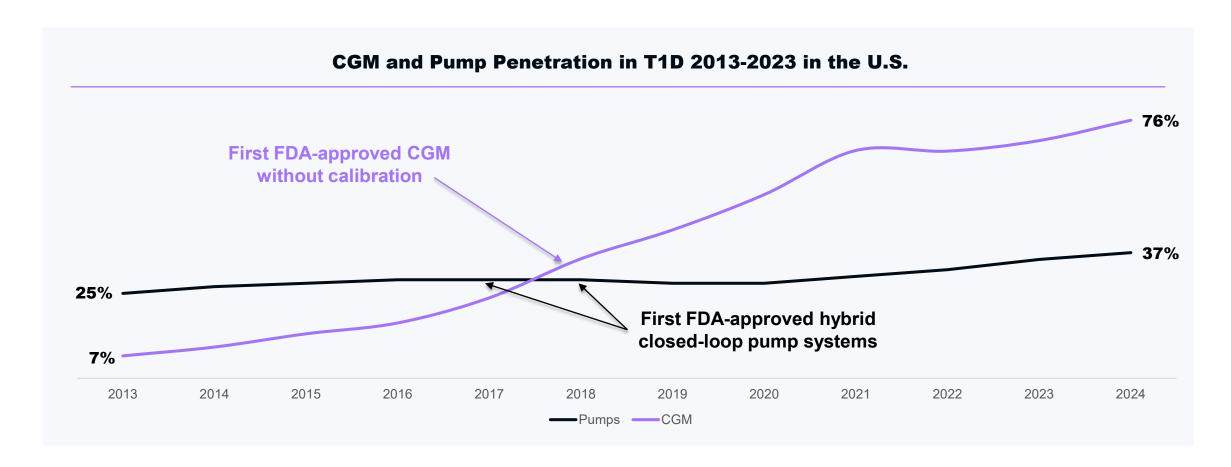
Source: Internal estimates informed by data from the CDC, Seagrove Partners, and publicly-reported 2024 product sales data. Note: Type 1 Diabetes (T1D). Type 2 Diabetes (T2D), American Diabetes Association (ADA).

1. Foster et al. Diabetes Technol Ther. 2019;21:00-72.

Pettus et al., Diabetes Care. 2019;42:2220-2227.

## The Market Responds to Major Ease-of-Use Innovations

No fingerstick calibration was the key innovation for CGMs; iLet may be that innovation for pumps





We believe we can do more for people with diabetes

## **iLet Bionic Pancreas**

#### Advanced adaptive algorithms learn each person's unique insulin requirements

- Determines and delivers 100% of all insulin doses<sup>1</sup>
- Simple, easy-to-use system
- Generates the same or better clinical outcomes. with **substantially less work** for the user and provider<sup>2,3</sup>

#### **Compatible with leading CGMs**

- Dexcom's G6 & G7
- Abbott's FreeStyle Libre 3 Plus

#### **Option to use pre-filled Fiasp PumpCart**





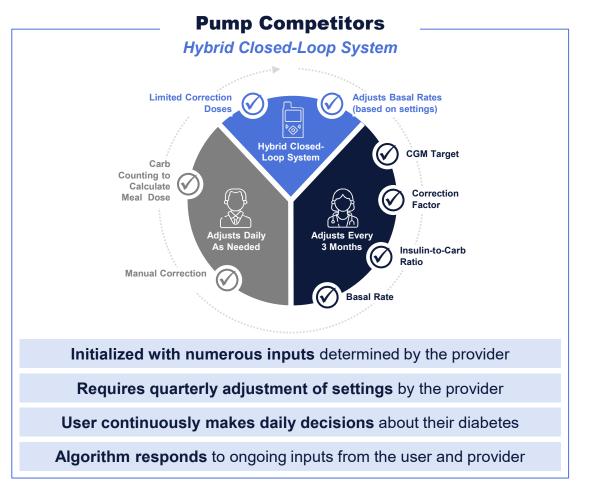
Continuous glucose monitor (CGM). Abbott and Dexcom CGMs are not manufactured or sold by Beta Bionics.

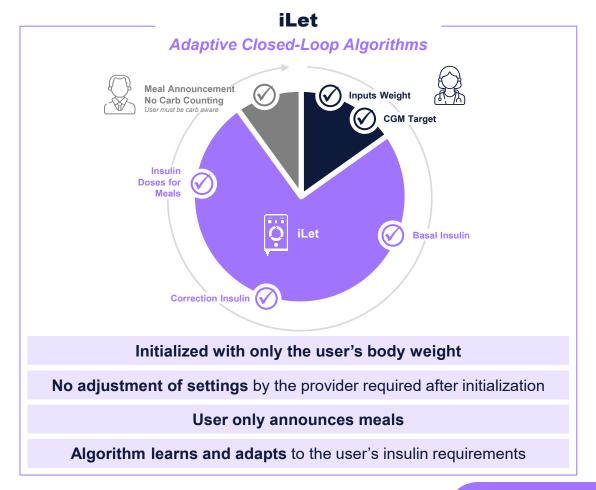
At mealtime, the user makes a simple declaration that an upcoming meal will be within historical norms, "the usual for me," or higher or lower than typical. Russell, S.J., et al. (2022) A Multicenter Randomized Trial of a Bionic Pancreas in Type 1 Diabetes. The New England Journal of Medicine. 387:1161–1172.

Damiano et al. (2024) Glycemic and CGM Outcomes are nearly independent of the frequency of user engagement with the iLet in the Bionic Pancreas Pivotal Trial and

## iLet Redefines the Pump Experience

#### Alleviates the burden of insulin pump setup and management for users and providers





## **Elevated Digital Experience**

#### For our users, their caregivers, and their healthcare providers

#### iLet and iLet App

- Easy-to-use interface
- Firmware over-the-air upgrades
- Automatic data uploads to the cloud
- Compatibility with iOS and Android platforms

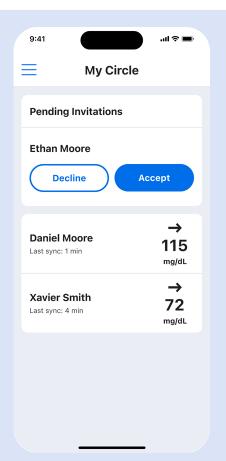
#### **Bionic Circle App**

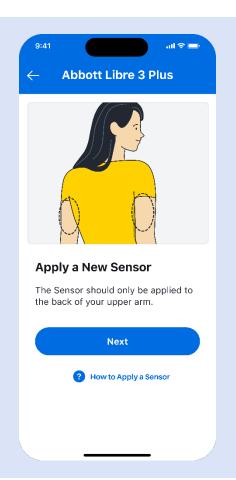
- Remote monitoring experience for family members, friends, and caregivers
- Compatibility with iOS and Android platforms

#### **Bionic Portal & Report**

- Web-based portal for healthcare providers
- Easy-to-understand reports







## **Superior Pivotal Trial Outcomes vs. Standard of Care**

HbA1c % Improvement with iLet <sup>1</sup>		HbA1c % Improvement with SoC¹
- 0.6	All Users	- 0.0
- 0.7	Adults	- 0.1
- 0.6	Children	- 0.0
- 0.9	At least 7% Baseline HbA1c	- 0.1
- 1.0	Multiple Daily Injections (MDI)	- 0.0
- 0.5	Pumps	- 0.0
- 0.3	Hybrid Closed-Loop <sup>2</sup>	- 0.1
	reduction in HbA1c vs. competitive hybrid	d-closed loop systems³

Source: Russell, S.J., et al. (2022) A Multicenter Randomized Trial of a Bionic Pancreas in Type 1 Diabetes. The New England Journal of Medicine. 387:1161–1172., Data on File.

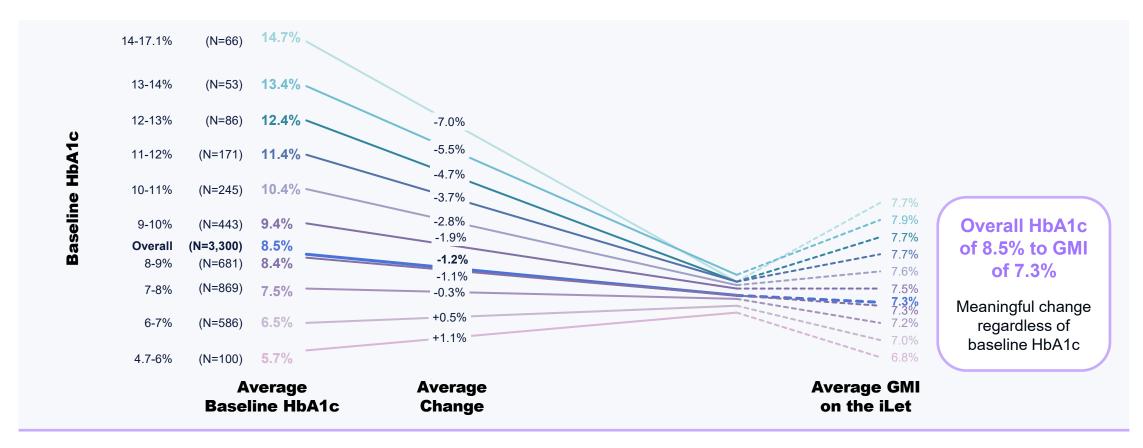
Hybrid-closed loop systems included t:slim X2 with Control-IQ, and MiniMed 670G or 770G

Data reflects percentage point improvements in HbA1c measurements at 13 weeks as compared to baseline. **βetα Bionics** <sup>1</sup>/<sub>3</sub>

Analyses of subgroups represent post hoc analyses of the pivotal trial data. The pivotal trial was not designed to evaluate the effect of the iLet Bionic Pancreas in the listed subgroups.

## **Real World Results Are Consistent with the Pivotal Trial**

Real-world evidence from the first year of iLet usage (May '23 to May '24) among 3,300 users who have baseline HbA1c data and who uploaded data to Beta Bionics' cloud





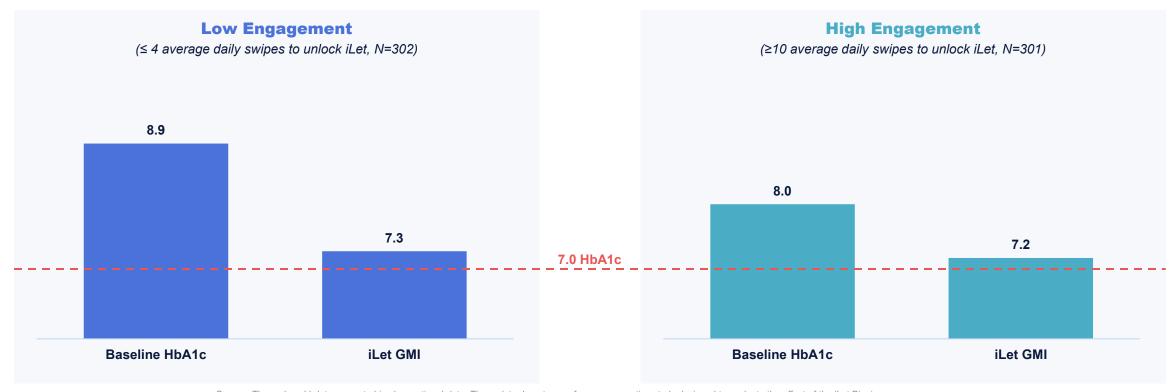
Source: The postmarket surveillance data presented is observational data. These data do not come from a prospective study designed to evaluate the effect of the iLet Bionic Pancreas in subgroups by baseline HbA1c. Real-world data comes from the first year (5/19/2023–5/18/2024) of iLet usage among those people with baseline HbA1c data and who uploaded data to Beta Bionics, Inc., including users who do not meet all criteria in the Indications for Use. Individual user results may vary from the average values shown here.

ote: Glucose Management Indicator (GMI).

## Clinical Results Are Independent of User Engagement

Historically, low engagement with pumps meant poor outcomes – not with iLet

iLet Real-world Data: Change from Baseline HbA1c to Mean GMI by Level of Engagement in Adults (≥ 18 years old)



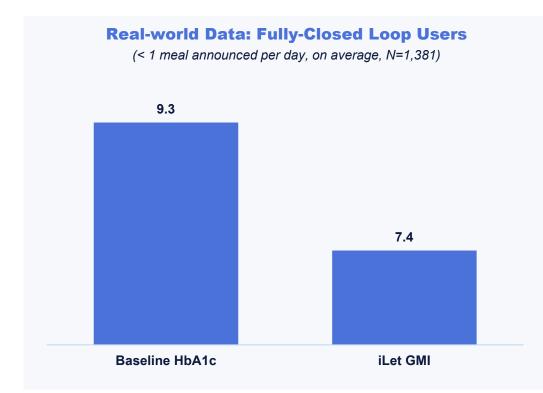


Source: The real-world data presented is observational data. These data do not come from a prospective study designed to evaluate the effect of the iLet Bionic Pancreas in subgroups by baseline HbA1c or user engagement. Real-world data comes from the first year (5/19/2023–5/18/2024) of iLet usage among those people with baseline HbA1c data and who uploaded data to Beta Bionics, Inc., including users who do not meet all criteria in the Indications for Use. Individual user results may vary from the average values shown here.

ote: Glucose Management Indicator (GMI).

## Use of iLet in a "Fully-Closed Loop" Manner

Real-world evidence over the 30-day period ending Mar 18, 2025 among 1,381 users who have baseline HbA1c data, uploaded data to Beta Bionics' cloud, and announce less than one meal per day on average



- Use of iLet in a "fully-closed loop" manner is defined as announcing <1 meal per day on average over the past 30 days
- 15% of iLet users (with available data) met the criteria for using the pump in a "fully-closed loop" manner
- On average, "fully-closed loop" iLet users saw improvement from baseline A1c of 9.3% to a followup GMI of 7.4% despite minimal engagement with the pump



Source: The real-world data presented is observational data. These data do not come from a prospective study designed to evaluate the effect of the iLet Bionic Pancreas' closed-loop safety and efficacy. This real-world data comes from the 30-day period of iLet usage ending on March 18, 2025 among those people with baseline HbA1c data and who uploaded data to Beta Bionics, Inc., including users who do not meet all criteria in the Indications for Use. Individual user results may vary from the average values shown here.

lote: Glucose Management Indicator (GMI).



## **Positioning for success**

## **Expanding our offerings and commercial reach**

#### **Recent Product Launches**



**Bionic Circle App (Sep '24)** 

Remote monitoring experience for family, caregivers, and friends



Color iLet (Oct '24)

Color screen, brighter display, and louder alerts



**Libre 3 Plus Integration (Nov '24)** 

First insulin pump in the U.S. to integrate with Abbott's Freestyle Libre 3 Plus

### **Commercial Expansion**

43
Sales Territories exiting Q4'24

63

Sales Territories exiting Q1'25

## **Providing Flexible Reimbursement**

## iLet is the first durable pump to access the pharmacy channel<sup>1</sup>

	DME (Medical)	Pharmacy			
	Traditional reimbursement channel for durable insulin pumps	Pay-as-you-go model with advantages for users, providers, payors, and Beta Bionics			
Illustrative Economic	cs for User and Payor				
User (out of pocket)					
Upfront cost	~\$500 to ~\$2,000	~\$0 to ~\$100			
Monthly cost	~\$35	~\$25 or less			
Commitment	Typically 4 years	None			
Payor					
Pump	~\$3,500 up front	¢450 / month			
Supplies	~\$70 / month	~\$450 / month			





: The information presented on this slide is for illustrative purposes only and expresses estimated dollar amounts. Durable Medical Equipment (DME).

To our knowledge

## **Pharmacy Pay-As-You-Go Reimbursement Model**

Key advantages for users, healthcare providers, payors, and Beta Bionics



Faster order processing time



Streamlined insurance approval



Less administrative burden for HCPs



Little to no upfront payment



Pay-as-you-go economics



Faster access to prospective users



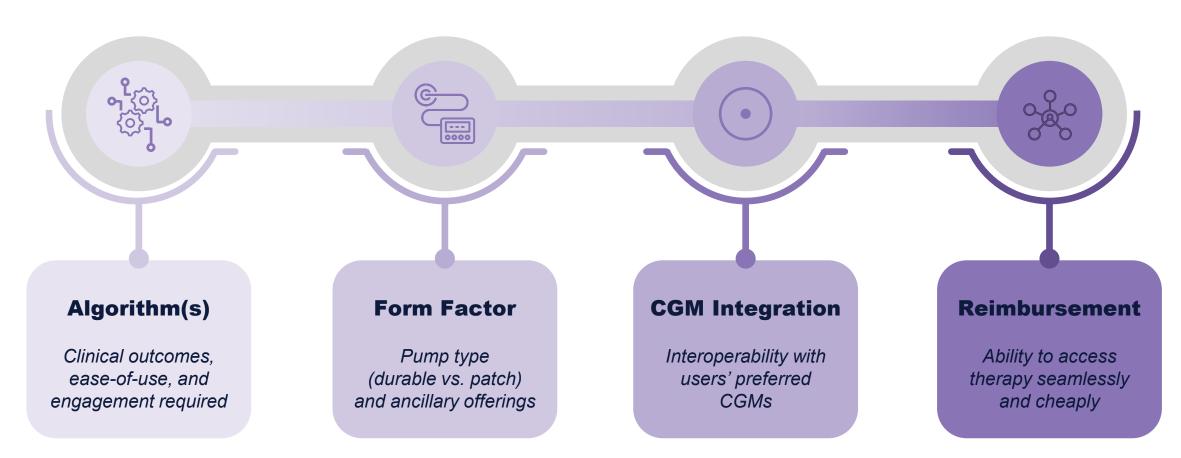
No 4-year pump commitment



Higher customer lifetime value

## Aligning to Users' Decision-Making Framework

What people with diabetes care about when selecting an insulin pump



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## **Positioning iLet for Sustainable Success**

Differentia	tion where it matters				
		iLet Bionic Pancreas <sup>1</sup>	Tubeless Hybrid Closed-loop System	Tubed Hybrid Closed- loop System	Smart Insulin Pens
User Decision-Ma	king Framework	βetα βionics	Insulet <sup>2</sup>	Medtronic and Tandem <sup>3,4</sup>	Multiple
2 (5)	Algorithm(s) Initialized with only body weight	✓	×	×	×
والمراقع	Algorithm(s) determines 100% of insulin doses	✓	×	×	×
Algorithm(s)	No carb counting <sup>5</sup>	✓	×	×	×
	Tubed / Durable pump	✓	×	✓	×
5000	Prefilled cartridges	✓	×	×	×
Form Factor	Patch pump	(expected commercialization by end of 2027) <sup>6</sup>	✓	×	×
	Dexcom G6 & G7	✓	✓	√ (Tandem only)	×
CGM Integration	Abbott Freestyle Libre 3 Plus	✓	×	×	×
	DME (medical) channel	✓	×	✓	×
Reimbursement	Pay-as-you-go pharmacy channel	✓	✓	×	✓

Note: Continuous Glucose Monitor (CGM), Durable medical equipment (DME).

. Insulet. Omnipod 5 User Guide. 2022.

**Beta Bionics** 

Beta Bionics. iLet Bionic Pancreas User Guide. 2022.

Medtronic. MiniMed 780g System User Guide. 2020.

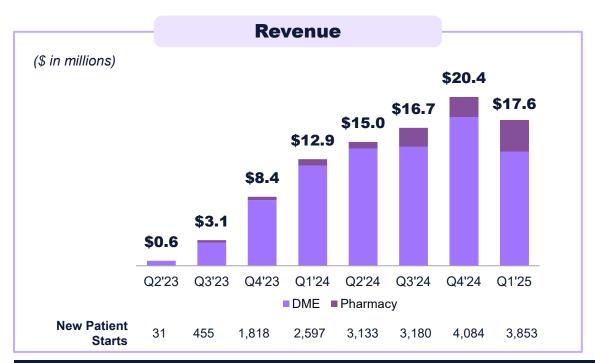
Tandem Diabetes Care. t:slimx2 Insulin Pump with Control IQ Technology User Guide. 2023.

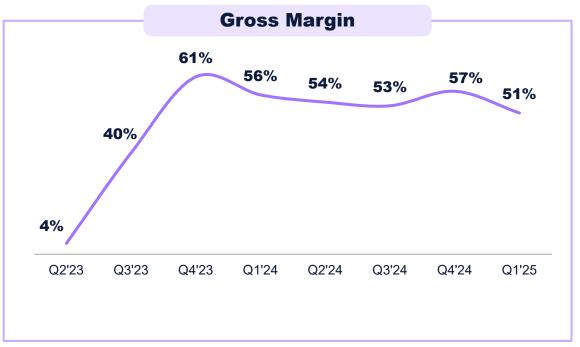
<sup>5.</sup> User must be carb aware.

Subject to regulatory approval

## **Delivering a Highly Successful Commercial Launch**

Launched in May 2023, iLet is expanding the pump market and taking market share





Low 20s%

New patient starts reimbursed through pharmacy in Q1'25

~71%

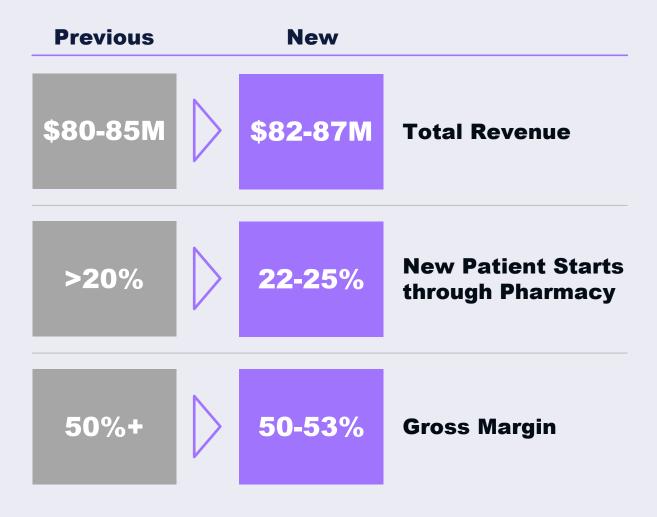
New patient starts coming from multiple daily injections in Q1'25





## Where we are going next

## **Full Year 2025 Guidance**



#### **Assumptions & Drivers**

- iLet continues to generate robust demand, driving pump market expansion and taking market share
- Stable utilization and retention rates in DME and pharmacy channel
- Expanded to 63 sales territories exiting Q1'25
- Execution of additional formulary agreements and deeper adoption of iLet at the individual health plan level to drive increases in pharmacy coverage
  - Recent Prime Therapeutics formulary agreement is contemplated in guidance
- Continued cost discipline and improved leverage of manufacturing overhead at greater scale

## **Patch Pump in Development**

### Being developed for commercialization by the end of 2027<sup>1</sup>

#### Reusable and disposable two-part design in development

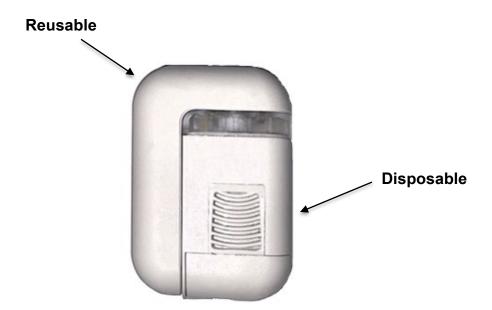
- 2-year reusable electronics
- 3-day disposable patch with 200U reservoir and 4.5mm cannula

#### **Expected user experience advantages**

- Intended to utilize the same adaptive closed-loop algorithm as the iLet
- Simple 4-step process to change a patch, no phone required

#### **Potential business advantages**

- Expands addressable market to people with diabetes that prefer a patch
- Reimbursed exclusively through the pharmacy channel
- Manufacturing cost advantages relative to a fully disposable patch design
- No clinical trial expected to be required to obtain 510(k) approval for an Alternate Controller Enabled (ACE) infusion pump



## **Bihormonal Pump in Development**

#### Potential to revolutionize diabetes care

#### First-of-its-kind bihormonal configuration of the iLet

- Intended to utilize adaptive closed-loop algorithms that autonomously determine and deliver 100% of all insulin and glucagon doses
- Exclusive collaboration and license agreement with Xeris Pharmaceuticals for a pumpcompatible, shelf-stable, glucagon formulation utilizing Xerisol technology

#### **Clear path to market**

 Beta Bionics plans to initiate at least one pre-pivotal clinical trial and a pivotal clinical trial before submitting the device and algorithm to the FDA for 510(k) clearance as well as submitting a new drug application (NDA) seeking approval for the glucagon for chronic use

#### Potentially transformative treatment outcomes and burden reduction

- In 6 pre-pivotal outpatient clinical trials, participants utilizing our bihormonal configuration achieved reduced hypoglycemia and increased time in range relative to both standard-of-care treatment and our insulin-only bionic pancreas configuration<sup>1,2,3,4,5</sup>
- Potential to substantially reduce fear of hypoglycemia and regimen burden which could lead to reduction in the challenges associated with diabetes management<sup>6,7</sup>



- 1. Russell et al. (2014) New England Journal of Medicine, 371:313-325
- 2. Russell et al. (2016) The Lancet Diabetes and Endocrinology, 4:233-243
- . El-Khatib et al. (2017) The Lancet, 389:369-380
- 4. Balliro et al. (2017) 77th Scientific Sessions of the American Diabetes Association, 1062-P
- 5. Sherwood et al. (2018) 78th Scientific Sessions of the American Diabetes Association, 299-OR
- Weissberg-Benchell et al. (2017) Diabetes Technology & Therapeutics, 12: 723-729
- 7. Weissberg-Benchell et al. (2016) Journal of Diabetes Science & Technology 4: 840-4



Infusion Set Infusion Set

Glucagon

Insulin

## **Expansion in Primary Care & Type 2 Diabetes**

Largely untapped segments of the diabetes market that iLet may be uniquely positioned to address

Primary Care



~50%

Of the 1.9M people with T1D in the U.S. are treated by PCPs



~90%

Of people with T2D in the U.S. are treated by PCPs



<10%

Pump penetration in primary care in the U.S.

Type 2
Diabetes
(IIT)<sup>1</sup>



**1.9M** 

People with T2D in the U.S. who require intensive insulin (IIT)



<0.2M

People with T2D IIT in the U.S. use an insulin pump



<10%

Pump penetration in T2D IIT population in the U.S.

#### **Our Ability to Win**

- iLet's combination of simplicity and efficacy may be particularly appealing to people with T2D as well as PCPs
- Training and initiation of iLet by PCPs results in similar glycemic outcomes relative to usual care<sup>1</sup>

#### **Our Approach**

- **Pharmacy reimbursement** reduces administrative burden for PCPs and streamlines the approval process for people with T2D
- Execute a clinical trial to assess iLet's performance in the T2D population and pursue FDA approval
- Change institution-level protocols that drive PCP prescribing patterns at the clinic level

**Beta Bionics** 

## **Strategic Outlook**

#### Innovating for today and the future

#### Lay the Foundation 2023 to 2024 Achievements

- iLet launch (Black & White)
- CGM integrations (Dexcom G6 & G7, Abbott Freestyle Libre 3 Plus)
- Formulary agreements (e.g., Express Scripts & CVS Caremark)
- Collaboration and licensing agreement with Xeris Pharmaceuticals
- Color iLet launch
- Expansion to 43 sales territories

### **Execute Relentlessly** 2025 Objectives

- Capitalize on recent launches (Color iLet, Libre 3 Plus, Bionic Circle)
- Expansion to 63 sales territories in Q1
- Additional formulary agreements (e.g., Prime Therapeutics)
- Growth of pharmacy coverage at the individual health plan level
- Advancing patch pump and bi-hormonal pump R&D projects

#### **Revolutionize Care**

#### **Future Objectives**

- Patch pump commercialization<sup>1</sup>
- Bi-hormonal pump commercialization<sup>1</sup>
- Expansion of sales territories
- Growth of pharmacy channel mix
- Market and indication expansion
  - Primary care
  - Type 2 insulin-intensive Diabetes<sup>1</sup>
  - International markets<sup>1</sup>
  - Other insulin-requiring diseases1









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## Appendix



## **Quarterly Financial Performance**

(\$ in millions)	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
Installed Base <sup>1</sup>	0	31	486	2,304	4,901	8,034	11,214	15,298	19,151
New Patient Starts	0	31	455	1,818	2,597	3,133	3,180	4,084	3,853
% of New Patient Starts from MDI	0%	9%	38%	55%	64%	69%	69%	70%	71%
Net Sales	\$0.0	\$0.6	\$3.1	\$8.4	\$12.9	\$15.0	\$16.7	\$20.4	\$17.6
Gross Profit	\$0.0	\$0.0	\$1.2	\$5.1	\$7.2	\$8.1	\$8.9	\$11.7	\$9.0
% Margin	0%	4%	40%	61%	56%	54%	53%	57%	51%
Total Operating Expenses	\$9.7	\$9.0	\$10.0	\$13.4	\$16.7	\$19.9	\$19.9	\$24.7	\$27.6
Adjusted EBITDA <sup>2</sup>	(\$8.1)	(\$7.1)	(\$7.2)	(\$6.6)	(\$7.8)	(\$10.0)	(\$8.7)	(\$11.3)	(\$15.5)
Net Loss	(\$9.6)	(\$7.0)	(\$8.7)	(\$18.8)	(\$12.4)	(\$14.5)	(\$9.7)	(\$18.1)	(\$28.7)



<sup>.</sup> Defined as rolling four-year new patient starts.

Adjusted EBITDA addbacks include stock-based compensation expense, depreciation and amortization expense, interest income, provision for state taxes and change in fair value of warrant liabilities.

## **Reconciliation from Non-GAAP to GAAP Financials**

(\$ in millions)	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024	Q1 2025
Adjusted EBITDA <sup>1</sup>	(\$8.1)	(\$7.1)	(\$7.2)	(\$6.6)	(\$7.8)	(\$10.0)	(\$8.7)	(\$11.3)	(\$15.5)
Stock-Based Compensation Expense	(1.2)	(1.6)	(1.3)	(1.6)	(1.4)	(1.5)	(2.0)	(1.6)	(2.8)
Change in Fair Value of Warrant Liabilities	0.0	2.0	(0.3)	(11.7)	(4.1)	(3.7)	0.4	(6.0)	(12.5)
Depreciation and Amortization Expense	(0.3)	(0.3)	(0.3)	(0.3)	(0.3)	(0.3)	(0.3)	(0.2)	(0.3)
Interest Income	0.1	0.1	0.4	1.3	1.1	1.0	0.8	1.0	2.4
Provision for State Taxes	0.0	(0.0)	0.0	0.0	0.0	(0.0)	0.0	0.0	0.0
Net Loss	(\$9.6)	(\$7.0)	(\$8.7)	(\$18.8)	(\$12.4)	(\$14.5)	(\$9.7)	(\$18.1)	(\$28.7)

