



Investor Presentation

August 2022



DISCLAIMER & FORWARD-LOOKING STATEMENTS

This presentation contains forward-looking statements within the meaning of the Private Securities litigation Reform Act of 1995. Statements in this presentation that are not statements of historical fact are considered forward-looking statements, which are usually identified by the use of words such as “anticipates,” “believes,” “continues,” “could,” “estimates,” “expects,” “intends,” “may,” “plans,” “potential,” “predicts,” “projects,” “seeks,” “should,” “will,” “forecast,” “budget,” and variations of such words or similar expressions. Statements of past performance, efforts or results, about which inferences or assumptions may be made, can also be forward-looking statements and are not indicative of future performance or results. Forward-looking statements are neither forecasts, promises nor guarantees, and are based on the current beliefs of the RxSight, Inc. (“RxSight,” “we” or “us”) management as well as assumptions made by and information currently available to RxSight. Such statements reflect the current views of RxSight with respect to future events and are subject to known and unknown risks, including business, regulatory, economic and competitive risks, uncertainties, contingencies and assumptions about RxSight, including, without limitation, (i) projections regarding the future volume of cataract surgical procedures and related revenue and the role of premium IOLs therein, (ii) estimates of RxSight’s addressable market opportunity and related growth, in the U.S. and globally, (iii) the efficacy of RxSight’s mechanisms and procedures, (iv) the performance of other premium and conventional IOLs compared to RxSight’s, (v) the number of patients eligible for LAL procedures, (vi) revenues associated with LAL procedures and the premium IOL market, (vii) statements regarding our future financial or business performance, (viii) the timing and success of our development and commercialization of our products, (ix) the continued acceptance of our products in the marketplace and (x) the impact of COVID-19, including currently known and unknown variants, on the premium IOL market, RxSight’s business and the demand for our products.

This presentation contains estimates, projections and other information concerning our business, our industry and the markets for our products, including data regarding the estimated size of such markets and the incidence of certain medical conditions. We obtained the industry, market and similar data set forth in this prospectus from our internal estimates and research and from academic and industry research, publications, surveys and studies conducted by third parties, including governmental agencies. In some cases, we do not expressly refer to the sources from which this data is derived. Information that is based on estimates, forecasts, projections, market research or similar methodologies is subject to risks, uncertainties and actual events or circumstances may differ materially from events and circumstances that are assumed in this information.

More details about these and other risks that may impact RxSight’s business are described under the heading “Risk Factors” in Part II, Item 1A of RxSight’s Quarterly Report on Form 10-Q filed with the U.S. Securities and Exchange Commission (“SEC”) on August 8, 2022, and in subsequent filings with the SEC, which are available on the SEC’s website at www.sec.gov. RxSight cautions you not to place undue reliance on any forward-looking statement, which speaks only as of the date hereof. RxSight does not undertake any duty to update any forward-looking statement or other information in this presentation, except to the extent required by law.

Who we are

We believe every cataract patient deserves the highest quality vision

Customized, LASIK-like vision without compromises

Better medicine, better business value proposition

Well-positioned in high-growth, private-pay market

Expert team building efficient razor-razorblade growth engine



The first and only **adjustable** intraocular lens

Our proprietary Light Adjustable Lens is unlike any other premium IOL on the market today.

CUSTOMIZATION

Our Light Adjustable Lens system allows surgeons to precisely adjust each patient's refractive correction to meet their individual lifestyle needs.

NO COMPROMISE

Our technology provides patients superior, LASIK-like vision without the compromises often associated with other premium IOLs.

EXCELLENT, RELIABLE OUTCOMES

With our proprietary system, surgeons can reliably achieve excellent refractive outcomes and high patient satisfaction across a wide range of vision preferences, while also growing practice revenue.

The basics

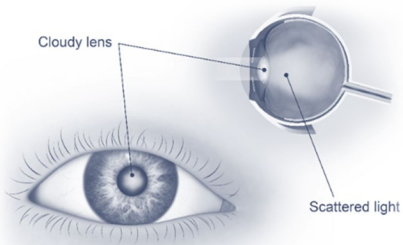
Understanding cataract surgery

Half of those 60 and over have cataract¹

80% of the time both eyes are affected¹

Most common global surgical procedure²

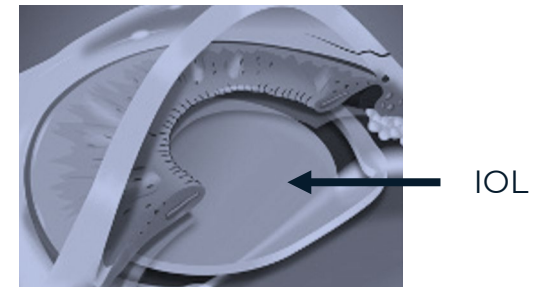
Cataractous Natural Lens



Natural Lens Removal





Replacement with intraocular lens (IOL)



1. Hashemi, H., et al. (2020). Global and regional prevalence of age-related cataract: a comprehensive systematic review and meta-analysis. Eye. doi:10.1038/s41433-020-0806-3
2. Market Scope 2020 IOL Report, May 2020

A consequential decision

Patients elect to have either a conventional or premium IOL

 Conventional	 Premium
Replaces spherical power of natural lens only, improving distance vision	Designed to reduce astigmatism and/or presbyopia
Patients usually still need glasses for intermediate and near vision after surgery	Potential for reduced dependence on glasses after surgery
Procedure is covered by Medicare; surgeon receives ~\$500 fee from CMS for procedure, pre- and post-op care	Procedure is covered by Medicare; surgeon receives ~\$500 fee from CMS for procedure, pre- and post-op care
	Patient pays an additional out-of-pocket fee to the practice, ranging from \$1500–\$6500 ¹

1. Market Scope 2021 IOL Report, April 2021

The market opportunity

U.S. premium IOL market growing at 11% CAGR to \$1.2B by 2027¹

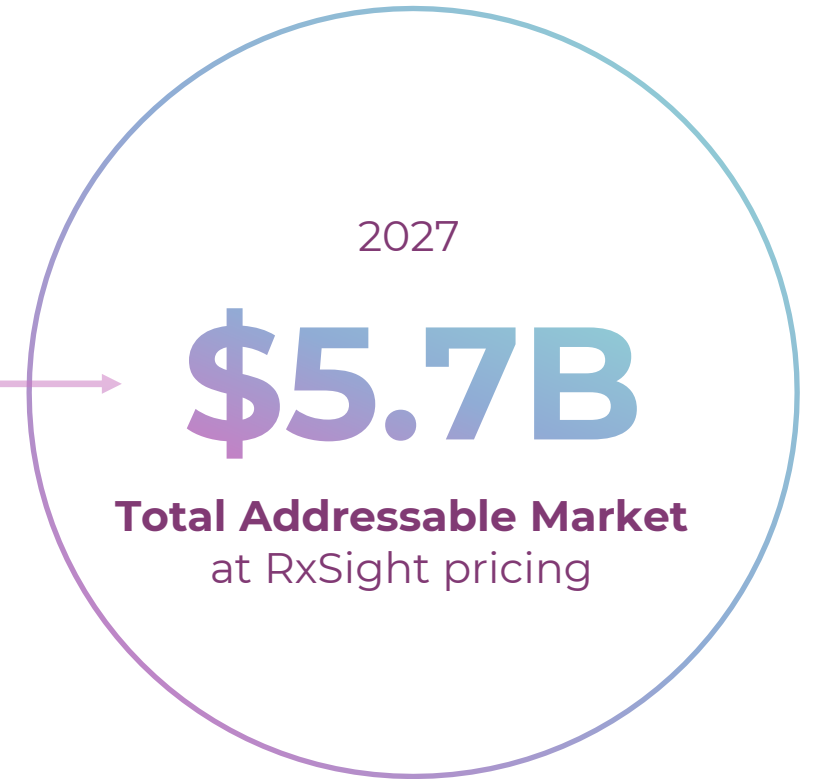
Cataract procedures worldwide

2022	→	2027
~30M		38M

Premium IOL procedures worldwide

2022	→	2027
3.5M		5.7M

60% projected growth in volume | 80% projected growth in dollars



Aging population



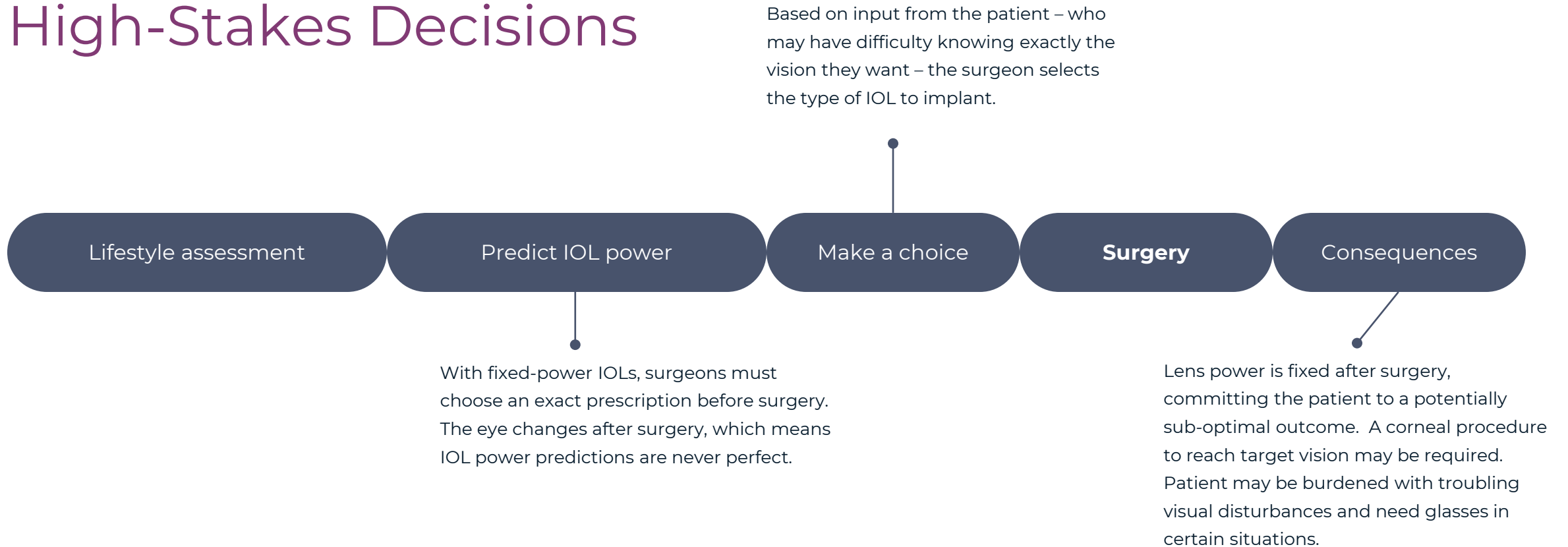
Increased access

Market drivers

1. Market Scope. Market Scope 2022 IOL Report April 2022

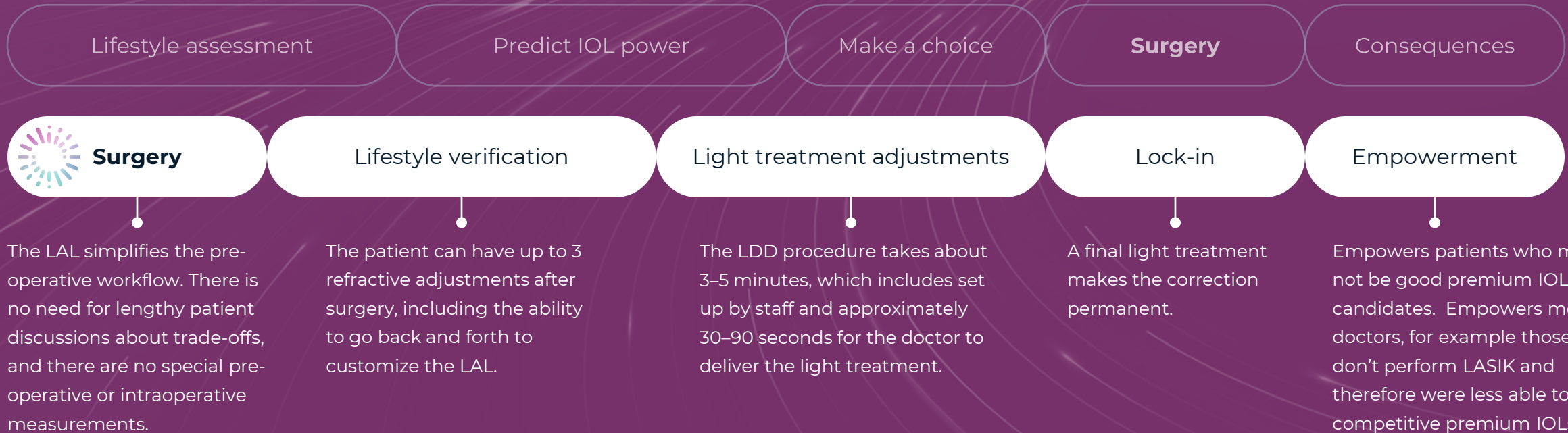
Patients choose a prescription before surgery

Fixed Lenses High-Stakes Decisions



LAL patients test drive their vision after cataract surgery

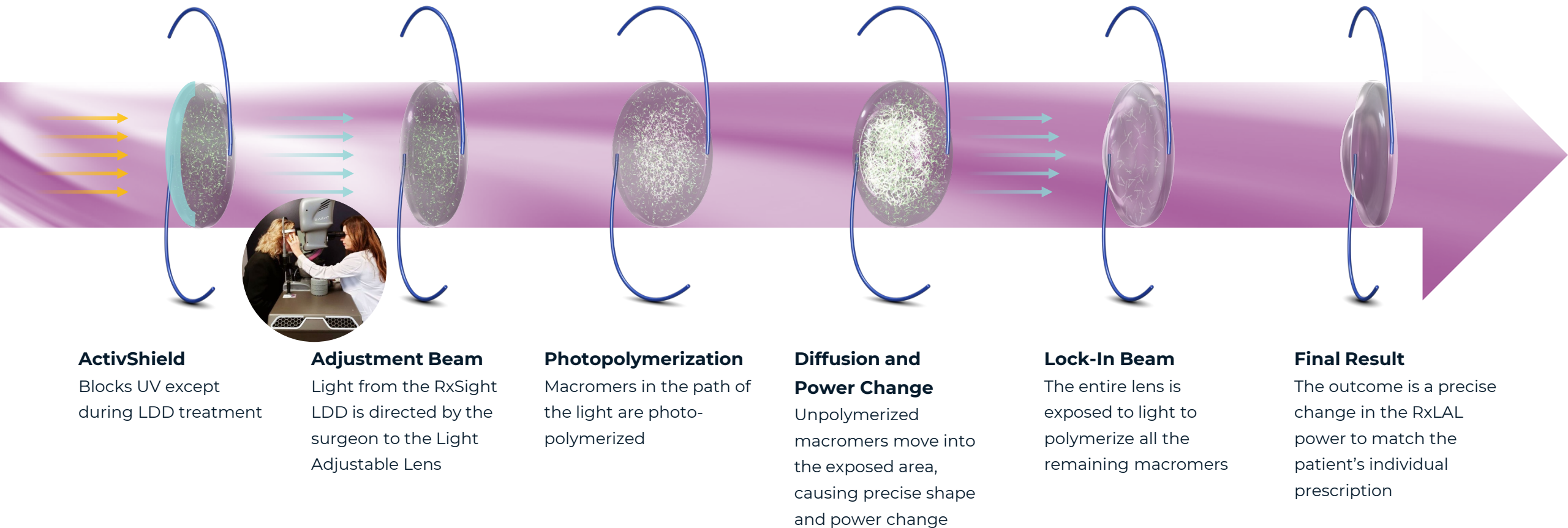
Light Adjustable Lens LASIK-Level Precision¹



1. Sandoval HP, Donnenfeld ED, Kohnen T, et al. Modern laser in situ keratomileusis outcomes. J Cataract Refract Surg. 2016;42(8):1224-1234.

The technology

How the LAL adjusts to fit each patient's individual visual needs and preferences



Better medicine, better business

Superior clinical performance increases doctor confidence and patient satisfaction

Each eye separately

70% of patients

Achieved 20/20 vision or better without glasses¹

~2X more

eyes with 20/20 vision or better without glasses¹⁻³

~6x fewer

eyes with 20/32 vision or worse without glasses¹⁻³

Actual refraction

Treatment based on actual refraction after surgery, not prediction before surgery

Patient-focused

Patients are actively involved in their refractive correction after surgery, when they are in the best position to evaluate, appreciate and direct their optimal outcome

Precise correction

Corrects in 0.25D increments, twice as precise as other premium IOLs¹; corrects to 0.5D of astigmatism while other premium IOLs show no benefit below 1.0D^{2,3}

No compromises

Unique design of our technology means LAL patients don't experience increases in glare, halos or loss of contrast.



1. RxSight P160055: FDA Summary of Safety and Effectiveness Data.

2. Tecnis® Toric PMA P980040/S039: FDA Summary of Safety and Effectiveness Data. 2013.

3. AcrySof® Toric P930014/S15: FDA Summary of Safety and Effectiveness Data. 2011.

Better medicine, better business

Real world data¹ validates performance and reliability of LAL

82.4 %

In the initial readout of 51 patients, **82.4% achieved 20/20 distance** visual acuity¹

92.2 %

of LAL eyes in the study were **within 0.5D of sphere**¹

94.1 %

were **within 0.5D of cylinder**¹

Approximately 75%

of the study's patients **elected to customize their vision in both eyes** for optimal binocular vision across a range of distances.²

We are collaborating with more than **80** RxSight practices to collect and share a wealth of useful clinical data stored on practice LDDs.

RxSight is the only cataract company that can readily build and maintain a large-scale, real-time clinical database.



These statistics show the excellent precision and accuracy to targets that our LALs provide.

1. Solomon, K. Visual outcomes by patients bilaterally implanted with the Light Adjustable Lens. ASCRS 2022
2. Data on file at the Company

Better medicine, better business

LAL is well-suited for successful blended vision and most patients choose this approach

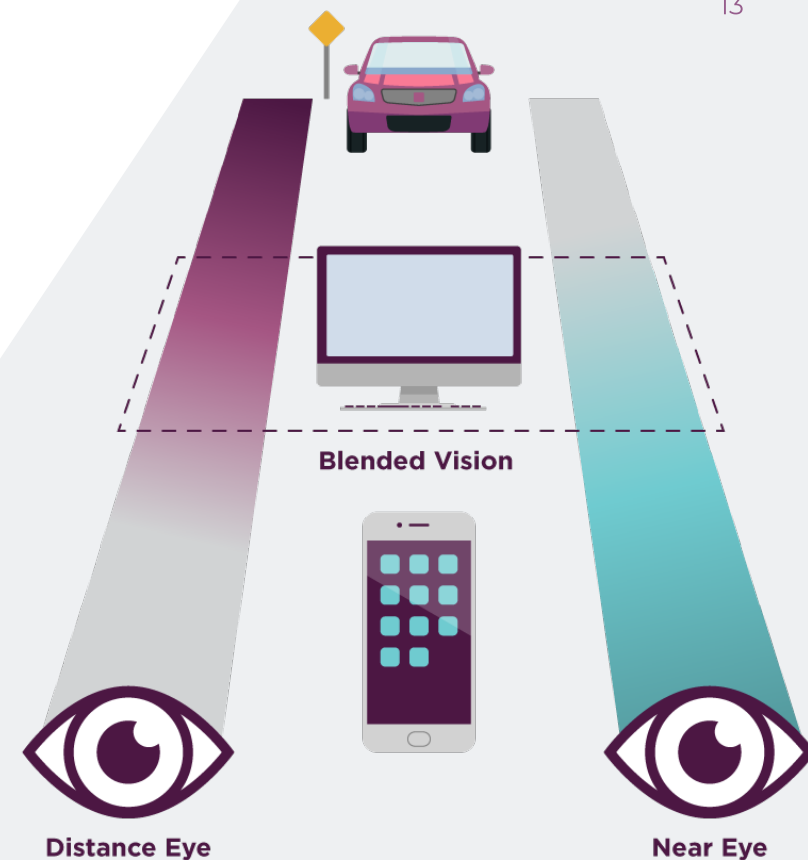
Both eyes together

80% of patients

can achieve 20/20 vision at all distances without glasses¹

~2X more

patients with 20/20 vision or better without glasses
at all distances^{3,4}



Verification

Doctors adjust refractive goal during course of treatment in >50% of eyes¹

Better performance than monovision

Broadened depth of focus² delivers more dependable blended vision results than is typically achieved using monofocal IOLs with different corrections in each eye

1. RxSight Data on File
2. Chayet, A. Single Center Study (Data on File)

3. Newsom, AAO 2021 presentation on file
4. Panoptix SSER (P040020/S087)

Our US commercial growth strategy



LDD

Light Delivery Device

- Sold to practice for ~\$125,000
- Financing programs from \$1000 to \$2800/month



LAL

Light Adjustable Lens

- Like all premium IOLs, LAL consigned to ASC
- \$1000 billed to practice at time of use

Leveraging our unique system to penetrate and expand U.S. premium IOL market

U.S. is world's largest single premium IOL market¹; concentrated distribution channel helps to facilitate efficient LDD sales process and recurring, high-margin LAL revenue stream

Suitable for widest possible range of patient types and preferences; postoperative customization and ability to test drive vision are compelling patient selling points

Superior performance attracts doctors who refrained from offering premium IOLs in the past or reduced utilization due to persistent side effects, need for LASIK touch-ups and uneven patient satisfaction

Evolved practice workflow leverages extenders, including ODs, technicians, staff

1. Market Scope 2021 IOL Report, April 2021



Nearly every patient can be upgraded to the LAL

RxSight Economic Impact Study by Haffey & Company

Powerful practice economics validate our *better medicine, better business* value proposition

Surveyed Practice Results¹

\$1,623

Average net revenue increase per LAL case²

\$360K

Average net revenue increase per year³

5 months

Mean time to pay off LDD³

Average Premium Cataract Surgery Practice Results²

\$1,230

Average net revenue increase per LAL case⁴

\$89K

Average net revenue increase per year⁵

17 months

Mean time to pay off LDD⁵

1. Survey of 15 RxSight customers installed for 4 to 23 months
2. Based on practice estimated conversion of monofocal, toric and presbyopia correcting IOLs and \$125,000 LDD purchase price

3. Based on average of 16 LALs implanted per month in practices with ≥.6 months commercial history
4. Based on average pricing of monofocal, toric and presbyopia correcting IOLs as reported by MarketScope 2021 IOL report
5. Based on average 6 implants per month (3 bilateral patients) and \$125,000 LDD purchase price

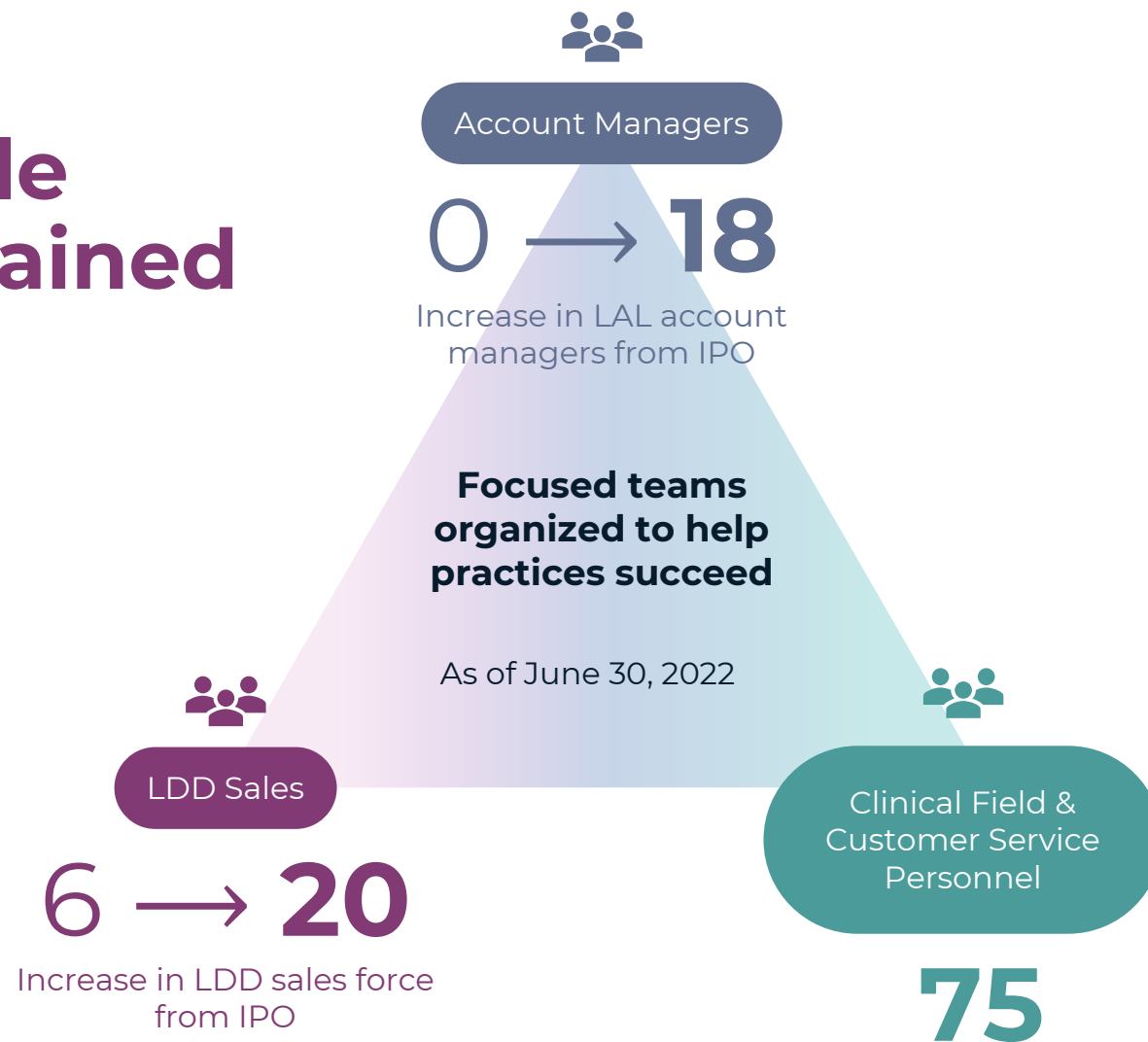
Our US commercial growth strategy

Building a large and durable installed base to drive sustained LAL procedure growth

LDD sales professionals focused on 3,000 doctors who perform approximately 70–80% of premium cataract procedures

Clinical, field and customer service personnel train and prepare practices to offer LAL to patients

Account managers provide high-touch customer support to build LAL adoption within the practice



Our leadership

RxSight leadership team possesses deep experience in ophthalmic private-pay market innovation



Acquired by Bausch & Lomb | 1997

LASIK



IPO 2004 | Acquired by AMO | 2007

All Laser LASIK



Acquired by Bausch & Lomb | 2008

Premium IOLs

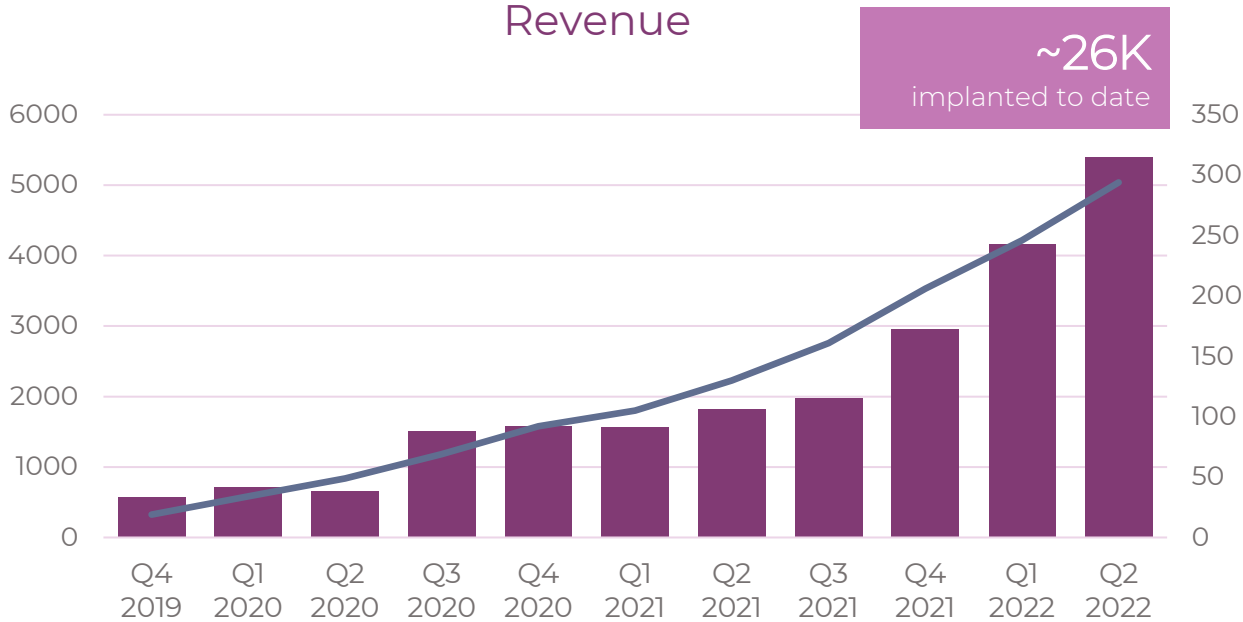
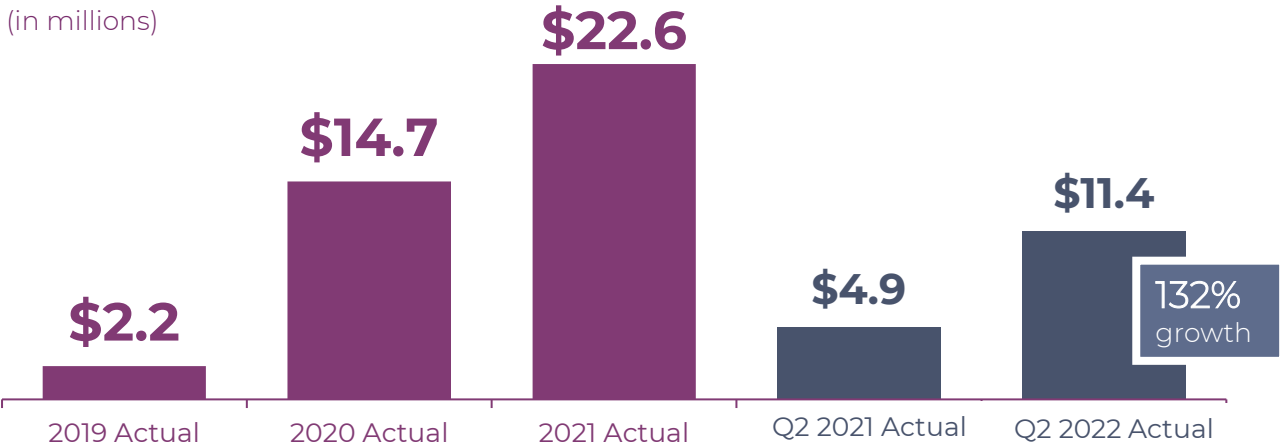
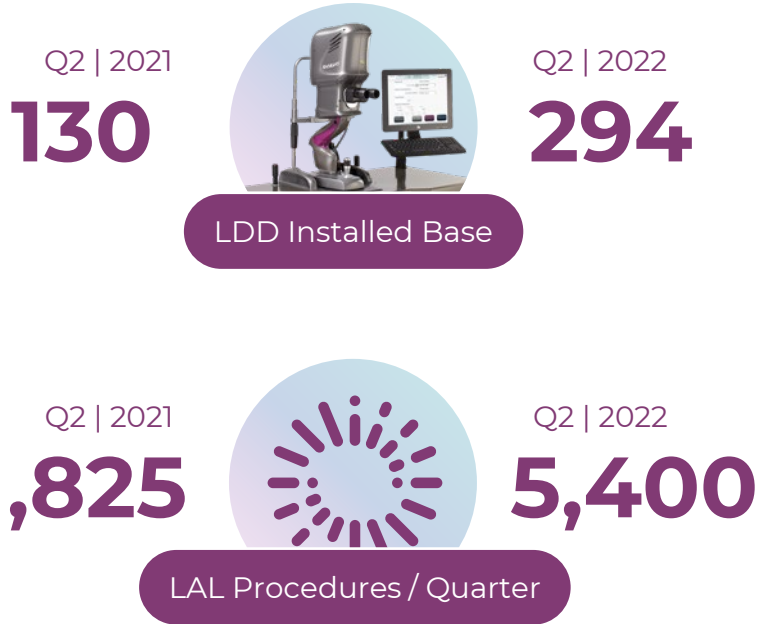


Acquired by Alcon | 2010

Laser Cataract Surgery

The metrics

Our performance reveals promising adoption trends



Quarterly Installed Base & Procedure Trend

The future

Longer-term growth drivers

Technology advancements

Penetrate large U.S. premium cataract market

International expansion





Well-positioned to expand and lead the fast-growing premium IOL market

Customized, LASIK-quality vision across a range of distances — and without compromise — meets exacting expectations of premium cataract patients

Reliably superior visual outcomes and expanded premium patient pool help more practices grow revenue and profits

Durable installed base drives sustained, long-term procedure growth and expands margins





NASDAQ: RXST

