

INVESTOR PRESENTATION NOVEMBER 2024

Paul R. Gudonis, Chairman and CEO
David Henry, CFO

Conquering Upper Limb
Paralysis with Wearable
Medical Robotics

myomo
my own motion



Legal Disclaimer

This presentation contains forward-looking statements regarding the trading of the Company's common stock on the NYSE American, the Company's plans for the use of proceeds and advancing its product line, increasing its sales and marketing efforts and growing its business, the Company's financial position and projections of future operating results, and the Company's future business expectations, which are based upon the current estimates, assumptions and expectations of the Company's management and its knowledge of the relevant market. The Company has tried, where possible, to identify such information and statements by using words such as "anticipate," "believe," "envision," "estimate," "expect," "intend," "may," "plan," "predict," "project," "target," "potential," "will," "would," "could," "should," "continue," "contemplate" and other similar expressions and derivations thereof in connection with any discussion of future events, trends or prospects or future operating or financial performance, although not all forward-looking statements contain these identifying words. Forward-looking statements, which are included in accordance with the safe harbor provisions of the Private Securities Litigation Reform Act of 1995, are only predictions and may differ materially from actual results due to a variety of risks, uncertainties and other factors. These risks and uncertainties include, among others, risks related to the Company's liquidity and financial position, the trading of its common stock, its new products, services, and technologies, government regulation and taxation, and fraud. More information about factors that potentially could affect Myomo's business and financial results are included in the Company's Annual Report on Form 10-K and Quarterly Reports on Form 10-Q. The Company cautions readers not to place undue reliance on any such forward-looking statements, which speak only as of the date made. The Company disclaims any obligation subsequently to revise any forward-looking statements to reflect events or circumstances after the date of such statements or to reflect the occurrence of anticipated or unanticipated events.

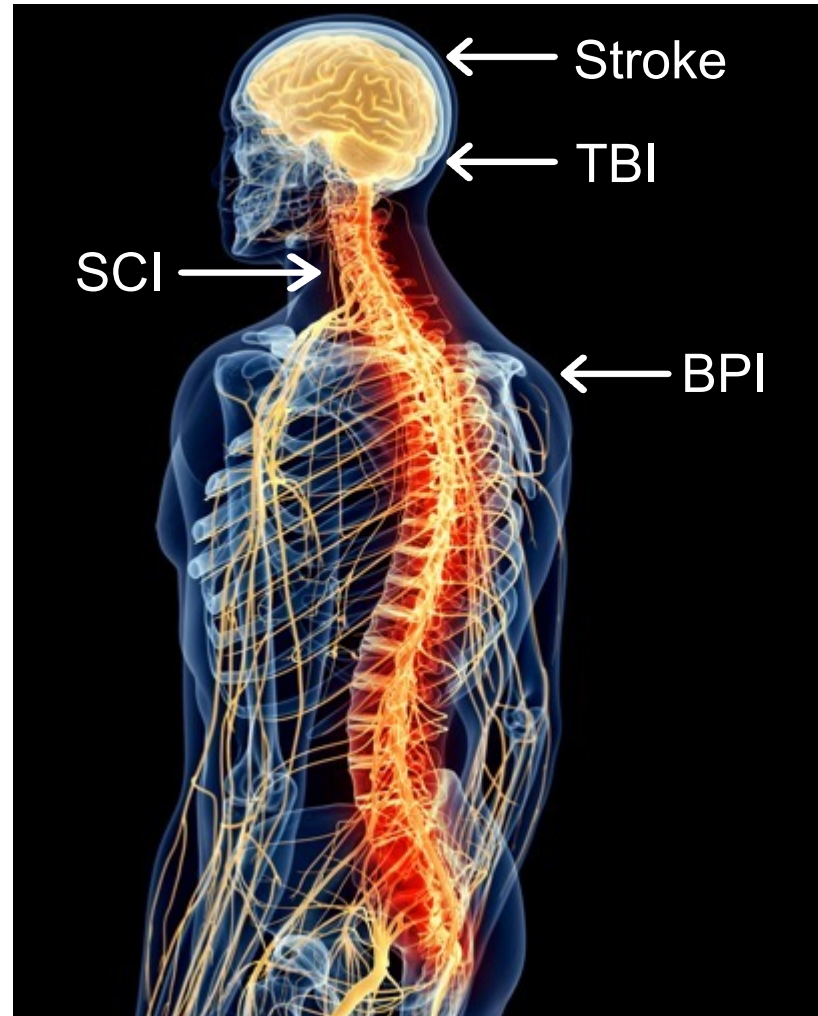
**It's a new world for
people suffering
from upper
extremity
impairment**



Causes of Arm and Hand Paralysis: Stroke, Nerve Injury, or Disease

Major Dx

- Stroke/CVA
- Traumatic Brain Injury
- Spinal Cord Injury
- Brachial Plexus Injury



Other Dx

- Cerebral Palsy
- Multiple Sclerosis
- ALS
- Spinal Muscular Atrophy
- Acute Flaccid Myelitis

Myomo Addresses an Unmet Need that Existing Upper Extremity Treatments Don't

Current Treatment Options

Rehabilitation:

- Occupational therapy
- Static bracing
- Saebo
- Electrical stimulation (Bioness)
- Stationary robotics



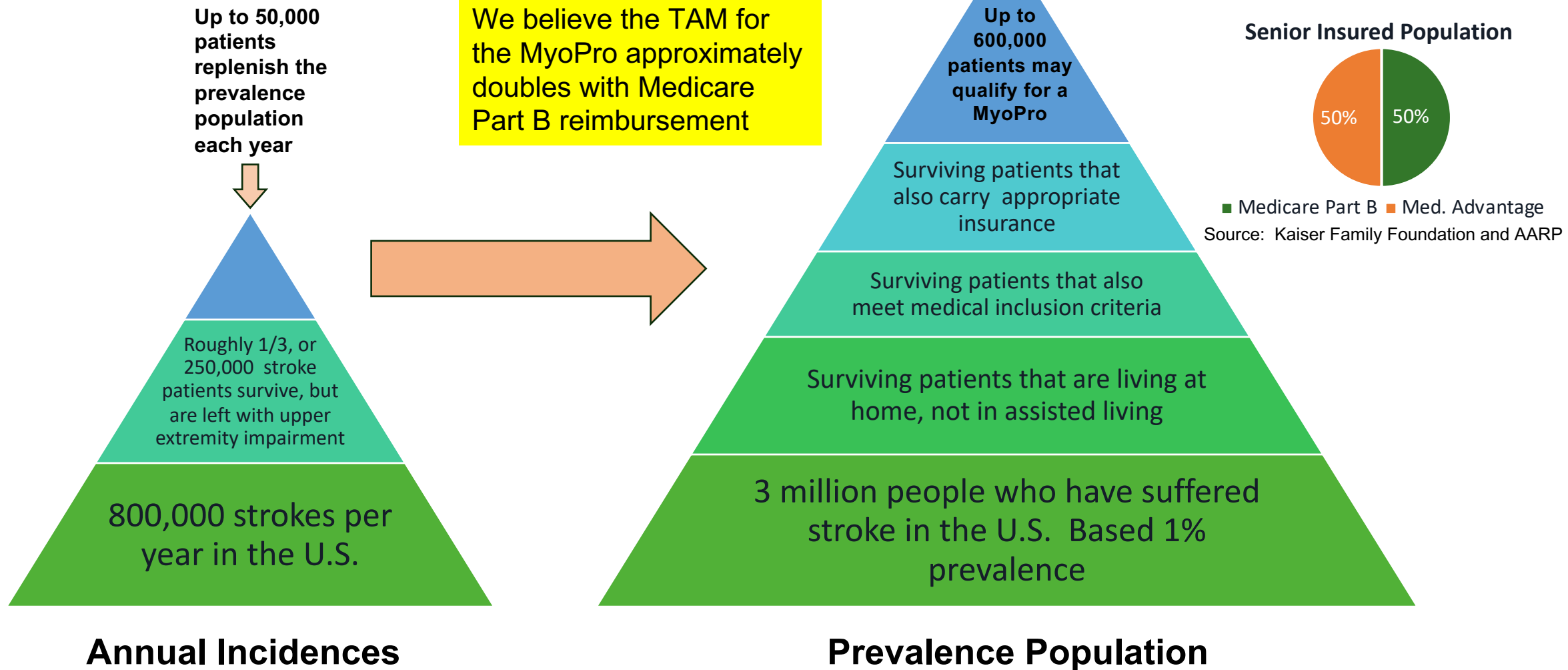
Medical:

- Botox
- Baclofen



The Medical Need:
A lightweight, portable
device to restore
function for use at
home, work, and
school

Substantial Market Opportunity



Source: Christopher and Dana Reeve Foundation Survey, National Stroke Association, World Health Organization, and Myomo base model estimates

Clarity on Reimbursement

HCPCS Codes L8701, L8702 for MyoPro

- Issued January 2019
- As of January 1, 2024, these codes are in the brace benefit category, meaning lump sum reimbursement
- Effective April 1, 2024, the published fees for our HCPCS codes:
 - L8701 (Motion W) - \$33,481
 - L8702 (Motion G) - \$65,872

Many Medicare Advantage Plans Reimburse for the MyoPro on a Case-by-Case Basis

- Must be medically necessary
- With posting of Medicare fee, will begin filing claims with payers that we avoided due to refusal to reimburse
- Working to obtain payer contracts

Nearly 130 VA medical centers have ordered MyoPros



BlueCross BlueShield



Humana®



U.S. Department
of Veterans Affairs

Reimbursement Status: International Markets

Germany: Reimbursement for the MyoPro is on a case-by-case basis, with insurance companies often paying for a six-month trial to demonstrate the benefit to the patient, followed by full payment for the device in over half of these trial cases



Several positive rulings by the Social Court stating that Statutory Health Insurance (SHI) firms such as Barmer must reimburse for the MyoPro

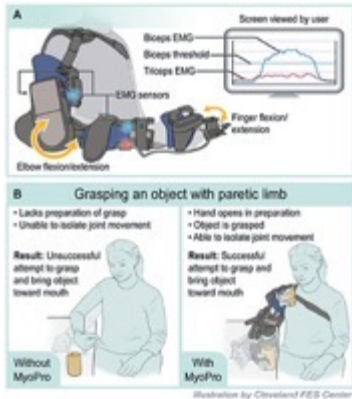
BARMER

Australia: National Disability Insurance Scheme (NDIS) has now approved reimbursement for the MyoPro, which should lead to additional sales in the country



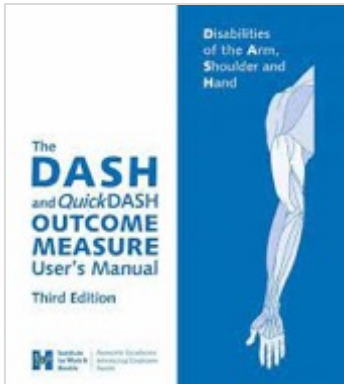
Other Markets: Reimbursement is obtained by working through local O&P distribution partners on a case-by-case basis (UK, Italy, Denmark)

Recent Clinical Research Accepted for Publication



Myoelectric Arm Orthosis Assists Functional Activities: A 3-Month Home Use Outcome Report

Results: Statistically significant and clinically meaningful improvements were observed on the functional tasks. By three months, participants were able to use the MyoPro to accomplish the tasks, reduce the amount of time spent to complete the tasks, and had a higher probability of success as compared to without the MyoPro. With the MyoPro, participants showed significant improvement in overall task completion and completed the tasks in a significantly decreased time as compared to without the MyoPro



Influence of a Myoelectric Arm Orthosis. A Minimum 6 to 17-Month Retrospective Home Use Study On Subjects 65 And Older Using The DASH Outcome Measure (Medicare-Age Population)

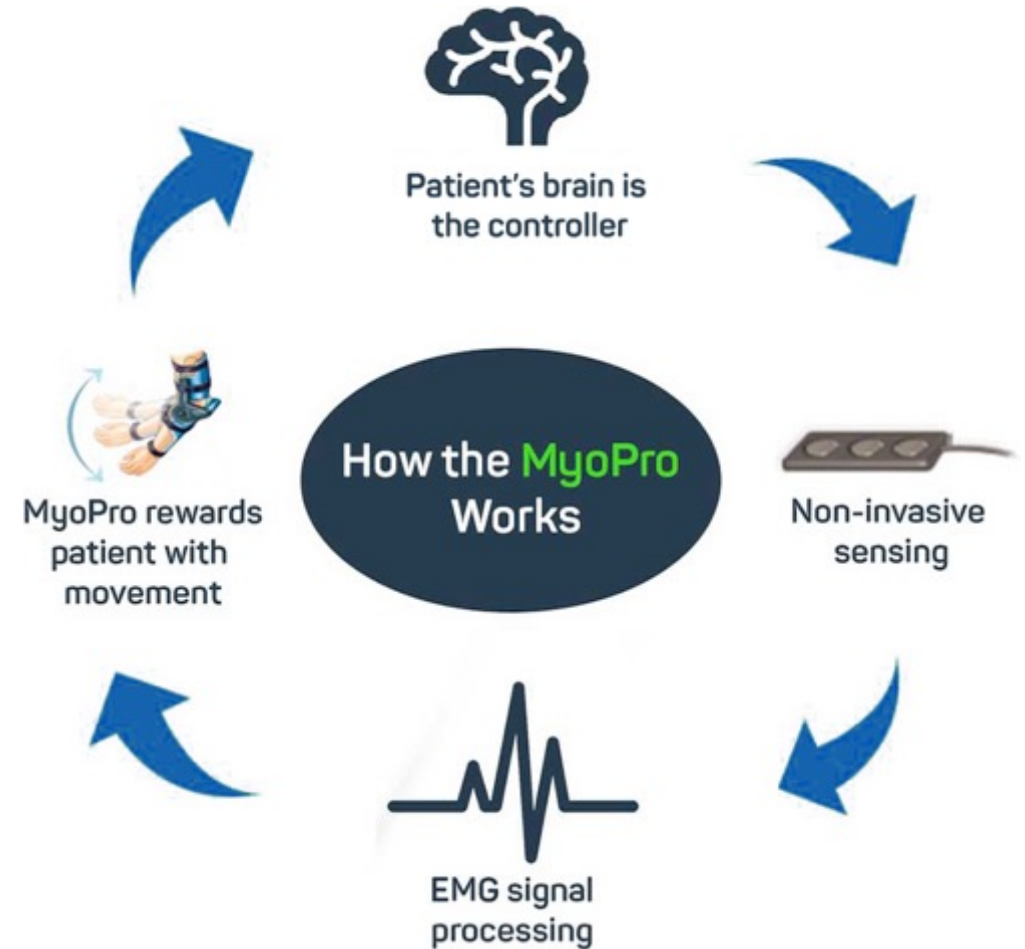
Results: Subjects had an average improvement of 18 points on the DASH validated outcome measure. Results were clinically significant for a range of patients Ages 66 to 77 with the MyoPro intervention between 2 and 12 years after the onset of their diagnosis. Subjects recovering from arm impairment show an improvement in the DASH self reported score of their ability to complete activities in their home

Other Research:



MyoPro Powered Arm Brace: Only Device to Restore Function

- MyoPro uses advanced sensor technology as a **brain-computer interface to detect the user's intention to move** via the body's electromyogram (EMG) signal
- Myomo's proprietary control algorithms interpret the strength of the patient's EMG signal, and our microprocessor-based system can amplify the EMG signal by a factor of 100,000x
- Lightweight motors in the device are activated enabling the patient to move their impaired arm through their own volition
- 24 Patents in U.S. and International markets valid through 2039. Additional patents pending.



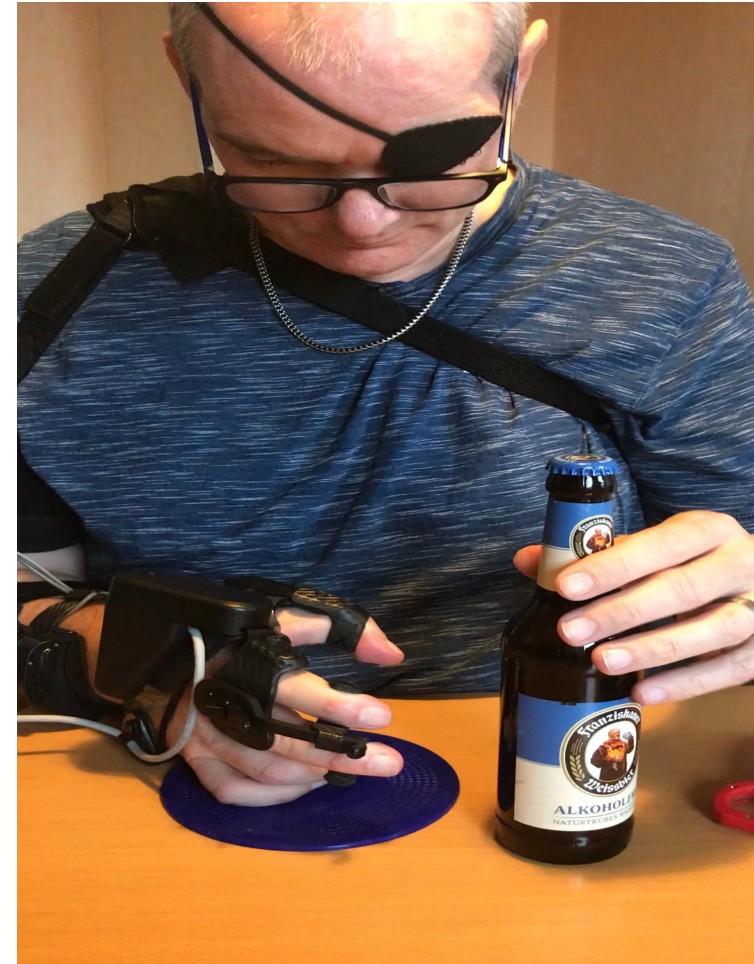


<https://www.youtube.com/watch?v=vVrA9MownDQ>

Enabling a Paralyzed Arm to Move Again

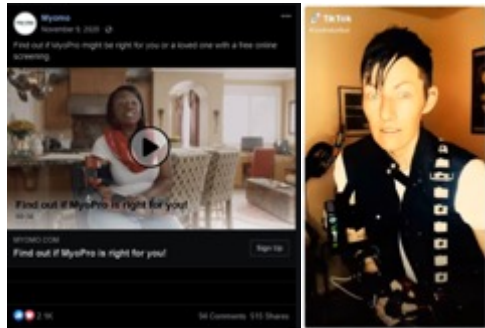
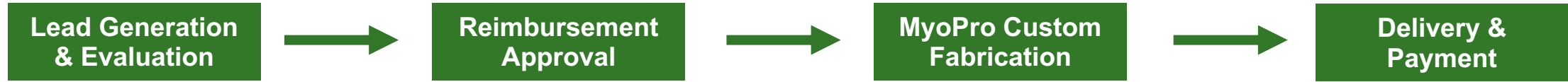


<https://vimeo.com/781545268/da823e7df8>



<https://vimeo.com/781548558/76b59ad742>

Go-to-Market Approach: How a Patient Obtains a MyoPro



New MyoPro 2+

Remote Measurement and In-House Manufacturing



Referral to OT for training MyoCare Coaches

Cost-Effective TV Advertising for Target Demographic

MyoPro Can Make Your Life Easier



Without MyoPro



With MyoPro

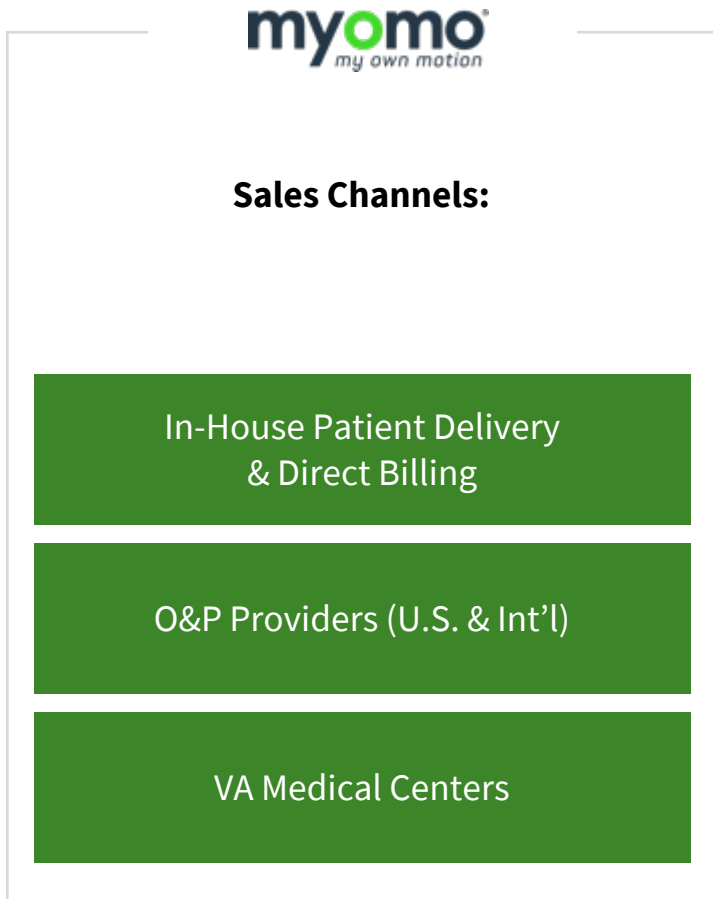
800-453-1234

MyoPro.com

Now accepting Medicare!

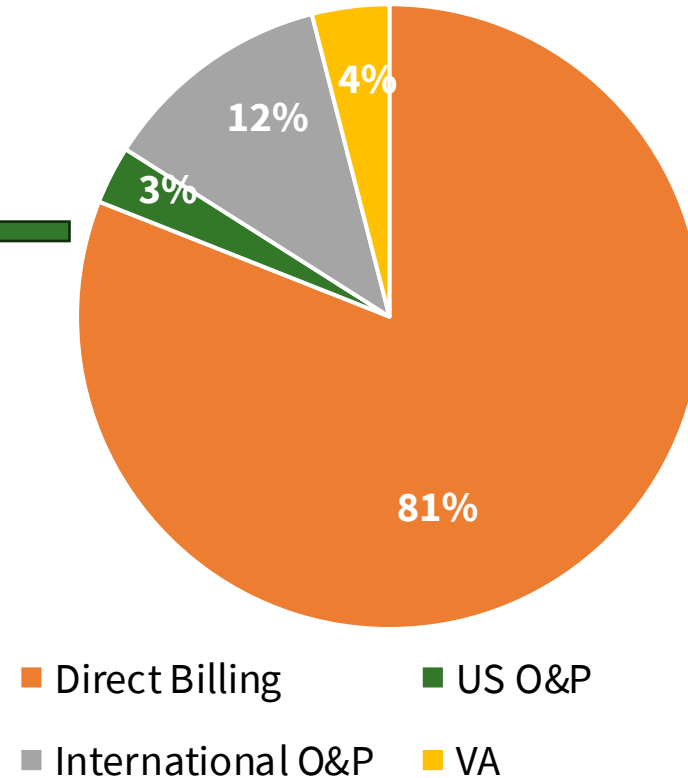
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Go-to-Market Approach: Multi-Channel, Emphasis on Direct Billing and International Sales

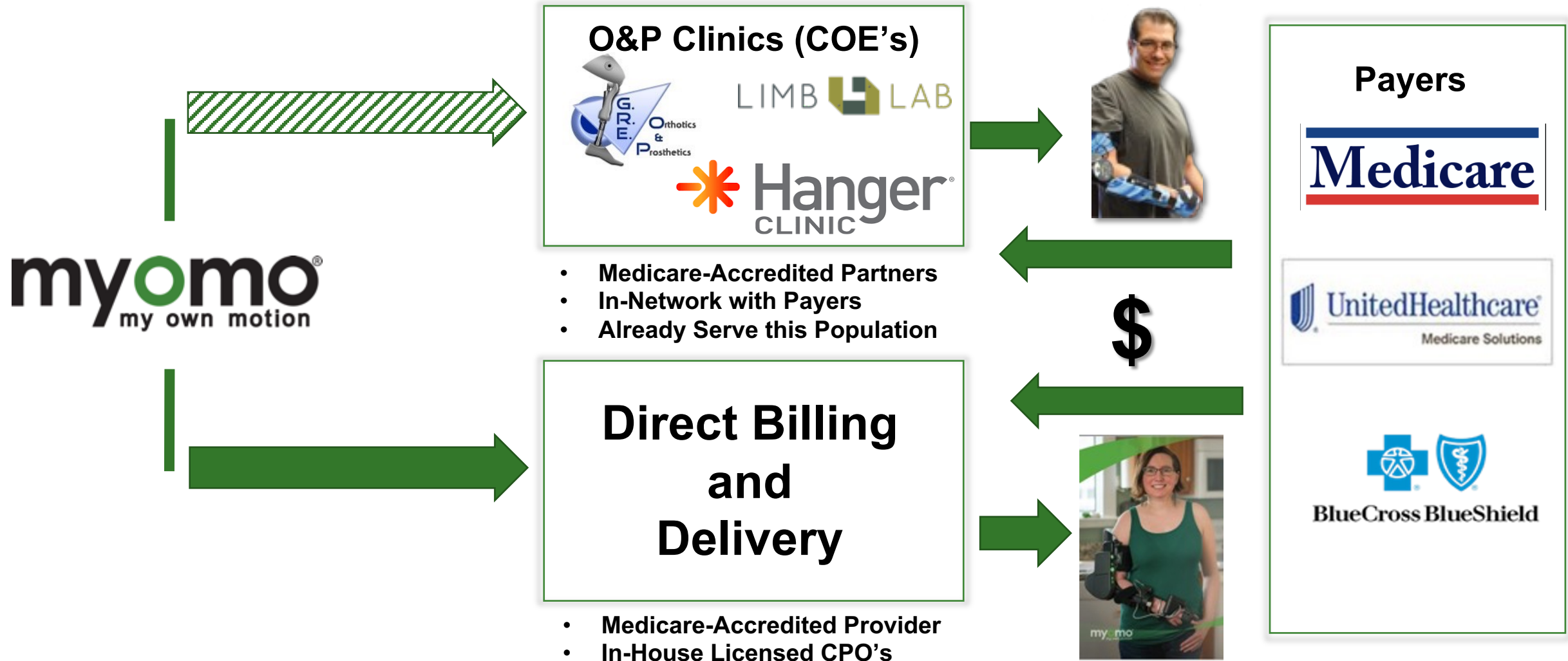


With Medicare Reimbursement, we have the opportunity to re-engage the O&P channel

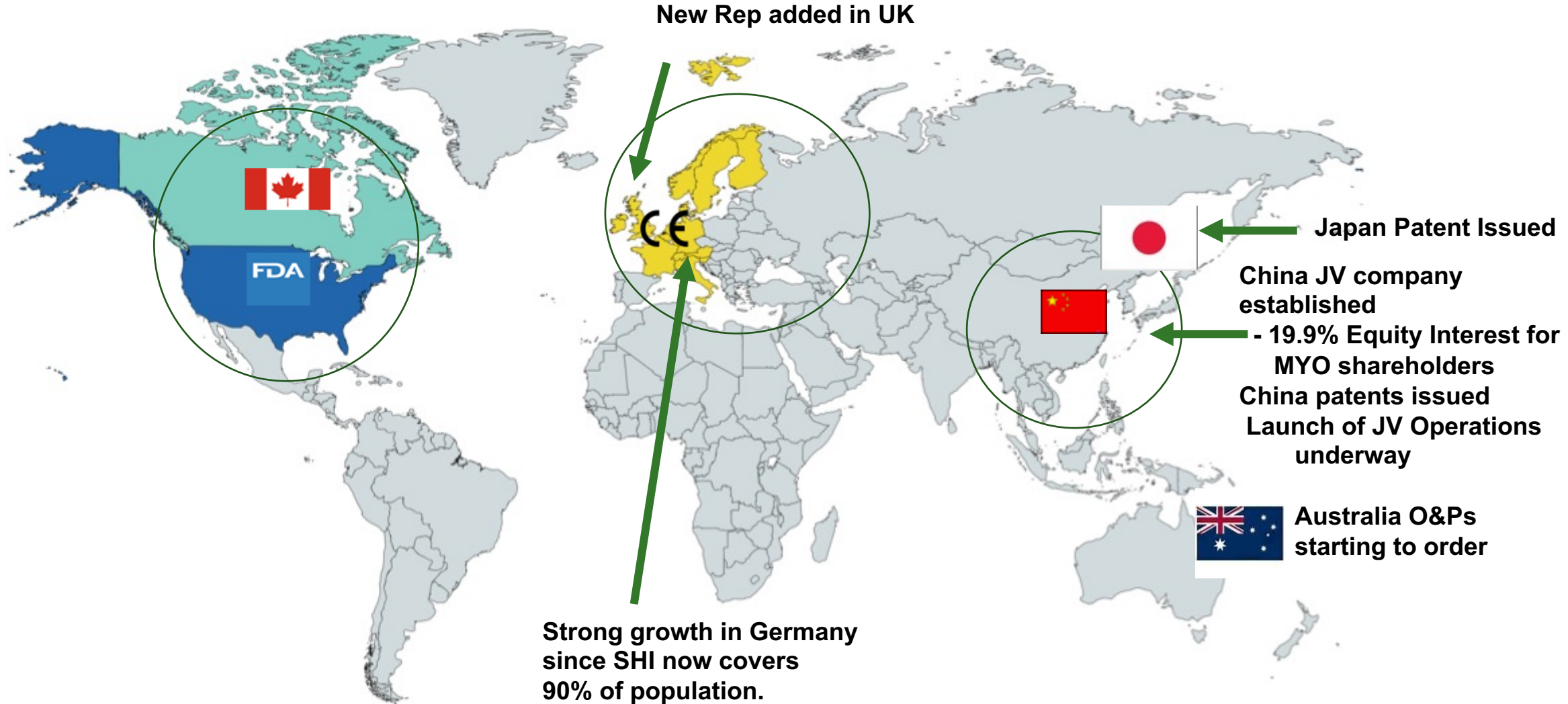
Q3 2024 Product Revenue %



With Reimbursement in Place, We Intend to Develop a Nationwide Network of MyoPro Centers of Excellence (COE's)



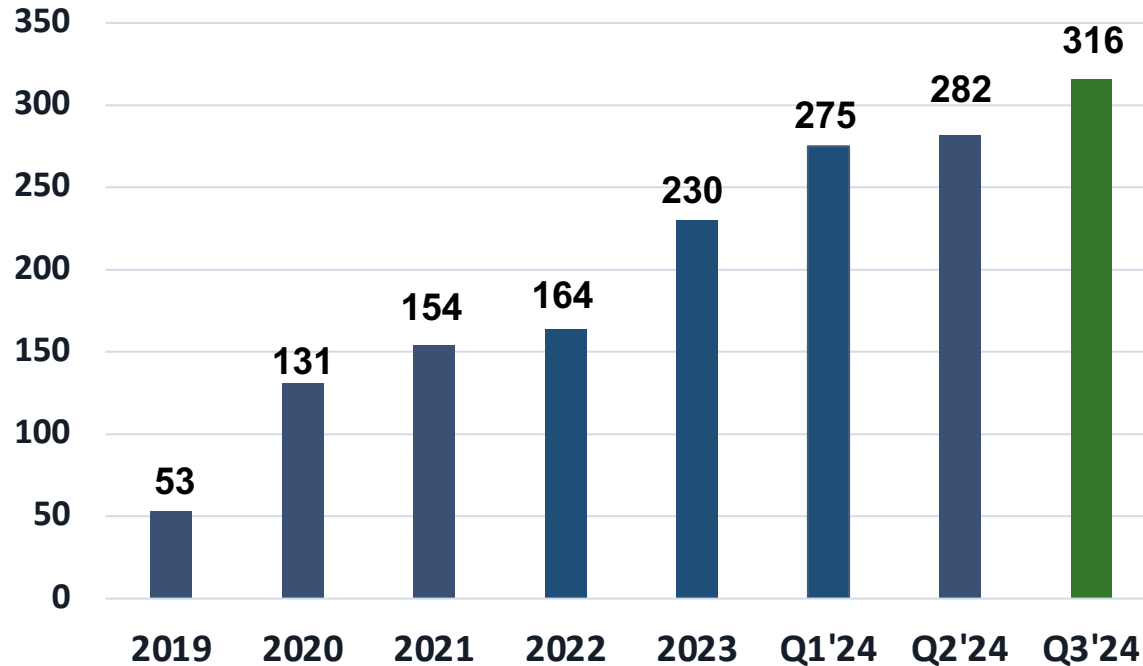
International Update: Activity in Key Markets



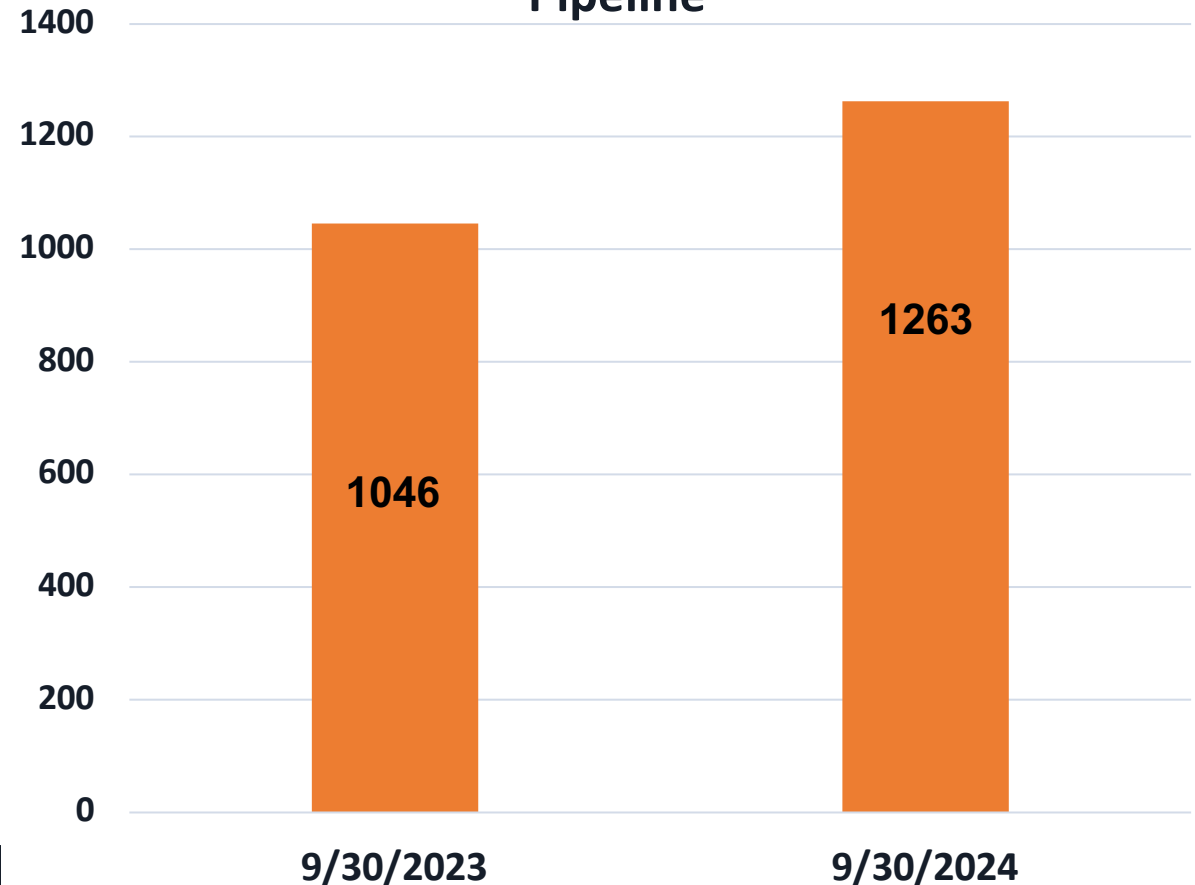
Created with mapchart.net ©

Backlog and Pipeline are Leading Indicators of Revenue

Backlog



Pipeline



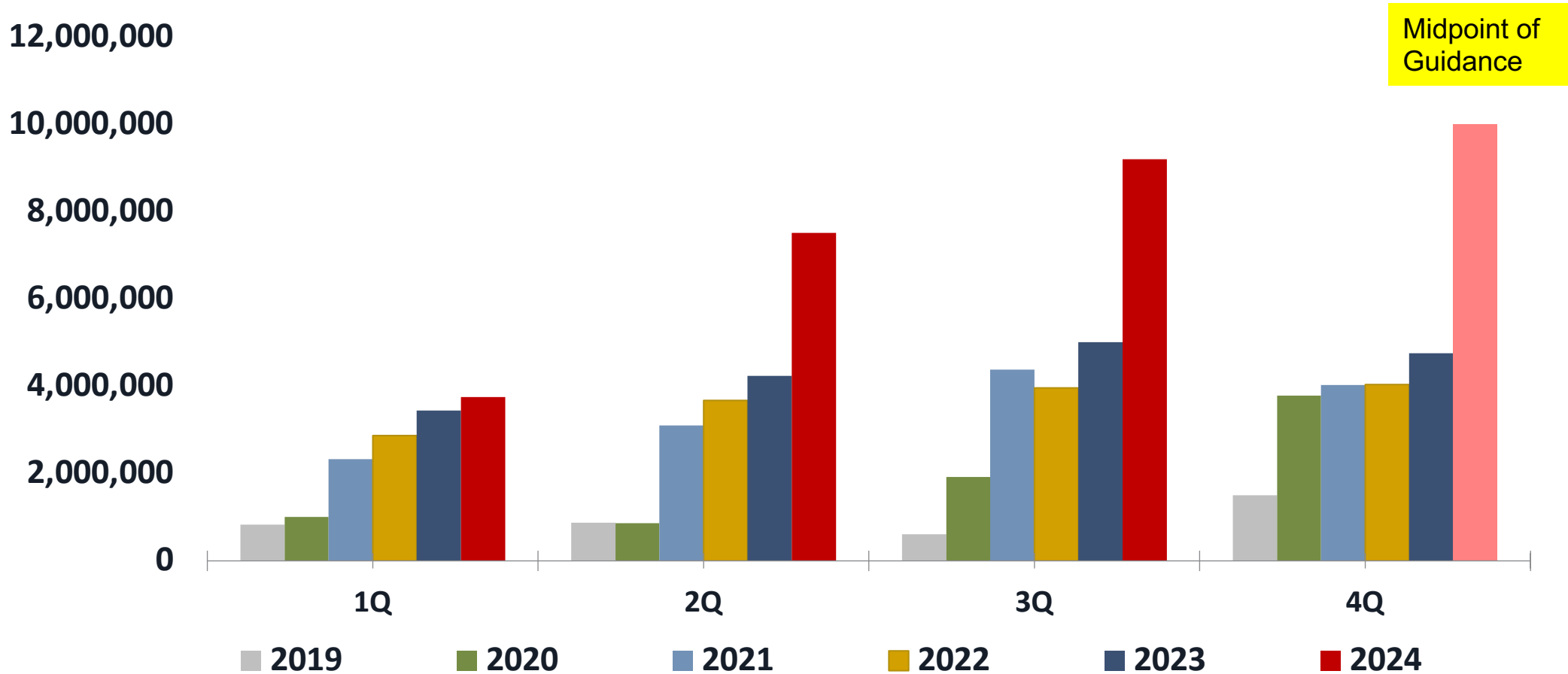
	Q4'22	Q1'23	Q2'23	Q3'23	Q4'23	Q1'24	Q2'24	Q3'24
Authorizations	98	122	125	156	183	180	213	225
Revenue Units	101	80	97	119	107	91	158	161
Book-to-Bill*	0.74	1.15	1.03	1.05	1.42	1.49	1.04	1.21

* Net of drops from the backlog

➤ Record 645 adds to the pipeline in Q3. 15% of patient pipeline as of Sept 30, 2024 represents Medicare patients. Q3 2024 backlog includes 114 Medicare Part B patients

Strong Revenue Growth Continued in Third Quarter

Quarterly Product Revenue



P&L and Key Balance Sheet Metrics

P&L

(\$000's)	Actual Q3'24	Actual Q3'23	Actual 2023	Actual 2022
Product Revenue	\$ 9,208	\$ 5,030	\$ 17,476	\$ 14,555
License Revenue	-	50	1,765	1,000
Total Revenue	9,208	5,080	19,241	15,555
COGS	2,262	1,591	6,059	5,302
Gross Profit	6,946	3,489	13,182	10,253
Gross Margin	75.4%	68.7%	68.5%	65.9%
Operating Expenses:				
R&D	1,249	717	2,636	2,482
Selling, Clinical & Mktg	3,401	2,387	9,043	9,757
G&A	3,253	2,409	9,735	8,686
Total	7,903	5,513	21,414	20,925
Operating Loss	\$ (957)	\$ (2,024)	\$ (8,232)	\$ (10,672)
Interest income	(76)	(112)	(410)	(88)
Other expense	-	71	170	67
Income Taxes	85	46	156	70
	9	5	(84)	49
Net Loss	\$ (966)	\$ (2,029)	\$ (8,148)	\$ (10,721)

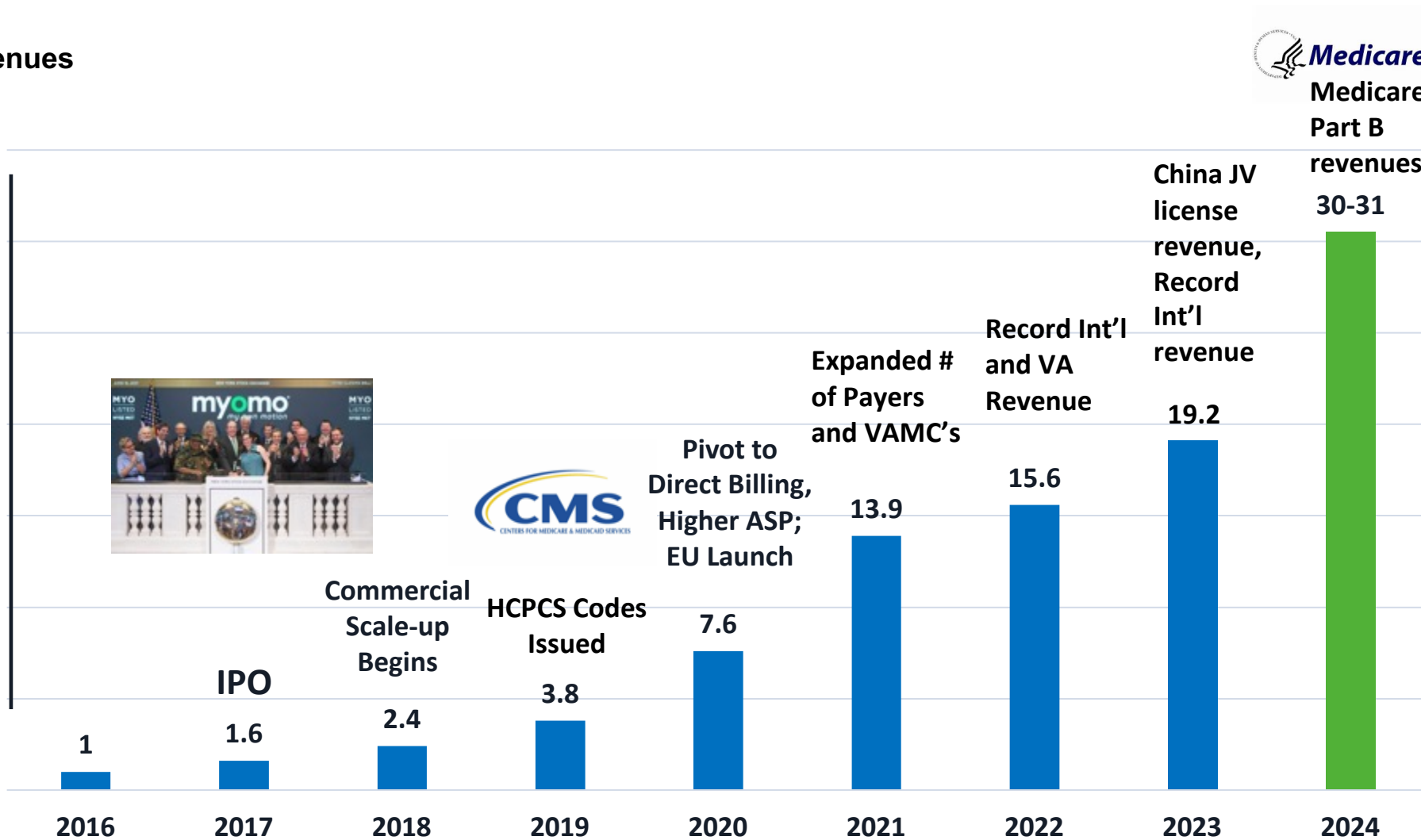
Key Balance Sheet Metrics

(\$000's)	Actual Q3'24	Actual Q2'24
Cash & Investments	\$ 6,623	\$ 8,982
Working Capital	7,812	8,677
Net Book Value	9,292	9,678
Shares Outstanding	37,966 *	37,923
Warrants Outstanding	668	668

* Includes unexercised pre-funded warrants

Key Milestones Driving Revenue Growth

Revenues
\$M



Increased full year revenue guidance.

Previous guidance \$28M-\$30M.

Capital Requirements and Cash Flow Breakeven

It is achievable to be cash flow breakeven and approach Adjusted EBITDA breakeven in the fourth quarter of 2024. Requirements:

- **No unforeseen supply chain disruptions impacting deliveries and revenue**
- **Expected payments are received**
- **No increase in days sales of accounts receivable**
- **Compensate for additional advertising spend above plan in the second half of 2024 to bring more patients into the top of our funnel and accelerate 2025 revenue growth.**

No additional capital is expected to be required for liquidity. If equity capital were to be raised, the use of proceeds would be for growth initiatives

Strategic Plan to Achieve Revenue Growth

Increased Marketing, New International Markets, Medicare Reimbursement, and New Product Introduction for Continued Revenue Growth

Develop O&P Channel

Penetrate Medicare Part B Market

Launch China JV

Expanded Sales in Germany / EU

Increased Penetration of U.S Market

Leadership Team & Board of Directors

Management Team Members



Paul R. Gudonis Chairman & CEO

Scaled multiple tech co's, largest from \$5M to \$1.2B revenue (BBN/Genuity)



David Henry, CFO

Raised nearly \$900M in capital for public companies



Micah Mitchell Chief Commercial Officer

Grew sales 10x at several custom DME businesses



Dr. Harry Kovelman Chief Medical Officer

Track record of expanding patent access for new technologies



Malcolm Bock VP of Engineering and Product Strategy

Experienced Medical Device Engineering Executive



Barry Camrell VP of QA/RA

Established quality systems for U.S. and int'l markets



John Frijters Managing Director - International

Experienced executive O&P Europe - based



Kathy Sawyers, PT, ATP Sr. Dir. - Clinical Outcomes

Oversees clinician training and user support



Joseph Chicoskie Dir. - Marketing

Has led evolution of Myomo's marketing strategy



Colin Anderson Dir - Global Operations

Experienced at scaling operations in med device industry



Thomas Kirk Lead Independent Director

Former CEO, Hanger Clinics



Amy Knapp Board Member

Experienced Health Insurance Industry Executive



Thomas Crowley Board Member

Experienced Med Device CEO



Milton Morris Board Member

Former President & CEO, Neuspera Medical; Boston Scientific exec1



Yitzchak Jacobovitz Board Member

Partner and Lead Healthcare Analyst AIGH Capital Management



Heather Getz Board Member

CFO & COO Butterfly Network, Inc.

Board of Directors

Thank You!



For Additional Information:

Paul R. Gudonis, CEO

paul@myomo.com

617-401-2623

David Henry, CFO

david.henry@myomo.com

508-344-5235