December 2021

Corporate Presentation

MDxHealth®

Forward looking statement

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MDxHealth is dedicated to providing highly accurate and clinically actionable urologic solutions to inform patient diagnosis and treatment while improving healthcare economics for payers and providers

MDxHealth®

Nasdaq

EURONEXT

Ticker: MDXH

Ticker: MDXH.BR

Strategy and focus

Commercial execution

- Experienced leadership based in focus and execution

- Operating discipline instituted through new leadership and all drivers of the P&L
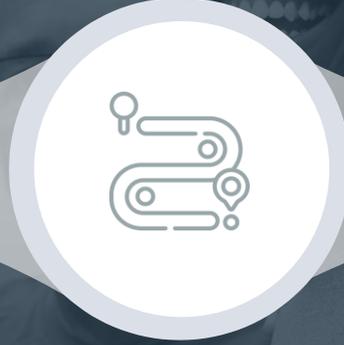
Payer coverage & guidelines

- ConfirmMDx covered by Medicare & commercial payers

- SelectMDx draft Medicare LCD published in 2021

- SelectMDx & ConfirmMDx included in National Comprehensive Cancer Network (NCCN) Guidelines

Established commercial channel

- Leveraging direct US urology sales force

- Expanding urologic menu into:
  - Active surveillance for prostate cancer
  - Urinary Tract Infection testing

- Capable of driving additional opportunities into urology

MDxHealth is well-positioned for sustainable growth & value creation

MDxHealth®

Experienced leadership team

Michael K. McGarrity

Chief Executive Officer

Joined MDxHealth in 2019
Nanosphere
Stryker

Ron Kalfus

Chief Financial Officer

Joined MDxHealth in 2019
Rosetta Genomics
Mabcure

John Bellano

Chief Commercial Officer

Joined MDxHealth in 2019
Assurex Health
Roche Diagnostics

Miriam Reyes

Executive Vice President
Laboratory Operations

**Joined MDxHealth in 2011**
CombiMatrix
Agendia
LabCorp

Joseph Sollee

Executive Vice President
Corp. Dev. & General Counsel

Joined MDxHealth in 2008
Triangle Pharmaceuticals
TherapyEdge

Our menu addresses a $4.6B U.S. market opportunity

*In development
(Based on management estimates)
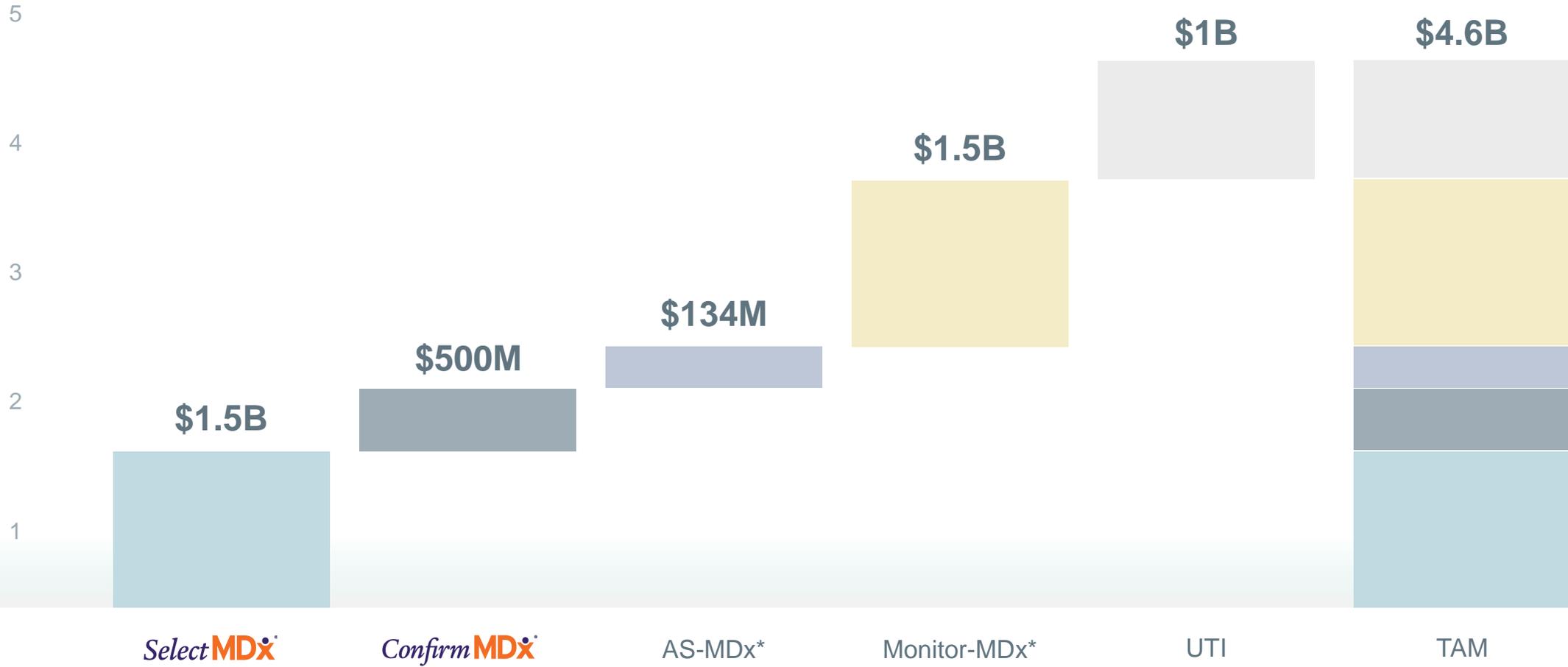
Current challenges with diagnosing prostate cancer in the U.S.

Prostate cancer screening
3 million elevated PSA results annually [1-2]

60%
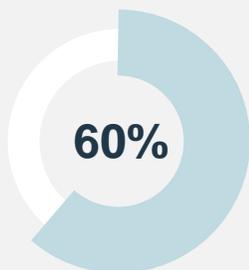
60% of biopsies DO NOT reveal cancer and may lead to increased complications and hospitalization [3-6]

Prostate cancer diagnosis
500,000 men undergo biopsies annually [2]

30%
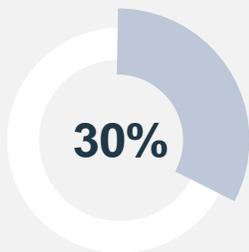
30% of cancer-negative biopsies are false negatives, meaning these patients actually have cancer [7]

Prostate cancer is the most common cancer and the 2nd deadliest cancer in U.S. men [1]

MDxHealth®

$2B current U.S. prostate cancer market opportunity

3M
Elevated PSA annually

Who needs a biopsy?

Eligible for:
SelectMDx

$1.5B Market

300K
Cancer-negative biopsies

Who needs a repeat biopsy?

Eligible for:
ConfirmMDx

$500M Market

134K
New active surveillance patients

Out of 25M PSAs performed annually

Out of 500K prostate biopsies performed annually

Out of 250K new prostate cancer cases annually
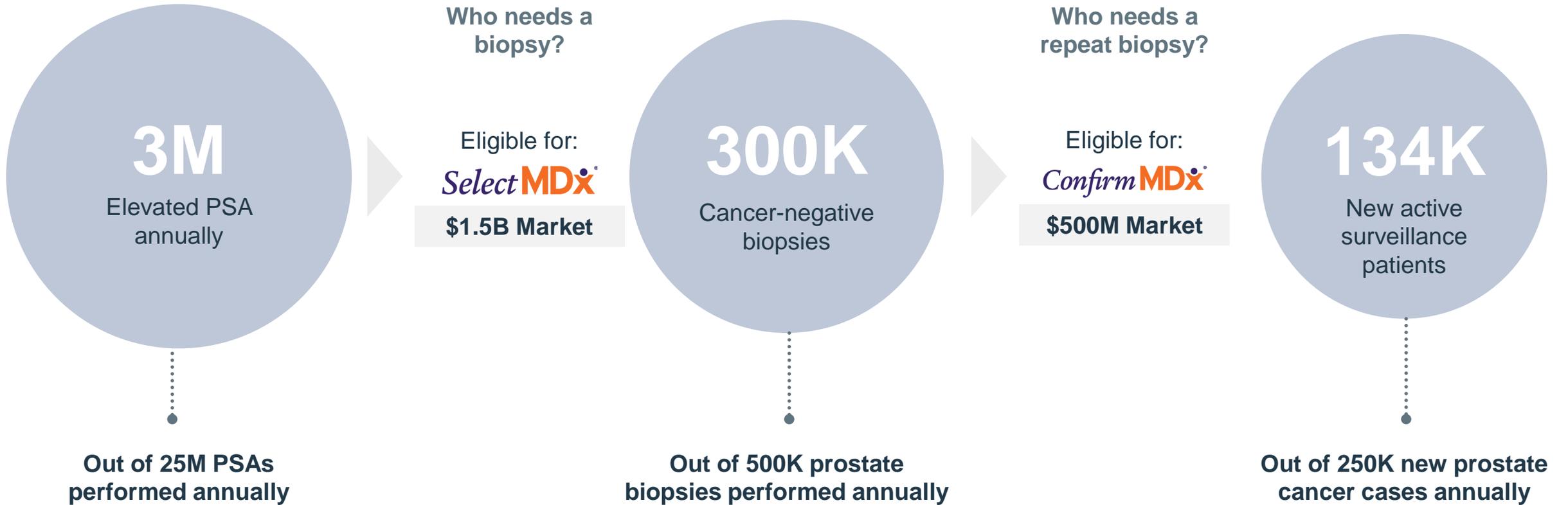
MDxHealth's proprietary prostate cancer menu

Clinical pathway for diagnosing aggressive prostate cancer
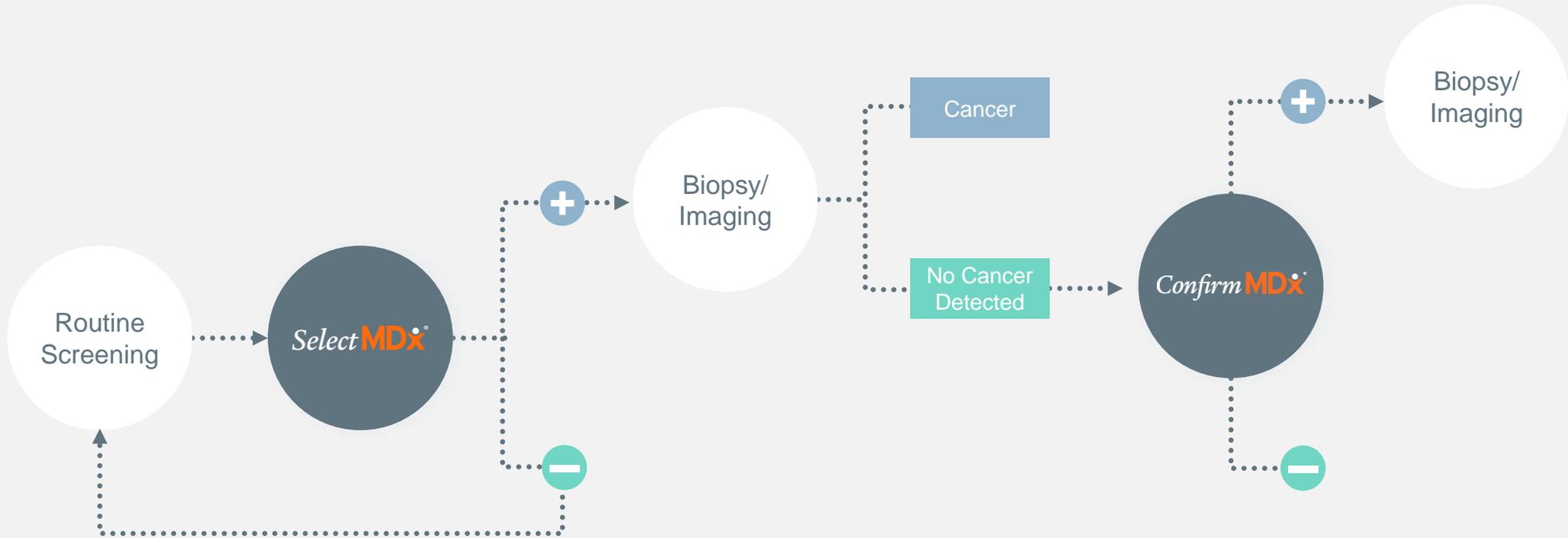
SelectMDx improves patient selection prior to prostate biopsy

A highly predictive test to identify men at low risk for aggressive prostate cancer

Abnormal PSA/DRE

At risk for aggressive cancer?

95% NPV

SelectMDx
for Prostate Cancer

Binary actionable results for patient and HCP

➕ **Positive** ┄┄┄► **Biopsy**

➖ **Negative** ┄┄┄► **Routinely Monitor**

- **Non-invasive:** Urine-based "rule-out" test improves the diagnostic disposition of patients by avoiding unnecessary prostate biopsies

- **Accurate:** 95% negative predictive value [1]

- **Validated:** 12 published studies on genes and technology

- **Cost effective**: Potential to avoid invasive and unnecessary prostate biopsies and save the U.S. healthcare system >$500 million [2]

- **National guidelines**: Included in EAU and NCCN guidelines [3-4]

60%

60% of initial biopsies do not reveal cancer [5-8]

ConfirmMDx improves diagnostic confidence of biopsy result

The only epigenetic test to identify men at risk for aggressive prostate cancer

False-negative biopsy

- Cancer
- Biopsy Core Needles
- Prostate

96% NPV [1]

- Positive
- Field Effect
- Cancer
- Urethra
- Biopsy Core
- Prostate

⊕ **Positive** ····▶ **Biopsy/MRI**   ⊖ **Negative** ····▶ **Avoid Biopsy/MRI**
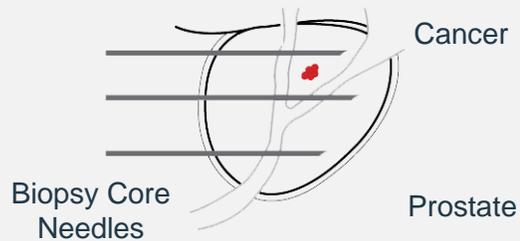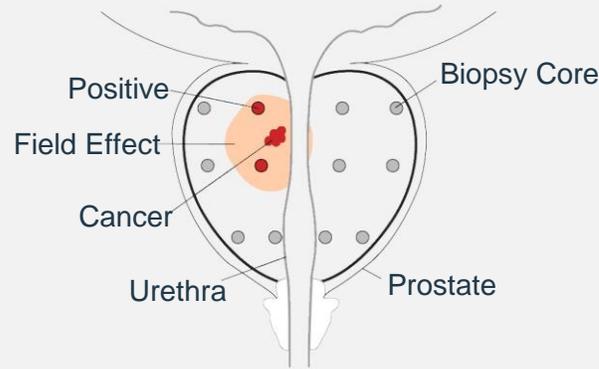
- **Non-invasive:** "Rule-out" test performed on previous biopsy tissue
- **Accurate:** 96% Negative Predictive Value for aggressive prostate cancer [1]
- **Validated:** Over 55 published studies on genes and technology
- **Cost effective:** Potential annual U.S. health system savings of $500K per 1M covered patients [2]
- **National guidelines:** Included in EAU and NCCN guidelines [3-4]

30%
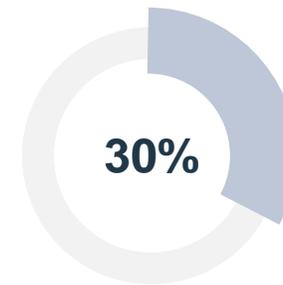
30% of men with a cancer-negative biopsy result actually have cancer [5]

Evolution and catalysts of revenue growth

Confirm MDx

Launch	Medicare Coverage	NCCN Guidelines	EAU Guidelines	100+ Payer Contracts	

Select MDx

2012	2014	2016	2018	2020	2021

| | | Launch | EAU Guidelines | NCCN Guidelines | Draft Medicare LCD |
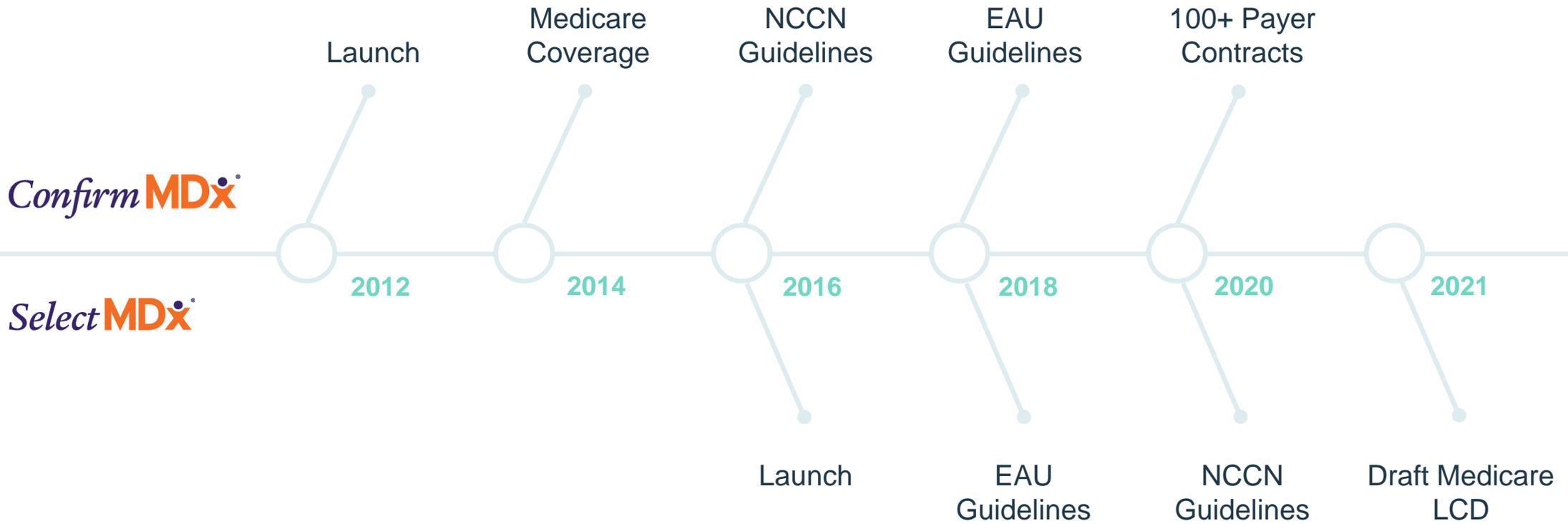
Expanding menu in the prostate cancer diagnostic pathway

Active surveillance and "watchful waiting" require additional diagnostic disposition

Screening	Patient selection	Diagnosis	Active Surveillance (AS)	Intervention

Prostate cancer PSA screening test → **SelectMDx** *for Prostate Cancer* (Biopsy decision) → Initial biopsy

- Biopsy negative → **ConfirmMDx** *for Prostate Cancer* → Biopsy/imaging
- Low-grade prostate cancer → AS-MDx* (Active Surveillance) → Monitor-MDx* (AS monitoring) → Intervention
- High-grade prostate cancer → Intervention
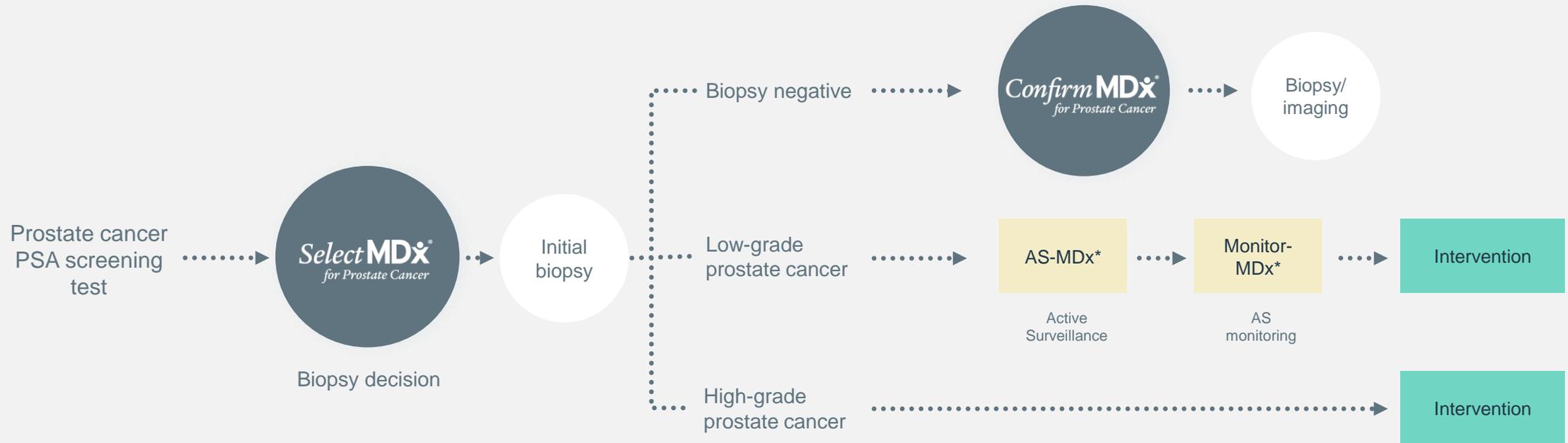
AS-MDx to stratify patients for active surveillance

Low-grade prostate cancer

134K
Est. market size
(men annually)

AS-MDx*

+ Positive ⟶ Intervention

− Negative ⟶ Active Surveillance
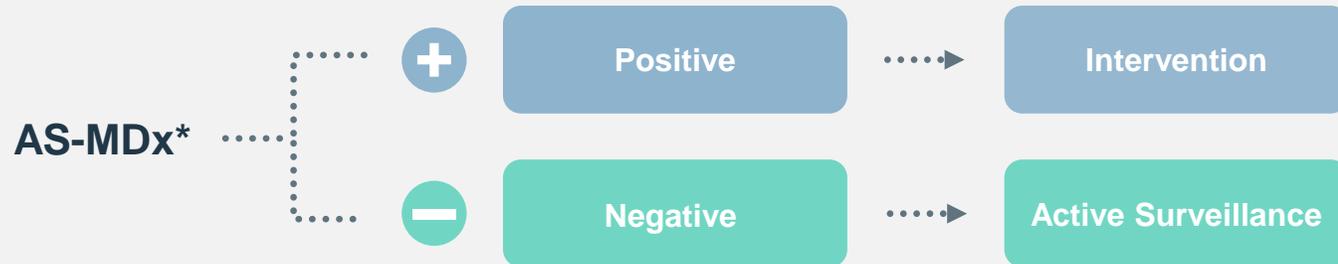
AS-MDx

Not all men diagnosed with localized prostate cancer benefit from intervention; many tumors are slow-growing and non-life threatening

AS-MDx will risk-stratify patients who will benefit from immediate intervention versus active surveillance

*In development

Monitor-MDx to validate continued active surveillance

Under active surveillance
(Low-grade cancer)

Monitor-MDx* ······

| High risk | ····▶ | Intervention |

| Low Risk | ····▶ | Continued Active Surveillance |

1.5M
Est. market size
(men annually)

Monitor-MDx

Patients under active surveillance are currently monitored by invasive and costly prostate biopsies

Monitor-MDx will be a non-invasive alternative that risk stratifies patients for continued active surveillance vs. intervention, which may also improve patient compliance
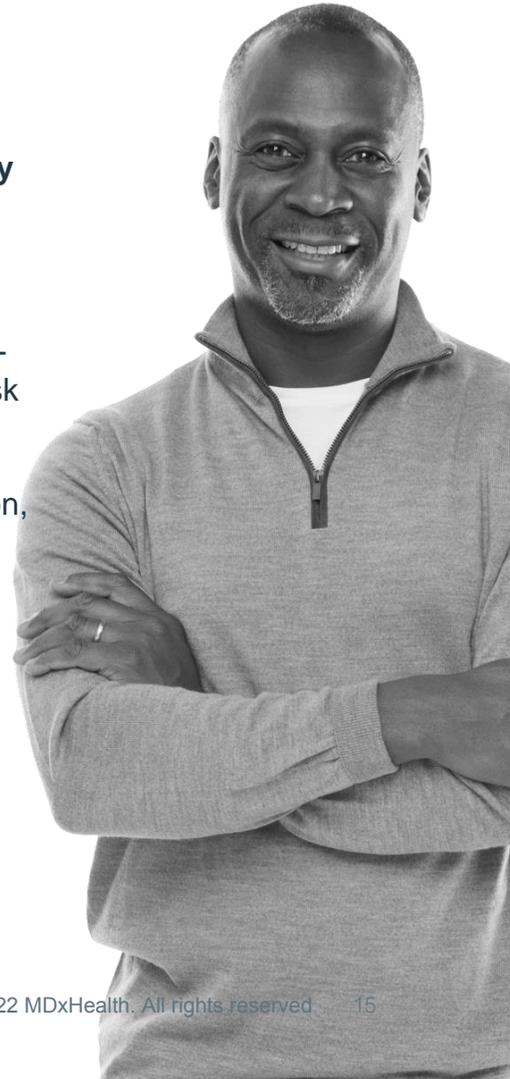
*In development

# U.S. Urinary Tract Infection (UTI) annual market opportunity

UTIs are the most common outpatient infection[1]

- 10 million suspected UTI cases present annually[2]
- 20% of volume presents to urology*

## The current UTI testing market is underserved

- Current standard is based on dated culture methodologies
- Complex molecular methods target both organism and susceptibility markers
- Market conversion comps: Virology and infectious disease
- Reimbursement well characterized (Medicare/commercial)

The addressable market for UTI testing in the urology segment is 2M tests[2] annually, or $1B*

U.S. Market for UTI*

Long Term Care **10%**
Urology **20%**
Primary Care **70%**
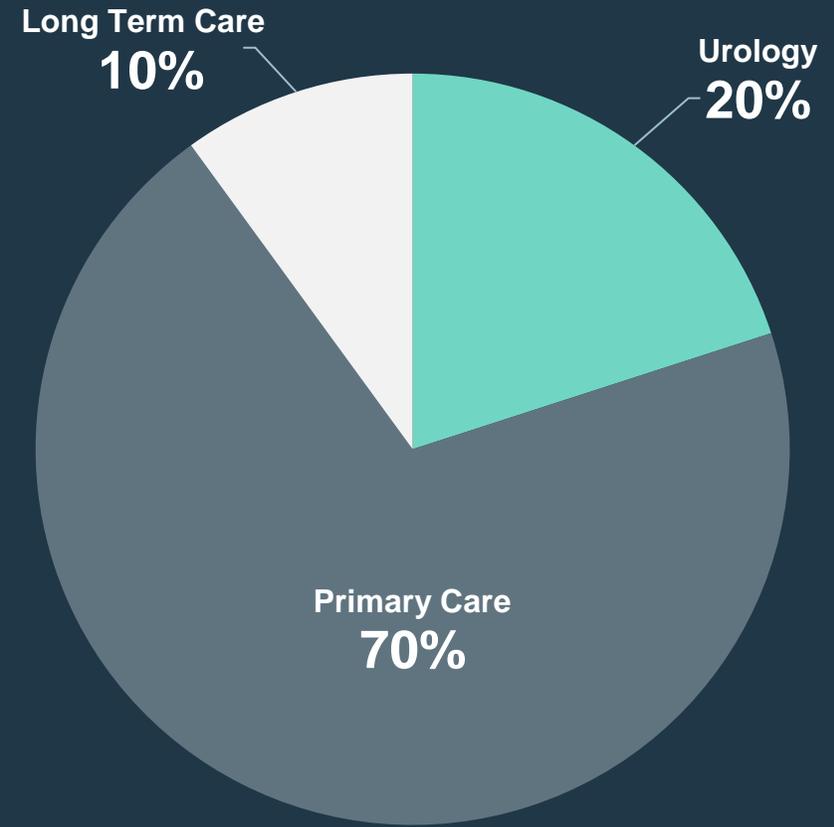
Our broad urology-focused menu provides opportunity for growth

$4.6B

$1B	UTI
$1.5B	Monitor-MDx*
$134M	AS-MDx*
$500M	ConfirmMDx
$1.5B	SelectMDx

GUIDANCE UTI
Pathnostics

MicroGenDX
qPCR + NGS DNA DIAGNOSTICS
FOR ACCURATE MICROBIAL IDENTIFICATION
MicrogenDX

oncotypeDX
Genomic Prostate Score
Exact Sciences

Prolaris
Myriad

DECIPHER
Veracyte

PCA3
Hologic

4Kscore
OPKO

ExoDx
Biotechne

phi
PROSTATE HEALTH INDEX
Beckman Coulter

* In development
(Based on management estimates)

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Statement of profit or loss

Revenue

Approximately 97% attributable to services and 3% to licenses and royalties

ConfirmMDx represents over 90% of services revenue

Gross margin

Improved by 120 basis points year-over-year

Cash and cash equivalents

$31.3 million as of June 30, 2021

USD in thousands (unaudited)	6 months ended June 30, 2021	6 months ended June 30, 2020	% Change
SelectMDx test volume	7,051	6,485	9%
ConfirmMDx test volume	7,978	7,662	4%
Total revenue	**$10,731**	**$9,880**	**9%**
Gross profit	**$5,215**	**$4,686**	**11%**
Operating expenses	($17,658)	($17,674)	0%
Operating loss	**($12,443)**	**($12,988)**	**(4%)**
Net loss	**($13,299)**	**($13,709)**	**(3%)**

MDxHealth is well-positioned for sustainable growth and value creation

01
Large total addressable market
Selling clinically actionable diagnostic tests to urologists represents a multi-billion-dollar addressable market opportunity

02
Existing products provide foundational revenue and strong growth potential
Generating revenue from clinically-proven commercial products; growth to occur via commercial execution and improving channel access

03
Proprietary position into urology call point enables additional growth via menu expansion
Experienced R&D team and business development opportunities that leverage existing channel into urology

04
New leadership team with commercial focus
Implementing proven strategies to support growth while maintaining operating cost discipline

MDxHealth®

Thank you

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Presentation references

SUMMARY REFERENCE CITATIONS

Slide 7 – Current challenges with diagnosing prostate cancer in U.S.
1. NIH 8/20/2019 Website: https://seer.cancer.gov/statfacts/html/common.html.
2. MDxHealth management estimates.
3. Moyer VA, U.S. Preventive Services Task Force. Screening for prostate cancer: U.S. Preventive Services Task Force recommendation statement. Ann Intern Med. 2012;157:120–134.
4. Bhindi B, Mamdani M, Kulkarni GS, et al. Impact of the U.S. Preventive Services Task Force recommendations against prostate specific antigen screening on prostate biopsy and cancer detection rates. J Urol. 2015;193:1519–1524.
5. Loeb et al. European Urology 2013.
6. Loeb et al. Journal of Urology 2011.
7. Stewart et al. Journal of Urology 2013.

Slide 10 – SelectMDx improves patient selection prior to prostate biopsy
1. Haese, A, et al. (2019) Multicenter Optimization and Validation of a 2-Gene mRNA Urine Test for Detection of Clinically Significant Prostate Cancer Prior to Initial Prostate Biopsy. J Uro. doi: 10.1097/JU.0000000000000293.
2. Govers TM, et al. (2018) Cost-Effectiveness of Urinary Biomarker Panel in Prostate Cancer Risk Assessment. J Urol. doi: 10.1016/j.juro.2018.07.034A.
3. 2021 National Cancer Center Network Guidelines. Early Detection for Prostate Cancer. Version 2.2021 – July 14, 2021.
4. 2021 European Association of Urology Prostate Cancer Guidelines.
5. Moyer VA, U.S. Preventive Services Task Force. Screening for prostate cancer: U.S. Preventive Services Task Force recommendation statement. Ann Intern Med. 2012;157:120–134.
6. Bhindi B, Mamdani M, Kulkarni GS, et al. Impact of the U.S. Preventive Services Task Force recommendations against prostate specific antigen screening on prostate biopsy and cancer detection rates. J Urol. 2015;193:1519–1524.
7. Loeb et al. European Urology 2013.
8. Loeb et al. Journal of Urology 2011.

Slide 11 – ConfirmMDx improves diagnostic confidence of biopsy result
1. Van Neste, et al. (2016) Risk Score Predicts High-Grade Prostate Cancer in DNA-Methylation Positive, Histopathologically Negative Biopsies. J Urology.
2. Aubry. Et al., Budget Impact Model: Epigenetic Assay Can Help Avoid Unnecessary Repeated Biopsies and Reduce Healthcare Spending. American Health &. Drug Benefits 2013.
3. 2021 National Cancer Center Network Guidelines. Early Detection for Prostate Cancer. Version 2.2021 – July 14, 2021.
4. 2021 European Association of Urology Prostate Cancer Guidelines.
5. Stewart et al., Clinical Utility of an Epigenetic Assay to Detect Occult Prostate Cancer in Histopathologically Negative Biopsies: Results of the MATLOC Study. Journal of Urology 2013.

Slide 16 – U.S. Urinary Tract Infection (UTI) annual market opportunity
1. Medina M, Castillo-Pino E. An introduction to the epidemiology and burden of urinary tract infections. Ther Adv Urol. 2019;11:1756287219832172. Published 2019 May 2. doi:10.1177/1756287219832172.
2. Flores-Mireles AL, Walker JN, Caparon M, Hultgren SJ. Urinary tract infections: epidemiology, mechanisms of infection and treatment options. Nat Rev Microbiol. 2015;13(5):269-284. doi:10.1038/nrmicro3432.

Appendix

SelectMDx robust clinical evidence

12 published studies on genes and technology

✓ **Analytical validity**   ✓ **Clinical validity**   ✓ **Clinical utility**   ✓ **Health economics**

Pivotal clinical studies

Analytical validation	Hessels et al., Translational Medicine Communications 2017
Clinically validated for a 95% NPV	Haese et al., Journal of Urology 2019
Significantly impacts prostate biopsy decision making	Shore et al., Urology Practice 2019
>$500M in savings to health care system	Govers et al., Journal of Urology 2018

MDxHealth®

ConfirmMDx robust clinical evidence

Over 55 published studies on genes and technology

✓ **Analytical validity**	✓ **Clinical validity**	✓ **Clinical utility**	✓ **Health economics**

Pivotal clinical studies

Analytical validation	Van Neste et al., BMC Urology 2013
Validation of high NPV	Partin et al., Journal of Urology 2014.
Meta analysis validating high NPV	Partin et al., Trans. of the Am. Clin. and Clim. Assoc 2016
Risk score development NPV 96% CS PCa	Van Neste et al. The Prostate 2016
Validated in African American men	Waterhouse et al., Urology 2016
Validation of clinical utility/actionability	Wojno., et al 2014
Savings to health care system	Aubry et al., American Health Drug and Benefits 2013

SelectMDx & ConfirmMDx technology

Combined over 65 published studies

	SelectMDx [1]	ConfirmMDx [2]
Specimen	Urine	Prostate tissue
Science	mRNA RT-PCR assay	DNA Methylation Specific PCR assay
Biomarkers	DLX1, HOXC6	GSTP1, APC RASSF1
Clinical Model	Clinical model combines mRNA with established clinical risk factors	Clinical model combines DNA Methylation markers with established clinical risk factors
Performance	95% NPV for clinically significant prostate cancer	96% NPV for clinically significant prostate cancer

1. Haese, A, et al. (2019) Multicenter Optimization and Validation of a 2-Gene mRNA Urine Test for Detection of Clinically Significant Prostate Cancer Prior to Initial Prostate Biopsy. J Uro. doi: 10.1097/JU.000000000000293.
2. Van Neste, et al. (2016) Risk Score Predicts High-Grade Prostate Cancer in DNA-Methylation Positive, Histopathologically Negative Biopsies. J Urology.

Prostate cancer precision diagnostics: menu and pipeline

Product name	Sample type	Clinical decision	R&D	Validation	Launch	Expanded coverage and utilization
ConfirmMDx	Tissue	Post biopsy				●
SelectMDx	Urine	Pre biopsy				●
AS-MDx	TBD	Active Surveillance (AS)		●		
Monitor-MDx	TBD	AS Monitoring	●			