



Lumos Diagnostics Holdings Limited



Q1 FY27 Results & Commercial Update - Investor Webinar

27 October 2026

lumosdiagnostics.com

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Q1 FY27 at a Glance¹



QUARTER ENDED 30 SEPTEMBER 2026 · AWARENESS, VALIDATION AND GO-LIVES BUILDING INTO THE RESPIRATORY SEASON

265

live sites

Across 29 states at 11 Oct 2026, up 50 sites and 3 states since 15 Sep

485

sites in evaluation

Pipeline: up 80 sites (20%) since 15 Sep, under clinical and economic validation

13

Top 100 groups

Now evaluating or live: 5 groups with live sites, 8 in evaluation

+224%

product revenue

US\$0.56m vs US\$0.17m in pcp as U.S. sites go live

US\$11.8m

cash, no debt

At 30 Sep 2026, after US\$1.0m inventory build ahead of the flu season

QUARTER HIGHLIGHTS

- **Standardised adoption:** a Top 100 group and leading Midwest academic health system embedded FebriDx[®] across its 20+ outpatient settings after training all providers in September
- **Three more Top 100 groups** (120+ urgent care sites) committed to evaluate FebriDx[®] across 50 sites, ~0.3m ARI patients a year
- **Primary care traction:** a Northeast network with 12+ locations and 300+ primary care providers committed to immediate full deployment
- **Awareness engine live:** LinkedIn, paid search, account-based media and earned media, including WBNS-10TV coverage

“The strong commercial momentum achieved since securing CLIA waiver for FebriDx[®] continues to exceed our expectations ... these results reinforce the value of FebriDx[®] for providers, payers and patients.”

Doug Ward, CEO & Managing Director

Momentum continues as Lumos enters the U.S. 2026/27 respiratory season

1. Site metrics as at 11 October 2026; financials for the quarter ended 30 September 2026 (unaudited). Evaluation sites are pipeline and may not convert to live sites. All amounts in US\$. Lumos remains cash flow negative.

Our Q1 Story: Awareness, Validation, Go-Live¹



HOW LUMOS IS TURNING CLIA WAIVER INTO PROTOCOL-DRIVEN, RECURRING USE OF FEBRIDX[®]

01 BUILD AWARENESS

Put FebriDx[®] in front of clinical and operational decision-makers

13 of 100

Top 100 urgent care groups among the most-engaged organisations on LinkedIn

- Four-channel paid media sprint through the respiratory season
- 0.75% LinkedIn click-through rate vs 0.54% benchmark
- 88% of impressions reached leadership
- Earned media: WBNS-10TV, The Pathologist, CIDRAP and more

02 VALIDATE

Accounts evaluate FebriDx[®] to demonstrate clinical and economic value in their own clinics

485

sites in evaluation (pipeline), up 20% since 15 September

- 8 Top 100 groups evaluating
- 3 new Top 100 groups committed across 50 sites
- ~0.3m ARI patients a year at those 50 sites
- Clinical, reimbursement, workflow and health-economic review

03 GO LIVE

FebriDx[®] embedded in triage protocols across networks

265

live sites across 29 states, up 50 sites since 15 September

- 5 Top 100 groups with live sites
- Midwest academic system: standardised adoption, 20+ settings
- Northeast primary care network: full deployment
- WellStreet "FebriDx-first" protocol at 44 sites

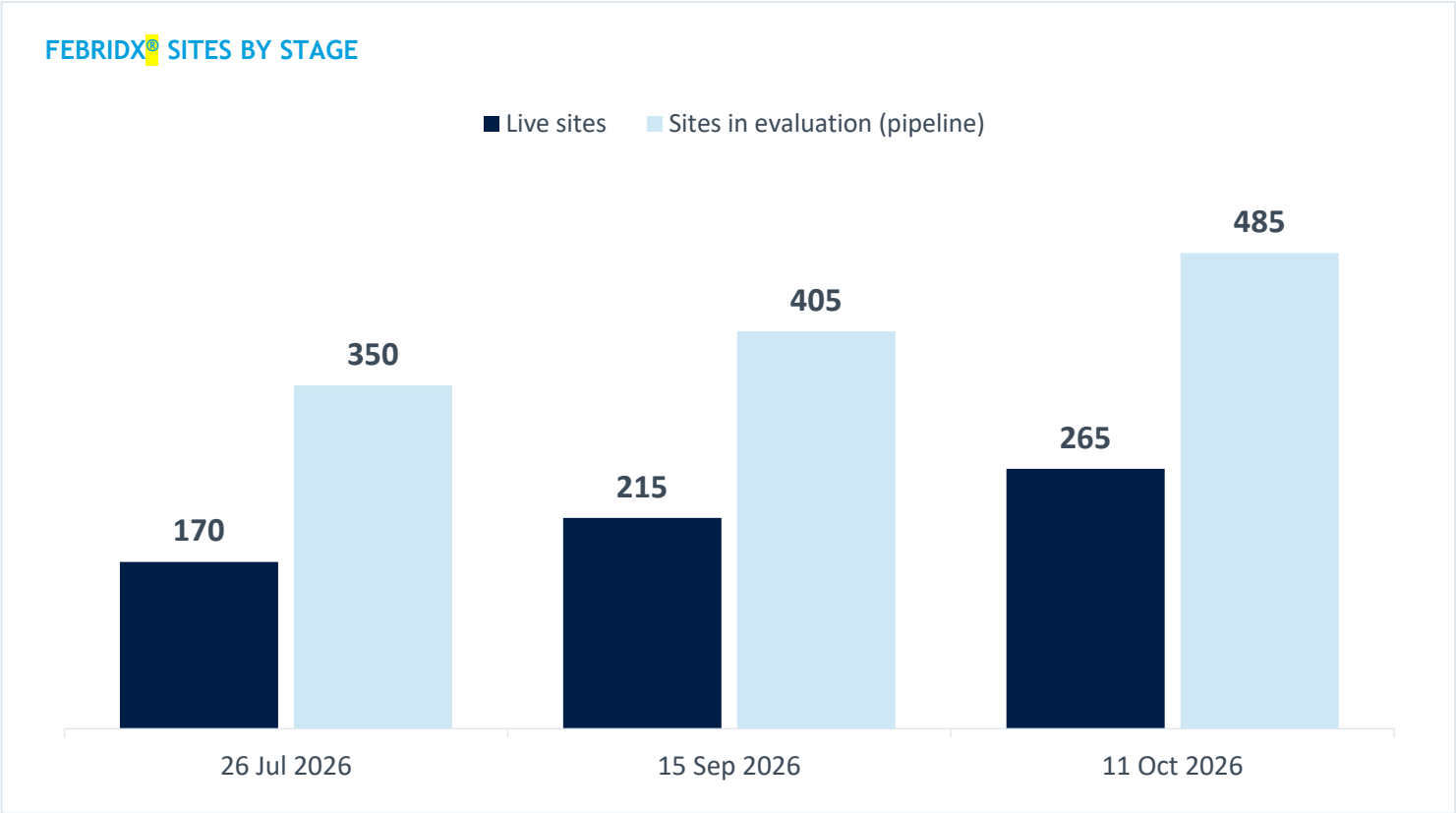
Awareness fills the pipeline → validation proves value in the account's workflow → go-live embeds FebriDx[®] in clinical protocol

1. Site metrics as at 11 October 2026. LinkedIn metrics: campaign reporting from launch on 19 August 2026; engagement does not indicate a commercial relationship. Evaluation sites are pipeline and may not convert to live sites.

Live Sites and Pipeline Continue to Grow



LIVE SITES UP 56% AND EVALUATION SITES UP 39% SINCE 26 JULY 2026 · STATES COVERED UP FROM 24 TO 29



Q1 SCORECARD	
Live sites	170 → 265
States covered	24 → 29
Top 100 groups live	5
Est. ARI visits, live sites ¹	1.1m-1.5m
Sites in evaluation	350 → 485
Top 100 groups evaluating	8
Est. ARI visits, evaluation ¹	1.9m-2.7m
Payment coverage ²	>90%

Each site added grows the base of repeat ordering through the respiratory season

Live sites are one total across Implementation Phase I (network rollout) and Phase II (standardised adoption). ¹ ~4,000–5,500 ARI visits per urgent care site a year: UCA Urgent Care Data (2025) average of ~34 patients/day/site annualised, × ~35–40% respiratory share (HCCI). ² At US\$41.38 per test, as reported 27 July 2026 (AcuityMD); preliminary.

Driving Customer Awareness

Go-to-market plan · Paid and earned media · Early campaign results

Partner Ecosystem Accelerates Adoption

LUMOS OWNS THE PRODUCT · SPECIALIST PARTNERS SUPPORT THE U.S. COMMERCIAL ENGINE



PRODUCT OWNER & MANUFACTURER · FEBRIDX COMMERCIAL LEADER

PHASESCIENTIFIC

EXCLUSIVE U.S. DISTRIBUTOR

Management of sub distributors
Tier 1 & 2 urgent care reach
with dedicated sales force

6-year agreement

acuityMD

CLAIMS DATA INTELLIGENCE

Targets highest-value accounts
by volume and payer mix

Pipeline targeting

PROspectus

REIMBURSEMENT SUPPORT

Site onboarding, billing setup
and claims tracking

Revenue enablement

cglife[®]

MARKETING PARTNER

PR, brand and omnichannel
demand generation

Brand & PR

Marketing Plan: Build, Surge, Expand



PLAN ALIGNED TO THE U.S. RESPIRATORY SEASON · JULY 2026 TO JULY 2027

BUILD Jul – Sep 2026



- Positioning and messaging
- LinkedIn campaign live
- CLIA waiver media

SURGE Oct – Dec 2026



- Respiratory season campaign
- Conferences and trade shows
- Customer case studies

EXPAND Jan – Jul 2027



- Retarget warm leads
- UCA conference in April 2027
- Full sales toolkit

Awareness builds before the season, peaks with it, and carries demand into 2027

Images: CG Life LinkedIn creative (Oct 2026); Lumos at the Texas Nurse Practitioners conference (Sep 2026); clinician consultation (Lumos image library, as used in the Bioshares presentation). Plan prepared with marketing partner CG Life.

Awareness Engine: Paid and Earned Media



FOUR PAID CHANNELS IN ONE SPRINT THROUGH THE 2026 RESPIRATORY SEASON · EARNED MEDIA ADDS INDEPENDENT VOICES

PAID MEDIA · SEPTEMBER TO NOVEMBER 2026

LinkedIn SEP – NOV Creates awareness before the search begins Static, video and document ads reach clinical and operational decision-makers at priority urgent care accounts	Paid search LATE SEP – NOV Captures demand from those already searching Branded and high-intent category terms turn searches for rapid respiratory testing into leads	Account-based media OCT – NOV Guaranteed leads from named target accounts 400 guaranteed leads from the Lumos target account list, with display and retargeting to keep accounts engaged	Endemic media ONE WEBINAR IN Q4 Builds on channels urgent care already trusts A partner webinar reaching urgent care audiences through the sites and journals they already follow
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EARNED MEDIA · SECURED AND IN PROGRESS

WBNS-10TV TV NEWS SEGMENT Major U.S. health system’s use of FebriDx® (aired 12 Oct)	The Pathologist Q&A Diagnostic and laboratory audiences	Diagnosing Dx PODCAST Brings the Lumos business story forward	CIDRAP EXPERT COMMENTARY Independent infectious disease authority	HealthLeaders EXECUTIVE INTERVIEW Reaches health system decision-makers
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All channels run together through the respiratory season, handing the sales team qualified urgent care leads

Media plan prepared with marketing partner CG Life. Earned media items other than WBNS-10TV are secured or in progress and subject to publication timing. Lead targets are campaign objectives, not forecasts.

LinkedIn: The Clinical Message Wins Again



TWO CAMPAIGNS, SAME RESULT · CLINICAL MESSAGING OUTPERFORMS LINKEDIN'S BENCHMARK



CLINICAL CREATIVE

CG Life LinkedIn ad, October 2026

CAMPAIGN 1

From 19 August 2026

6,562

impressions

0.75%

click-through rate

1.02%

clinical ad click-through

CAMPAIGN 2

2 – 22 October 2026

7,434

clinical ad impressions

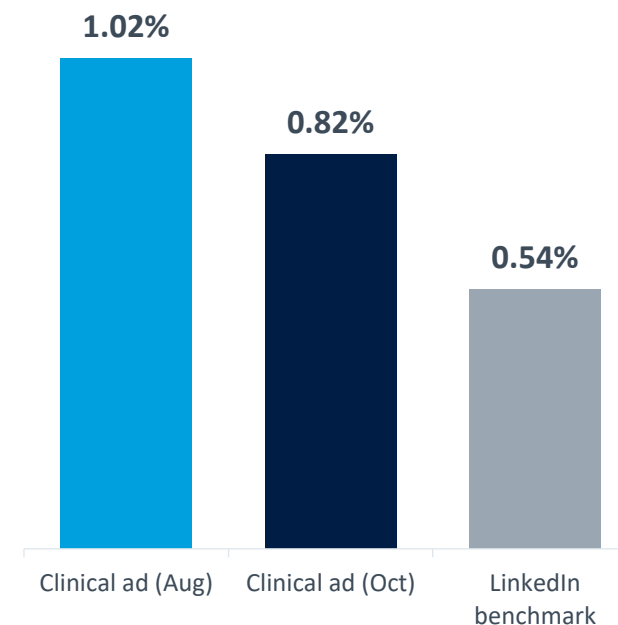
70%

of website visits from clinical ads

0.82%

top clinical ad click-through

CLICK-THROUGH RATE VS BENCHMARK



Clinical leaders respond to clinical evidence, and that now leads our creative

Source: LinkedIn Campaign Manager. Campaign 1: 19 Aug–30 Sep 2026; Campaign 2: 2–22 Oct 2026 (initial results). LinkedIn benchmark 0.54% CTR. Engagement does not indicate a commercial relationship.

Meeting Customers Face to Face



FALL CONFERENCE PROGRAM · 35 OF THE TOP 100 U.S. URGENT CARE ORGANISATIONS EXPECTED TO BE REPRESENTED

FALL CONFERENCE PROGRAM

Fall Conference Program Expands **FebriDx®** Reach

35 of the top 100 U.S. urgent care organizations expected to be represented

Texas Nurse Practitioners Annual Conference

September 24–27

Galveston, Texas

North East Regional Urgent Care Association (NERUCA)

October 4–6

Uncasville, CT

Urgent Care Centers Congress

October 26–27

Orlando, Florida

WE ARE KICKING OFF DAY 2

AT THE TNP ANNUAL CONFERENCE

NEW FOR COLD & FLU SEASON

FebriDx is now CLIA-Waived

September 24–27, 2026

Moody Gardens · Galveston, Texas

Visit us at booth #523

FALL 2026 SCHEDULE

SEP 24-27 Texas Nurse Practitioners	COMPLETE
Galveston, TX · booth #523	
OCT 4-6 North East Regional Urgent Care Association	COMPLETE
Uncasville, CT	
OCT 26-27 Urgent Care Centers Congress	THIS WEEK
Orlando, FL	

Conferences put FebriDx® in the hands of the clinicians who decide on protocol

Event dates and Top 100 attendance per Lumos fall conference program. Status as at 23 October 2026; please confirm NERUCA status before presenting. Attendee photos: confirm consent for public use.

TV Coverage: Major Health System Uses FebriDx®



EARNED MEDIA · AIRED 12 OCTOBER 2026



"This test will help us differentiate between bacterial infection and non-bacterial etiology."

Luca Delatore, MD · Associate Professor, Emergency Medicine, Ohio State Wexner Medical Center

What this coverage means for FebriDx®

- 1 Validation from a major U.S. university health system
- 2 Showcases a novel solution to an unmet need
- 3 Created awareness and interest from other healthcare organisations (2 in Ohio)

Ohio State University Health System at-a-glance

100+
Health care sites

2,000+
providers

Sources: WBNS-10TV (12 October 2026); Ohio State Wexner Medical Center; Ohio State autumn 2026 enrollment census. Figures describe Ohio State's footprint, not FebriDx deployment.

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FebriDx® in Practice: Stories from the Field



EARLY EXPERIENCES SHARED WITH LUMOS BY CLINICIANS AND CUSTOMERS



FebriDx® arriving at a customer site

1

Prompted further evaluation

A patient tested negative for COVID, flu and strep. A bacterial FebriDx® result prompted a chest X-ray, which revealed pneumonia.

2

Supported an earlier decision

Two days into sinus symptoms, a bacterial result helped the provider decide on treatment, potentially avoiding a return visit.

3

Patients asking for FebriDx®

After the WBNS-10TV coverage, patients asked for FebriDx® at a large multisite Ohio urgent care group, which has started implementation talks.

Awareness reaches patients too, creating demand that pulls FebriDx® into new accounts

Individual experiences reported to Lumos; anecdotal and not representative of clinical study results. FebriDx® is used together with other clinical findings. Photo: customer permission to be confirmed before public use.

Accounts Validating and Going Live

Four-stage framework · Top 100 progress · Network go-lives · Respiratory season

Four-Stage Framework: Where Accounts Stand



AS AT 11 OCTOBER 2026 · TRACKING HOW PRIORITY ACCOUNTS MOVE FROM ENGAGEMENT TO PROTOCOL-DRIVEN USE

01 QUALIFIED OPPORTUNITIES

Priority accounts identified and engaged on patient volume, payer mix, strategic fit and network scale

02 EVALUATION PHASE

Clinical and economic validation across one or more sites to support broader adoption decisions

03 IMPLEMENTATION PHASE I

Network rollout: deployment across multiple sites after validation of utility, workflow and reimbursement

04 IMPLEMENTATION PHASE II

Standardised adoption: FebriDx® embedded in standing orders, triage protocols and clinical pathways

All Urgent Care Groups

Includes a significant number of sites identified by Lumos and its partners, including accounts outside the Top 100. Not counted in the metrics shown.

485

sites in active evaluation

1.9m-2.7m

est. ARI visits a year¹

8

Top 100 groups

LIVE · PHASE I AND PHASE II COMBINED

265

live sites

Phase I and Phase II are labels within the 265 total, not additive.

29

states covered

1.1m-1.5m

est. ARI visits a year¹

5

Top 100 groups

US\$41.38

CMS rate for PLA code 0442U²

Lumos will keep reporting on this framework so investors can follow conversion

¹ ~4,000–5,500 ARI visits per urgent care site a year (UCA Urgent Care Data 2025; HCCI). ² Per-test rate on the CMS Clinical Laboratory Fee Schedule for CPT® PLA code 0442U; actual payment varies by payer. Evaluation metrics include only sites under active engagement. Evaluation sites are pipeline and may not convert.

Top 100 Focus: 13 Groups Now Evaluating or Live



THREE MORE TOP 100 URGENT CARE GROUPS COMMITTED TO EVALUATE FEBRIDX® DURING THE QUARTER



NEW IN Q1: THREE TOP 100 GROUPS ENTER CLINICAL AND ECONOMIC VALIDATION · PIPELINE

GROUP 1 Southern U.S.	Nonprofit health system with 25+ hospitals and 400+ locations	30+ urgent care clinics ~400,000 ARI patients a year
GROUP 2 Midwest	Integrated health system: 65,000+ caregivers, ~5.0m visits a year, ~170 locations	30+ urgent care clinics >150,000 ARI patients a year
GROUP 3 Northeast metro	Physician-led multispecialty group: ~500 providers across high-volume locations	50+ locations ~300,000 ARI visits a year

Together: 120+ urgent care sites · 50 sites now evaluating · ~300,000 ARI patients a year at those 50 sites

Per Q1 FY27 quarterly announcement (27 October 2026); accounts are not named. Top 100 share: ~40% of U.S. urgent care clinics. Validation covers clinical performance, reimbursement, workflow and health-economic impact; groups in evaluation may not proceed to rollout.

Going Live: Standardised Adoption Grows



ACCOUNTS ARE EMBEDDING FEBRIDX® IN PROTOCOL ACROSS THEIR NETWORKS · URGENT CARE AND NOW PRIMARY CARE

STANDARDISED ADOPTION	FULL NETWORK DEPLOYMENT	THE PROOF POINT
Midwest academic health system Top 100 urgent care group 20+ outpatient settings live • All providers trained in September • Moved to standardised adoption across 20+ outpatient settings • Network of 100+ locations and >2.5m outpatient visits a year	Northeast primary care network New in Q1 · primary care 300+ primary care providers • Committed to immediate deployment at all 12+ locations • >0.1m ARI visits a year • Opens a second front beyond urgent care	WellStreet Urgent Care “FebriDx-first” protocol 44 live sites • FebriDx® is the default order at triage • Pilot, validate, expand • 200+ sites across the WellStreet network

The repeatable pathway: train every provider → embed in protocol → roll out across the network

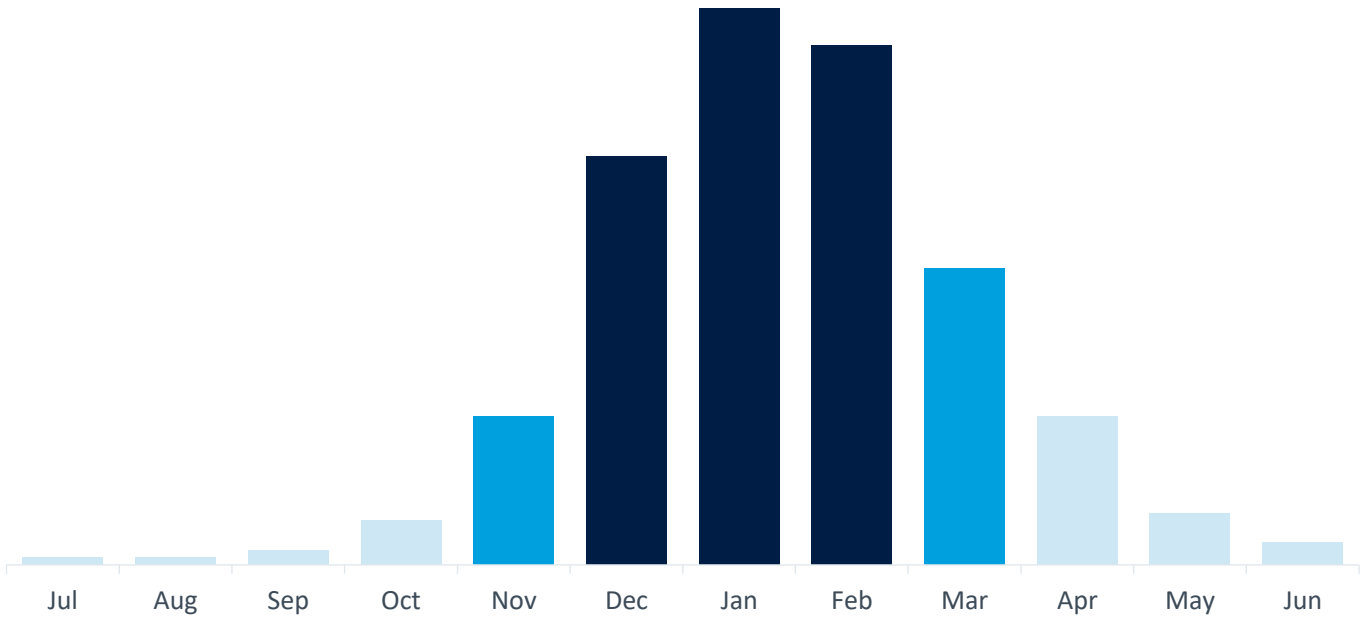
Per Q1 FY27 quarterly announcement (27 October 2026) and ASX announcement of 15 September 2026; accounts other than WellStreet are not named. Network size figures describe each account’s footprint, not FebriDx® deployment. Deployment scope remains subject to each account’s decisions.

Positioned for the U.S. Respiratory Season



FLU ACTIVITY TYPICALLY RAMPS IN NOVEMBER, PEAKS DECEMBER TO FEBRUARY AND RUNS THROUGH MARCH

ESTIMATED U.S. FLU ILLNESSES BY MONTH, 2024-25 SEASON (MILLIONS)



READY FOR THE SURGE

750

sites live or evaluating entering peak season

US\$1.0m

inventory built ahead of the season

Phase 2

surge campaign running October to December

In-house

Carlsbad manufacturing; new facility scheduled for end CY2026

Peak respiratory demand arrives as more networks move FebriDx® into protocol

Monthly profile as presented from CDC data: CDC, Flu Season (activity usually peaks December–February); CDC, 2024–25 season summary (activity increased mid-November and peaked early February 2025). Values approximate. 750 = 265 live + 485 in evaluation (pipeline).

Q1 FY27 Financial Results

Revenue · Cash flow · Paediatric study · Manufacturing · Priorities

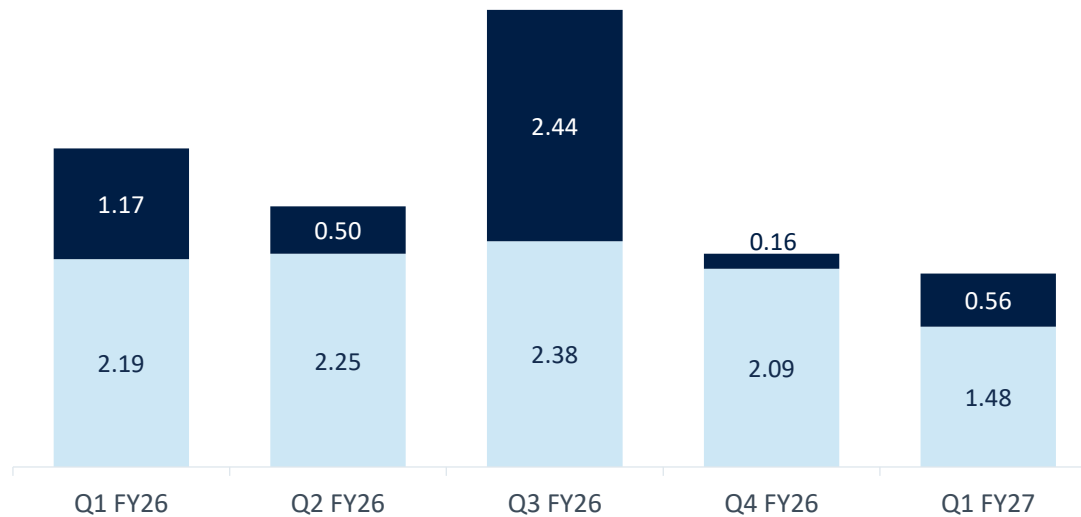
Q1 FY27 Revenue: Product Revenue Up 224%



FEBRIDx® PRODUCT SALES GROWING AS U.S. SITES GO LIVE • SERVICES LOWER ON HOLOGIC IP AMORTISATION

QUARTERLY REVENUE (US\$M)

■ Services ■ Products



Q1 FY27 VS Q1 FY26 (UNAUDITED)

US\$000	Q1 FY27	Q1 FY26	Change
Products	564	174	+224%
Products – exclusivity fee	–	1,000	n/m
Services	1,478	2,189	(32%)
Total revenue	2,042	3,363	(39%)

- Products US\$0.6m, up 224%; FebriDx® sales up 351% excluding the one-time US\$1.0m PHASE exclusivity fee in the prior quarter
- Services US\$1.5m: US\$0.5m lower Hologic IP amortisation after the fFN project timeline extension; excluding this, US\$1.4m vs US\$1.6m
- Development work continued on 12 projects, including Hologic, Micro-Pak, TeleMedVet and Aptatek

Product revenue is starting to carry the business as live sites grow

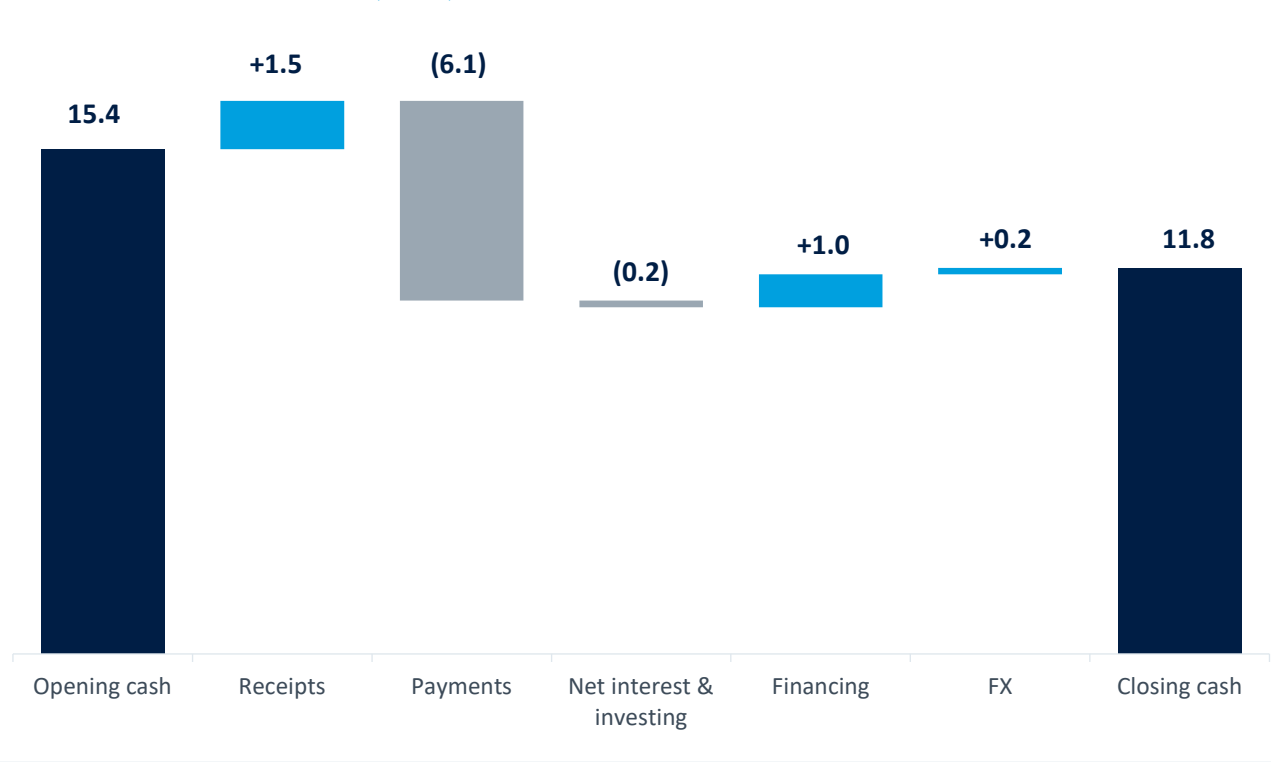
Unaudited. Q1 FY26 products include the US\$1.0m PHASE exclusivity fee. FebriDx® revenue is recognised on shipment from Lumos to PHASE Scientific; current PHASE shipments are drawn against the US\$5.0m prepayment. Totals may not add due to rounding.

Q1 FY27 Cash Flow: Investing Ahead of the Season



DEBT-FREE WITH US\$11.8M CASH AT 30 SEPTEMBER 2026 · OPERATING OUTFLOW INCLUDES US\$1.0M INVENTORY BUILD

CASH MOVEMENT IN Q1 FY27 (US\$M)



KEY MOVEMENTS

US\$1.5m

customer receipts; PHASE shipments drawn against the US\$5.0m prepayment, so revenue without a cash receipt

US\$6.1m

payments to suppliers and employees, including US\$1.0m inventory, sales and marketing, and the paediatric study

US\$4.7m

net operating cash outflow

US\$0.1m

Carlsbad capacity capex; ~US\$0.4m remaining in 1H FY27

Debt-free, with spend directed at inventory, FebriDx® market awareness and account activation for the U.S. flu season

Paediatric Study Update



BARDA-FUNDED U.S. STUDY IN CHILDREN AGED 2–12 · CURRENT 12–64 CLIA-WAIVED COMMERCIALISATION IS UNAFFECTED

~400

patients enrolled

Up from 250 at Milestone 7 in May 2026

+3

hospital EDs in Q2 FY27

Added to lift enrolment and bacterial-positive cases

US\$2.6m

BARDA funding received

Of up to US\$6.2m non-dilutive funding

15%-20%

potential U.S. market expansion

If the paediatric indication is achieved

WHERE THE STUDY STANDS

- Study commenced 22 October 2025 and was expected to reach its statistical endpoint by the end of CY2026
- Total enrolment and bacterial-positive cases are below the study plan
- Three hospital emergency departments are being added in Q2 FY27

NEXT STEPS

- Lumos and BARDA will discuss the study with the FDA by the end of CY2026, including whether adjusted parameters could allow the endpoint to be reached on a revised basis
- No change has been agreed; Lumos will update the market if the study design or timetable changes

The paediatric program is upside to the core 12–64 opportunity already being commercialised

Per Q1 FY27 quarterly announcement (27 October 2026). No BARDA milestone was triggered in Q1 FY27. Study outcomes, any FDA submission and any paediatric indication are subject to study results and regulatory review. Market expansion estimate per Lumos.

FebriDx® is manufactured in Carlsbad, California



VERTICALLY INTEGRATED MANUFACTURING · ISO 13485 CERTIFIED · NEW FACILITY SCHEDULED FOR END CY2026



NEW LUMOS FACILITY · CARLSBAD, CALIFORNIA

FebriDx® is manufactured in-house, not outsourced. Every test is made by Lumos in Carlsbad, CA.

60%

PRODUCT GROSS MARGIN
at launch

10m

TESTS A YEAR ONCE NEW
FACILITY VALIDATED

ISO 13485

CERTIFIED FACILITY

01 Control of cost and quality

In-house production protects margin and supply for a US-reimbursed product

02 New facility scheduled to open by end of CY2026

Once validated it lifts capacity to up to 10 million tests a year

03 Ahead of demand, not behind it

Q1 capex US\$0.1m, ~US\$0.4m remaining in 1H FY27; current site covers more than two years of forecast volume

US-based manufacturing keeps margin, quality and supply under Lumos control

FY27 Priorities



BUILDING MARKET AWARENESS IS NOW THE FIRST PRIORITY • EACH STEP FEEDS PIPELINE CONVERSION AND UTILISATION

PRIORITY	FY27 FOCUS
01 Build market awareness	Execute the marketing plan to drive awareness and grow the pipeline
02 Convert the pipeline	Move the 485 sites in evaluation to live status, prioritising Top 100 urgent care groups
03 Drive utilisation	Replicate the “FebriDx-first” protocol so tests per site per month compound across live networks
04 Broaden payer coverage	Progress formal coverage policies and expand private payer coverage beyond Medicare
05 Bring on new capacity	Complete and validate the new Carlsbad facility, lifting capacity toward 10 million tests a year
06 Expand the clinical opportunity	Progress the BARDA-funded paediatric study (ages 2–12), which could expand the U.S. market by an estimated 15–20%

WHAT WE WILL REPORT ON

- Live sites and states covered
- Sites and Top 100 groups in evaluation
- Accounts moving into rollout and standardised adoption
- Product revenue and payment coverage
- Paediatric study and FDA discussion outcome

NEAR-TERM AGM 13 November 2026 • Peak U.S. respiratory season • FDA paediatric discussion (end CY2026) • New Carlsbad facility (end CY2026)

Priorities are statements of intent, not forecasts or guidance. Pipeline metrics as at 11 October 2026. New facility capacity is subject to validation; paediatric study progress and any FDA submission are subject to study outcomes and regulatory review.



Thank You • Q&A

Lumos Diagnostics Holdings Limited | ASX: LDX | OTC: LDXHF

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Questions welcome. Awareness is building, 485 sites are validating FebriDx® and 265 sites are live across 29 states as Lumos enters the U.S. respiratory season.

This presentation contains forward-looking statements. Past performance is not necessarily indicative of future results.

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