Lumos Diagnostics Holdings Limited

Annual General Meeting – CEO Presentation

FY26 Review and U.S. Commercial Update

13 November 2026

lumosdiagnostics.com

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Sam Lanyon

Non-Executive Chair



Doug Ward

CEO and Managing Director



Catherine Robson

Non-Executive Director



Bronwyn Le Grice

Non-Executive Director



Aizaz Syed

Non-Executive Director

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Lumos develops, manufactures and distributes innovative diagnostic products – delivering actionable information, in real time, at the point-of-care.

Improving the practice of medicine.

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Lumos Business Overview

LUMOS DIAGNOSTICS

LUMOS DIAGNOSTICS

PRODUCTS

- FebriDx®
- Other Products

COMMERCIAL SERVICES

- Development
- Contract Manufacturing





People and Capability drive value - able to leverage R&D, IP, manufacturing scale, medical, quality and regulatory skillset across Lumos' Products and Commercial Services business.

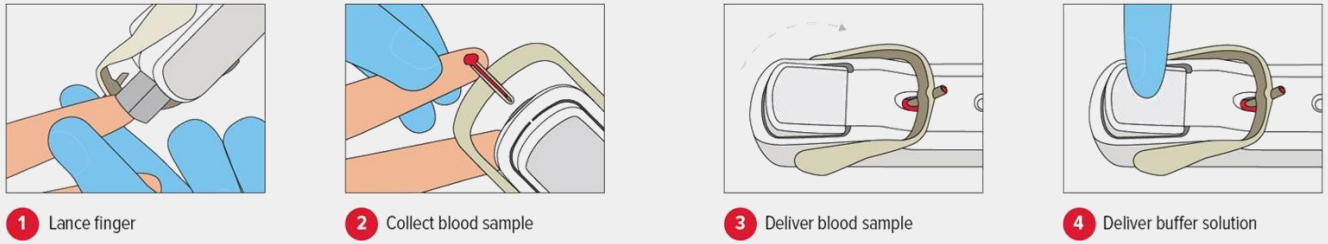
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FebriDx® at a Glance

A UNIQUE POINT-OF-CARE TEST TO SUPPORT ANTIBIOTIC TREATMENT DECISIONS

FebriDx® helps clinicians, together with other clinical findings, rapidly differentiate a bacterial from a non-bacterial acute respiratory infection after 10 minutes, in patients aged 12 to 64 years.

HOW IT WORKS



READING THE RESULT

BACTERIAL RESULT



Supports a decision to treat with antibiotics

NON-BACTERIAL RESULT



NON-BACTERIAL RESULT



Supports managing the patient without antibiotics

CLINICAL PERFORMANCE[1]

98.7%

negative predictive value to rule out a bacterial host response

93.2%

sensitivity for a bacterial-associated host response

10 min

result read after 10 minutes from a fingerstick blood sample

Prospective, blinded study: 520 patients across 20 U.S. emergency, urgent care and primary care sites (JAMA Netw Open, 2022)

Source: (1) Shapiro NI et al., JAMA Netw Open. 2022;5(10):e2234588. Prospective, blinded study of 520 participants with suspected acute respiratory infection at 20 U.S. outpatient sites (emergency department, urgent care, primary care) vs an adjudicated reference standard; enrolled patients aged 1 year and older. FebriDx® is a host-response test and does not identify an infecting organism.

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Company Snapshot

ASX: LDX · MARKET DATA AS AT 11 NOVEMBER 2026 · SHARE PRICE AND EXECUTION MILESTONES

CAPITAL STRUCTURE	
Shares on issue	**988.2m**
Options – investors	**60.4m**
Options & performance rights – employees	**61.2m**
Borrowings	**Nil**

MARKET CAPITALISATION (AUD)	
Share price[1]	**A$0.073**
Market value	**A$72.1m**
Cash[2]	**A$17.1m**
Enterprise value	**A$55.0m**

SUBSTANTIAL SHAREHOLDERS[3]	
Tenmile Ventures	**18.9%**
Ryder Capital	**16.4%**



1 **Jul 25** PHASE Scientific exclusive U.S. distribution

2 **Oct 25** WellStreet "FebriDx-first" protocol

3 **Mar 26** FDA CLIA waiver + A$20m capital raise

4 **Apr 26** US$5.0m PHASE prepayment received

5 **Nov 26** WellStreet 44 to 141 sites; 365 U.S. live sites

365
U.S. sites in implementation

13
Top 100 urgent care groups evaluating or live

US$11.8m
cash at 30 Sep 2026, no debt

[1] ASX close 11 Nov 2026. [2] At 30 Sep 2026: US$11.8m at FX 0.69. [3] Latest substantial holder notices. Site metrics per ASX announcement of 9 Nov 2026.

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FY26 and Year-to-Date Highlights

REGULATORY, REIMBURSEMENT, DISTRIBUTION, ADOPTION AND BALANCE SHEET

01

>US$1bn

U.S. TAM per annum

FDA CLIA waiver granted

March 2026 clearance enables point-of-care use in urgent and primary care, a 15-fold market expansion

02

US$41.38

Medicare rate per test

Reimbursement secured

Recognition across all 7 Medicare Administrative Contractors; private payor engagement commenced

03

US$317m

minimum contracted value

PHASE Scientific partnership

Six-year exclusive U.S. distribution agreement; US$5.0m prepayment received April 2026

04

365

U.S. sites in implementation

Commercial rollout accelerating

WellStreet expanding from 44 to 141 sites; a further 495 sites in evaluation

05

US$11.8m

cash, no debt

Debt-free balance sheet

Cash at bank at 30 September 2026, directed at the FebriDx® U.S. rollout

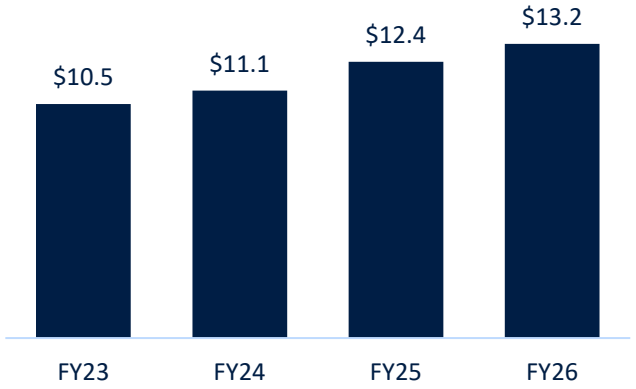
Key foundations are in place; through the 2026/27 season we are building awareness, validation and adoption

TAM is a company estimate. Site metrics at 11 Oct 2026 unless stated; 365 per ASX announcement of 9 Nov 2026; 495 evaluation sites at 11 Nov 2026. Evaluation sites may not convert. Cash at 30 Sep 2026, unaudited.

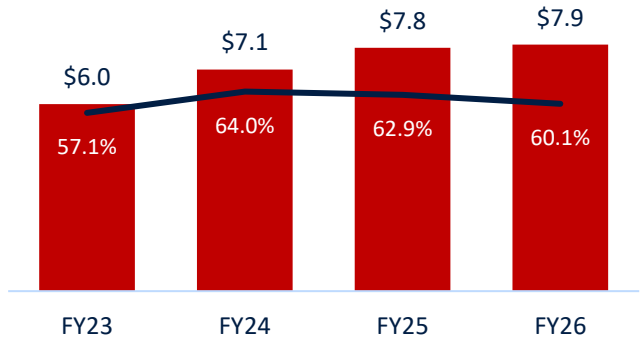
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Financials Summary - Annual

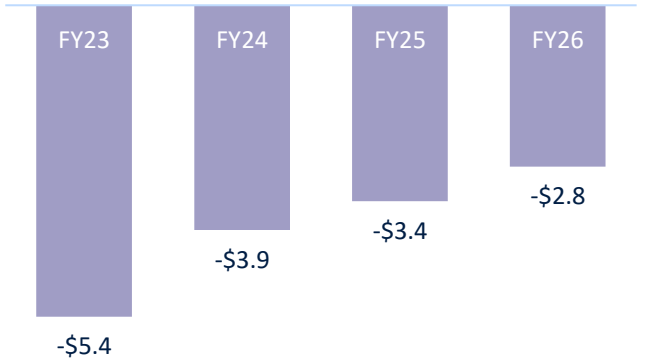
Revenue (US$M)



Gross Profit (US$M) & Margin



Adjusted EBITDA (US$M)[1]



Financial Highlights

Revenue Growth

US$13.2M

FY26, up 6% YoY.
FebriDx up 875% YoY

Gross Profit & Margin

US$7.9M

GM 60.1% in FY26 (FY25: 62.9%)

Adjusted EBITDA Loss Narrowed

(US$2.8M)

Down 18% from (US$3.4M) in FY25

1. Adjusted EBITDA excludes share-based payments and one-off impairments and expenses.

FY27 Year to Date at a Glance

QUARTER ENDED 30 SEPTEMBER 2026 AND UPDATES TO 9 NOVEMBER 2026

365

U.S. sites on implementation

Including WellStreet expansion to 141 sites (9 Nov 2026)

495

sites in evaluation

Pipeline at 9 Nov 2026, after 97 WellStreet sites moved to live

13

Top 100 groups

Evaluating or live: 5 with live sites, 8 in evaluation

+224%

product revenue

Q1 FY27: US$0.56m (pcp: US$0.17m)

US$11.8m

cash, no debt

At 30 September 2026; spend directed at the respiratory season

YEAR-TO-DATE HIGHLIGHTS

- **WellStreet standardised adoption:** 44 to 141 sites in Ohio, Georgia and Michigan; all 200+ anticipated by 31 Dec 2026
- **Network adoption:** Midwest academic system (Top 100) live across 20+ outpatient settings
- **Three more Top 100 groups** evaluating 50 sites, ~0.3m ARI patients a year
- **Primary care traction:** Northeast network, 300+ providers, full deployment

FROM THE CEO

"The decision by WellStreet, one of the leading urgent care operators in the U.S., to standardise FebriDx® within its triage protocols across additional locations is a strong endorsement of the product's clinical value."

Doug Ward, CEO & Managing Director, 9 November 2026

Meaningful networks live and in evaluation; our focus is adding more and driving utilisation across them

Site metrics at 11 Oct 2026 unless stated; 365 and WellStreet per ASX announcement of 9 Nov 2026; 495 evaluation sites at 11 Nov 2026. Q1 FY27 financials unaudited, in US$. Evaluation sites may not convert. Lumos remains cash flow negative.

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FebriDx Opportunity, Commercial Strategy and Traction

Why the Respiratory Season Matters for FebriDx®

THE SEASON BRINGS MORE PATIENTS AND MORE ANTIBIOTIC DECISIONS, AND MOST ARE NOT FLU

1 WHEN: THE SEASON BRINGS THE PATIENTS



2 WHO: THE PATIENT IN FRONT OF THE CLINICIAN · 100 outpatients with ARI in flu season[1]

100
patients with acute respiratory infection

~23
flu confirmed
Even here, 29% were still prescribed an antibiotic[1]

~77
not flu: bacterial or non-bacterial? Antibiotic or not?

THE UNMET NEED
~50%
of ARI antibiotic prescriptions may be unnecessary[2]

GETTING IN POSITION FOR THE SURGE

365
U.S. sites on implementation, including WellStreet; 495 in evaluation

70-80%
of WellStreet visits are ARI in cold and flu season; FebriDx® offered under protocol

Phase 2
surge campaign running October to December

Respiratory Tracker
Weekly U.S. update from CDC and Epic Research data
info.lumosdiagnostics.com/respiratory-outlook-tracker

A flu test answers "is it flu?" FebriDx® supports the bigger decision: does this patient need an antibiotic?

(1) Havers FP et al., JAMA Netw Open 2018;1(2):e180243: 14,987 U.S. outpatients aged 6 months and older with ARI, 2013–15 flu seasons; influenza confirmed in 23%, of whom 29% were prescribed an antibiotic; figures rounded and illustrative. (2) Fleming-Dutra KE et al., JAMA 2016;315(17):1864–73. Season strip: estimated U.S. flu illnesses by month, CDC 2024–25 season summary, values approximate; 2026–27: CDC FluView, week ending 31 October 2026 (an earlier start does not necessarily mean a higher peak). 365 sites per ASX announcement of 9 November 2026; 495 in evaluation as at 11 November 2026 (pipeline). 70–80% is a WellStreet estimate per the same announcement.

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WellStreet Shows How FebriDx® Scales

6TH LARGEST U.S. URGENT CARE NETWORK · PILOT → VALIDATE → PROTOCOL → NETWORK

1

pilot site

October 2025, Atlanta (Piedmont JV)

44

locations

April 2026, after CLIA waiver

141

locations

November 2026: Ohio, Georgia, Michigan

200+

locations anticipated

All WellStreet markets by 31 December 2026

HOW THE PROTOCOL WORKS

- FebriDx® is offered to patients presenting with acute respiratory infection symptoms
- Results are available to the provider before entering the examination room
- WellStreet estimates 70–80% of visits in cold and flu season are ARI; >1 million ARI presentations a year



WHAT WELLSTREET SAYS

"FebriDx has become a valuable tool to our clinicians… we have seen measurable improvement in antibiotic stewardship that can be attributed to the introduction of this test in our centers.

Dr Brian S. Bobb
Senior Medical Officer, WellStreet Urgent Care

The same pathway is under way with other Top 100 networks: train every provider, embed in protocol, roll out

Per ASX announcements of 16 October 2025, 14 April 2026 and 9 November 2026. ARI estimates per WellStreet. Expansion to all WellStreet locations is anticipated and remains subject to WellStreet decisions.

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Where We Focus: The Top 100 Urgent Care Networks

ONE NETWORK DECISION CAN MOVE MANY SITES · WELLSTREET IS ONE OF THE TOP 100

FROM THE MARKET TO OUR FOCUS

~174,000 — U.S. urgent care and primary care sites[1]

~68m ARI visits a year across these sites[2]

14,442 — U.S. urgent care sites[3]

5,722 — sites run by the Top 100 operators (40%)[3]

56% of Top 100 sites are hospital-affiliated vs 40% of all centres[3]

13 — of the Top 100 live or evaluating[4]

5 live, 8 evaluating

WHY THE TOP 100 FIRST

One decision, many sites

WellStreet went from 1 pilot site to 141 locations, with all 200+ anticipated by 31 December 2026

Protocol-ready buyers

Top 100 networks set standing orders and triage protocols once, across every site

Primary care follows

~160k primary care sites, led by a Northeast network in full deployment

13 of the Top 100 are live or evaluating; each further network decision can move many sites at once

[1] CMS CLIA database (March 2024) and U.S. urgent care industry data; ~160k primary care sites is a Lumos internal estimate. [2] Precision Business Insights, US Acute Respiratory Infections, 2024. [3] Journal of Urgent Care Medicine, 1 April 2025 (Top 100 by number of locations). [4] As at 11 October 2026 (latest disclosed): 5 Top 100 groups live, 8 evaluating. WellStreet per ASX announcement of 9 November 2026; expansion to all locations remains subject to WellStreet decisions. Bars not to scale.

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Our FY27 Story: Awareness, Validation, Go-Live

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

01 BUILD AWARENESS

Put FebriDx® in front of decision-makers at the Top 100 urgent care organisations

7,100+

clinical and operational decision-makers at Top 100 groups targeted on LinkedIn

- Account-based marketing: 400 guaranteed leads, including Top 100 accounts
- Google Ads: search captures wider demand, with a Top 100 account overlay
- Earned media: WBNS-10TV (Ohio), The Pathologist, CIDRAP and more
- One coordinated campaign across LinkedIn, ABM, search and earned media

02 VALIDATE

Accounts prove clinical and economic value in their own clinics

495

sites in evaluation (pipeline) at 9 November, after 97 WellStreet sites moved to live

- 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 LIVE

FebriDx® embedded in triage protocols across networks

365

U.S. sites on implementation (9 Nov 2026), up from 265 live sites at 11 October

- WellStreet: 44 to 141 sites across Ohio, Georgia and Michigan; all 200+ anticipated by 31 Dec 2026
- 5 Top 100 groups with live sites
- Midwest academic system: standardised adoption, 20+ settings
- Northeast primary care network: full deployment

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

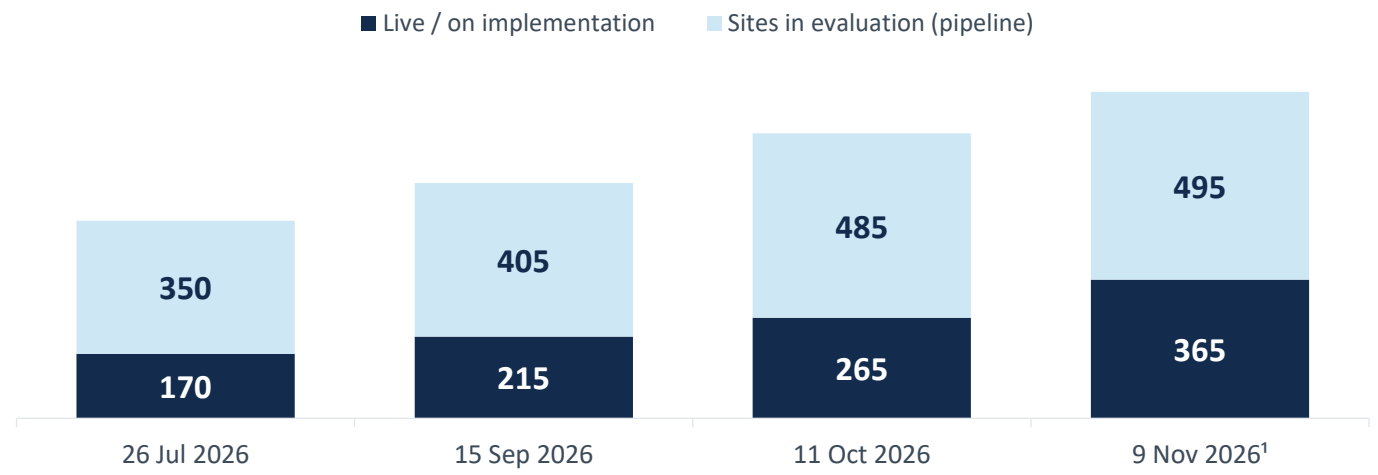
Site metrics as at 11 October 2026 unless stated. 365 U.S. sites on implementation and WellStreet expansion per ASX announcement of 9 November 2026; 495 evaluation sites at 9 November 2026, after 97 WellStreet sites moved to live. Evaluation sites are pipeline and may not convert to live sites.

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We Have Delivered What We Said on Sites

U.S. SITES ON IMPLEMENTATION UP FROM 170 TO 365 SINCE 26 JULY 2026 · 495 SITES IN EVALUATION

FEBRIDX® SITES BY STAGE



ON IMPLEMENTATION · 365 SITES

5	1.5m–2.0m
Top 100 groups	est. ARI visits a year[2]

IN EVALUATION (PIPELINE) · 495 SITES

8	2.0m–2.7m
Top 100 groups	est. ARI visits a year[2]

STATED VS DELIVERED

14 APR 2026 — Delivered

We said: WellStreet to launch at 43 locations over the next two months

Result: 44 locations live

27 JUL 2026 — On track

We said: All WellStreet sites over the next 3–9 months

Result: 141 committed; all 200+ anticipated by 31 Dec 2026

FY27 PRIORITY — In progress

We said: Move sites in evaluation to live

Result: 365 on implementation; 495 in evaluation

Next checkpoint: all 200+ WellStreet sites anticipated by 31 December 2026

Site counts at 26 July, 15 September and 11 October 2026 per quarterly reports and ASX announcements. [1] 9 November 2026 per ASX announcement: 365 U.S. sites on implementation, including 97 WellStreet locations moved from evaluation; 495 sites in evaluation (pipeline; may not convert). Live sites combine Implementation Phase I (network rollout) and Phase II (standardised adoption). Top 100 group counts as at 11 October 2026 (latest disclosed); WellStreet is one of the 5 live groups. [2] Estimates: ~4,000–5,500 ARI visits per urgent care site a year (UCA Urgent Care Data 2025, ~34 patients/day/site annualised, × ~35–40% respiratory share, HCCI). Commitments per ASX announcements of 14 April and 27 July 2026. Expansion to all WellStreet locations remains subject to WellStreet decisions.

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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.

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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

New Lumos facility in Carlsbad, California, scheduled to open by end CY2026; stated annual capacity subject to completion of validation. Margin and capacity as previously reported.

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FY27 Priorities

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 sites in evaluation to live status, prioritising Top 100 urgent care groups, and complete the WellStreet rollout to 200+ locations
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 · WellStreet 200+ locations (by 31 Dec 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 9 November 2026. New facility capacity is subject to validation; paediatric study progress and any FDA submission are subject to study outcomes and regulatory review.

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Near-Term Catalysts to Watch

MILESTONES OVER THE NEXT SIX MONTHS · ALL PREVIOUSLY DISCLOSED

CATALYST	TIMING AND WHAT TO WATCH
01 **WellStreet network rollout**	From 141 to all 200+ locations, anticipated by 31 December 2026
02 **Peak U.S. respiratory season**	December to February: utilisation across live networks
03 **Top 100 conversions**	8 Top 100 groups in evaluation moving to rollout
04 **FDA paediatric discussion**	With BARDA, by end CY2026; market updated on any changes
05 **New Carlsbad facility**	Scheduled to open by end CY2026, then validation
06 **Q2 FY27 quarterly report**	Late January 2027: sites, pipeline, product revenue and cash

HOW WE WILL UPDATE THE MARKET

- Material account decisions by ASX announcement
- Quarterly site and pipeline scorecard
- Product revenue and payment coverage
- Paediatric study and FDA outcome
- Carlsbad facility validation

Catalysts are expected events, not forecasts or guidance. Timing of customer decisions, FDA discussions and facility validation is outside Lumos' full control. Pipeline metrics as at 11 October 2026.

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Thank You

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