ARTRYA®
Coronary Artery Disease.
We see you.

2026 Chair and CEO Annual General Meeting Address and Presentation

PERTH, Australia, 13 November 2026: Artrya Limited (ASX: AYA) (**Artrya** or the **Company**), a medical technology company commercialising its Salix® AI-powered cloud platform, for the real time, point of care assessment and management of coronary artery disease globally, advises that the Chair and CEO Presentation to the Annual General Meeting of Shareholders to be held at 11:30am AWST today are attached to this announcement.

The AGM will be held at Artrya's office, 1257 Hay Street, West Perth, Western Australia.

- Ends -

This ASX Announcement is authorised for release by the Board of Artrya Limited.

About Artrya

Artrya Limited (ASX:AYA) is an Australian medical technology company developing AI-powered solutions to improve the detection and management of coronary artery disease. Its proprietary software analyses coronary CT scans to Identify key biomarkers of heart disease, supporting clinicians in diagnosing patients more accurately and efficiently. Artrya's mission is to advance cardiac care through Innovative technology, with regulatory and commercial activities underway across key international markets.

For more information visit **www.artrya.com** or follow us on LinkedIn at **www.linkedin.com/company/artrya**

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Forward Looking Statements

This Announcement may contain forward-looking statements, including estimates, projections and other forward-looking information (**Estimates** and **Projections**). Forward-looking statements can generally be identified by the use of forward-looking words such as “expect”, “anticipate”, “likely”, “intend”, “should”, “could”, “may”, “predict”, “plan”, “propose”, “will”, “believe”, “forecast”, “estimate”, “target”, “outlook”, “guidance” and other similar expressions within the meaning of securities laws of applicable jurisdictions and include, but are not limited to, indications of, or guidance or outlook on, future earnings or financial position or performance of Artrya. The Estimates and Projections are based on information available to Artrya as at the date of the Announcement, are based upon management’s current expectations, estimates, projections, assumptions and beliefs in regards to future events in respect to Artrya’s business and the industry in which it operates which may in time prove to be false, inaccurate or incorrect. The Estimates and Projections are provided as a general guide and should not be relied upon as an indication or guarantee of future performance. The bases for these statements are subject to risk and uncertainties that might be out of control of Artrya and may cause actual results to differ from the Announcement. No representation, warranty, or guarantee, whether express or implied, is made or given by Artrya in relation to any Estimates and Projections, the accuracy, reliability, or reasonableness of the assumptions on which the Estimates and Projections are based, or the process of formulating any Estimates and Projections, including that any Estimates and Projections contained in this Announcement will be achieved. Artrya takes no responsibility to make changes to these statements to reflect change of events or circumstances after the release.

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Chair's Address to the 2026 Annual General Meeting

Good morning/afternoon, ladies and gentlemen and thank you for joining us today, whether that be in person or virtually. Welcome to Artrya's Annual General Meeting for the 2026 financial year.

Twelve months ago, I said that our focus had shifted to commercial execution. I am pleased to report that in FY26 and early in FY27, we have shown good progress on that commitment. We have signed multi-year commercial contracts with five U.S. health systems, and we are in the early stages of a revenue-generating business.

Our CEO, John Konstantopoulos and his team have worked tirelessly building our commercial operations and John will talk to our progress and plans in his CEO presentation shortly.

Today I will focus on four things:

1. The scale of the opportunity in front of us,
2. Our commercial traction,
3. Strengthened leadership to support our endeavours, and
4. Confirming our priorities.

Scale of opportunity

Artrya is targeting a market in the US that is large and growing every day. The U.S. market for CCTA scans is currently worth around US$4.4 billion a year and growing at a significant rate. The American College of Cardiology and the American Heart Association have recommended Coronary Computed Tomography Angiography (CCTA) as the first line diagnostic test for patients with chest pain. This is further supported by the Centres for Medicare and Medicaid Services (CMS) when they announced last week an increase in the reimbursement for CCTA scans from the current rate of US$356 to US$395 for CY27. In the same announcement, they confirmed the rates for Plaque and Flow assessments at US$950 and US$850 respectively.

The significant growth presents an immediate and genuine challenge for all health systems in the US. Volumes of scans are rising faster than the staffing and reporting capacity required to process them, and the legacy approach of manual scan reads is simply too slow to keep pace. Hospitals are currently carrying the cost and burden of an overwhelming number of patients with chest pain, and they need a simple and highly scalable technology solution.

We built Salix® Coronary Anatomy to address this problem and the key to that is we give hospitals a single enterprise wide platform that simply and effectively manages all the workflow for these patients. We are not another single point solution with an additional monitor like our competitors. By controlling the clinical workflow and offering highly accurate clinical insights in minutes is a game changer. It saves time and costs, removes backlogs, allows the hospital systems to generate more revenue and frees up doctors to better manage their patients.

Commercial traction

Over the last 12 months, we have focused on our three U.S. foundation partners and converting them into commercial reality. We have integrated Salix® at Tanner Health and Northeast Georgia. Cone Health is progressing toward deployment. We also have a deliberate strategy to build our sales pipeline by converting SAPPHIRE research partners and we were thrilled to have Huntsville become the first of those to sign a commercial contract.

The strategy with our foundation customers is to have them fully integrated and using the Salix Coronary Anatomy platform, Salix Coronary Plaque assessment and Salix Coronary Flow, once it is cleared by the FDA.

We are fortunate that all three are Category 1 codes and largely covered by the insurers.

We continue to see strong inbound enquiry as the positive endorsement from our early customers permeates the healthcare sector in the US. This week we added Honor Health as the first from this new group of potential customers, again significantly increasing the number of scans we will manage once Salix® is deployed. We will continue to work hard to build our pipeline and convert additional SAPPHIRE partners into commercial customers.

Across the three foundation customers there is a common theme: our Salix® anatomy platform is revolutionising their workflows and the features of this Platform and the Plaque module, win out over competing technology. These features were critical in being able to enter into commercial agreements with Huntsville and Honor Health and we will work hard to integrate Salix into their systems at the earliest. Our market advantage will increase further when Salix Coronary Flow is cleared by the FDA.

Adding to the scale of the commercial opportunity is an exciting product roadmap which will use the Salix Coronary Anatomy platform to further streamline cardiovascular care and improve patient outcomes.

Leadership

Finally, this year we have we deliberately strengthened our Board and leadership team.

I was delighted to welcome two new non-executive Board members who each bring impressive skills and backgrounds in healthcare technology businesses. Thank you to Jeff Le Benger and Helen Kurincic, who have settled in well and already brought strong insights into our board discussions. As new appointments, both Jeff and Helen stand for re-election at today's meeting and we unanimously support their re-election.

We also strengthened our executive team with Clayton Hatch joining as a highly experienced Chief Financial Officer, particularly in the US healthcare sector. We welcomed a new Chief People Officer who also has experience with growing a company in the US market. We added a General Manager of U.S. Operations to lead our Atlanta-based Customer Success Team and we are actively recruiting high quality, healthcare experienced personnel to drive our growth in the US.

Priorities & thanks

Our short to medium priorities are clear:

1. Deploy and maximise our technology into our existing customers;
2. Grow scan volumes and revenues; and
3. Secure new customers from SAPPHIRE participants and inbound health systems.
4. Submit a high quality FDA submission for the Salix® flow module

I would like to thank my fellow Directors for their valuable counsel and commitment.

Additionally, on behalf of the Board and all shareholders, I would like to thank John, the executive team, all staff and consultants for the dedication and hard work in taking Salix® from regulatory clearance into clinical use.

To our shareholders, thank you for your continued support, and to those who joined the register this year, welcome.

We look forward to the next 12 months with a lot of optimism and excitement

Thank you.

Bernie Ridgeway, Chairman
13 November 2026

ARTRYA®

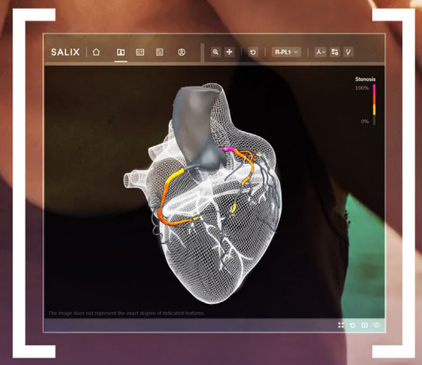
(ASX: AYA)

CEO Presentation

2026 Annual General Meeting

11:30am AWST (2:30pm AEDT)
Friday, 13 November 2026

Scaling the Future of Heart Care



John Konstantopoulos, CEO & Co-Founder

Important Notice

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THIS PRESENTATION HAS BEEN APPROVED FOR RELEASE BY THE BOARD OF ARTRYA LIMITED

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Our Purpose is to save lives through faster and more accurate detection of coronary artery disease

ARTRYA®

Artrya – AI technology platform for coronary artery disease

Salix® is the only real-time, point of care platform globally improving patient care and streamlining workflow

1 Global health issue

Heart disease kills more people than all cancers combined[2] – a U.S. heart attack every 40 seconds[1]

2 Differentiated Platform

- **One integrated Cardiac CT platform** – CCTA reporting, Plaque + Flow* analysis in ~10 minutes
- **Proven impact** – Demonstrated 50%+ faster reporting, greater clinical capacity and improved hospital economics

3 FDA clearances

- **Salix® Coronary Anatomy** and **Salix® Coronary Plaque** – 2025
- **Salix® Coronary Flow** submission in progress (additional reader study)

4 Commercial traction

- **Five commercial U.S. customers :** Cone Health (Kaiser hospital)**,** Huntsville Hospital Health System, HonorHealth, Tanner Health, and Northeast Georgia Hospital System.
- **$67.2m cash** funding U.S. growth[4]

5 SAPPHIRE study

- Predicting the future of coronary artery disease
- **Six large U.S. systems participating**: Mass General Brigham, Piedmont, HCA Midwest, Dignity Health, Ascension and Huntsville

1. Center for Disease Control and Prevention (CDC) - Heart Disease Facts – Heart Disease in the United States
2. American Heart Association (AHA) – Heart disease remains leading cause of death as key health risk factors continue to rise
3. https://www.dicardiology.com/article/rising-demand-cardiac-ct-positions-market-major-growth
4. At 30 September 2026

ARTRYA®

2026: Building the base

Focus on increasing utilisation and signing new health systems



HonorHealth becomes first inbound commercial customer

Significant new health system customer from Arizona signs commercial agreement

Agreement Term
Five years

Minimum value
US$0.5m[1]

Subscription revenue
Salix® Coronary Anatomy – monthly fee

Commercial upside - Per scan revenue
Salix® Coronary Plaque
& Coronary Flow once FDA cleared*

Timing
Integration planning to commence shortly

HONORHEALTH®



TOP 100 U.S. HEALTH SYSTEM
Major commercial opportunity for Artrya

~5 million people
Served across Scottsdale & greater Phoenix

Nine acute-care hospitals
All performing CCTA scans

40+ heart care locations
Through HonorHealth Heart Care

Non profit and research-led
HonorHealth Research Institute, ASU affiliate

1. Minimum contracted value relates to the Salix® Coronary Anatomy subscription only over the whole Term
* Salix® Coronary Flow is not yet cleared by the FDA

ARTRYA®

Multiple achievements that support commercial growth

Successfully executed our commercial launch with five customers in the last 12 months – delivering growing revenues

Five U.S. customers secured

Tanner Health, Cone Health (Kaiser Hospital), Northeast Georgia, Huntsville Hospital and HonorHealth

SAPPHIRE Study launched

6 major U.S. healthcare systems

1st SAPPHIRE conversion

Huntsville Hospital Health System

Streamlined reimbursement pathway established

Roadblock to utilisation removed

1st U.S. revenues

Subscriptions: Salix® Coronary Anatomy
Fee-per-scan: Salix® Coronary Plaque

FDA clearance received

Salix® Coronary Plaque, August 2025

1st in-bound conversion

HonorHealth Hospital System

U.S. operations hub established

Supporting the customer journey

Building our Resources and Leadership

Strong balance sheet and growing strength of senior leadership

Cash[1]
$67.2m

Debt[1]
Nil

Market cap[2]
$505m

R&D rebate due[3]
$4.8m

1. As at 30 September 2026
2. As at 4 November 2026
3. FY26 Annual Report

Leadership and Governance Strengthened

1 Commencement of Clayton Hatch as CFO

- Clayton Hatch commenced as Artrya's new CFO during the Quarter strengthening the management team

2 Dr Jeff Le Benger & Helen Kurincic - experienced Non-Executive Directors

- Jeff is a U.S. based director and a senior healthcare executive and physician with more than two decades of leadership experience across medical groups and value-based care delivery. Transformed Summit Medical to its US$8.9B sale to Walgreens Boots Alliance.
- Helen brings 30+ years' leadership across radiology, healthcare, specialist medicine and financial markets. Chair of McMillan Shakespeare, Non-Executive Director of Ramsay Health Care.

3 Board Committees established

- Audit & Risk, and Remuneration & Nominations committees
- Strengthen oversight of financial and risk matters, oversee board composition, succession and remuneration

Indices: S&P/ASX 300, All Ordinaries, and All Tech September 2026 rebalance

*NGHS went live clinically in July 2026, Cone will go live shortly

Existing U.S. commercial customers

Successful deployment of Salix® in the first U.S. hospital systems

TANNER HEALTH SYSTEM

5-year commercial contract

- **5 hospitals fully integrated**
- **Scans using Salix® Coronary Plaque**

- Non-profit health system serving communities across west Georgia and east Alabama
- Network spanning 5 hospitals, 5 cardiovascular centres, and 30 physician practices

Northeast Georgia Health System

3-year commercial contract

- **1 hospital fully integrated**
- Live at all hospitals currently underway

- Not-for-profit health network with 5 Hospitals, 3 heart centres, plus outpatient centres, physician practices, and 1.6M+ patient visits annually
- Georgia Heart Institute - one of the largest cardiology programs in the state

CONE HEALTH

5-year commercial contract

- Integration underway
- Full integration being planned

- Not-for-profit health system based in North Carolina
- Network comprises 5 hospitals 6 ambulatory care centres, 3 outpatient surgery centres, 120+ physician practices

HH Health
HUNTSVILLE HOSPITAL HEALTH SYSTEM

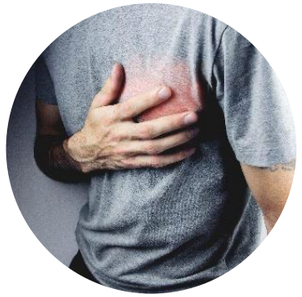
5-year commercial contract

- Integration underway
- Full integration being planned

- Not-for-profit health system based in Alabama
- Network comprises 15 hospitals + 19 Heart Centers, 6 Cath Labs, 4 EP labs, 3 Cardiac ICUs, 1,000 cardiac staff & 58 cardiologists

Our customers continue to suffer major resourcing challenges

CT-first adoption has shifted the bottleneck downstream to reporting and analysis



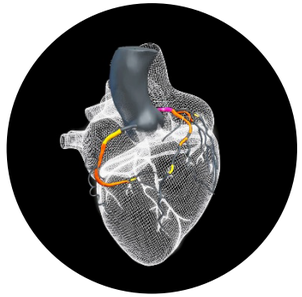
CAD is deadly and common

1 in 3 deaths are from cardiovascular disease



CCTA is the front-line test

Guideline-endorsed for suspected CAD and supported by reimbursement



One scan, many insights

- **Anatomy** - where is it?
- **Plaque** - how much?
- **Flow** - is it limiting?

4-8
week backlogs

Capacity cannot keep pace

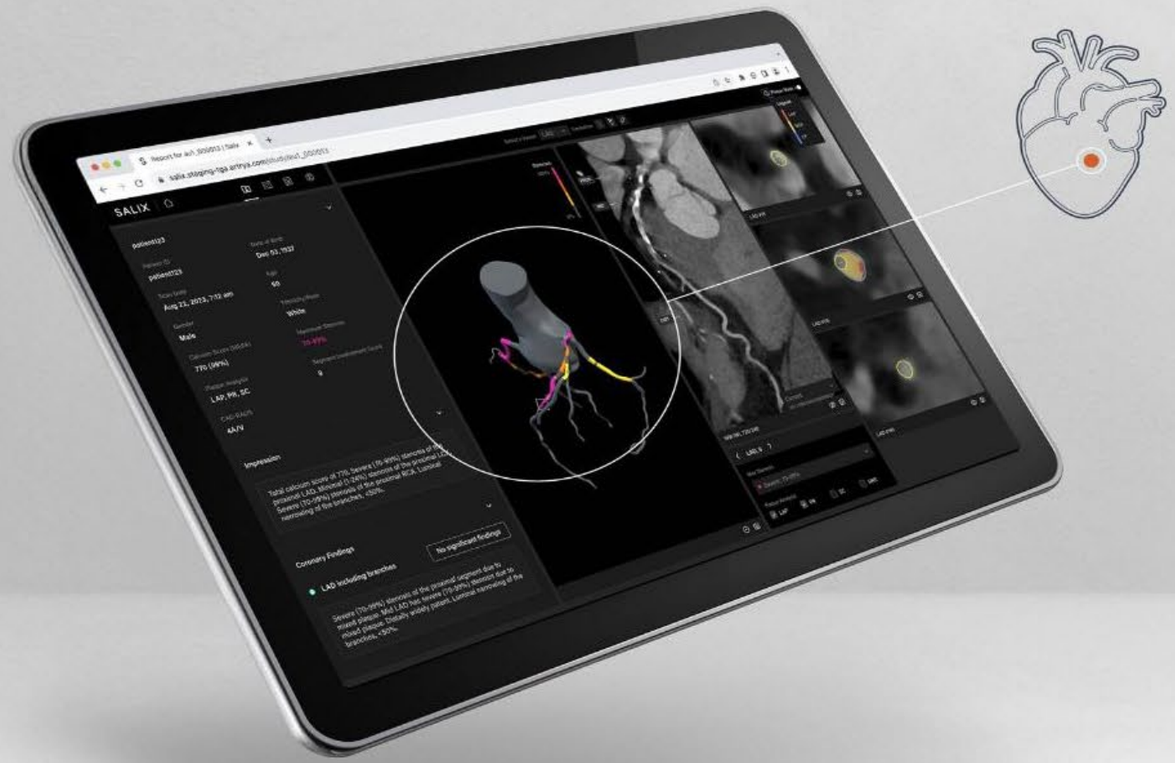
Volumes outpace staffing, off-site analysis adds 24-48 hours

The impact ► More CCTAs are being performed ► More information required from every scan ► Demand for fast, scalable, point-of-care analysis

ARTRYA®

Salix®: The Operating Platform for Cardiac CT

One reporting platform delivering real-time clinical, operational and financial value



More Clinical Capacity

50% faster reporting already seen enables more patients with existing resources, while reducing physician workload and reporting costs.

Stronger Hospital Economics

More patients + more revenue per patient + lower costs drive higher margins

Better Clinical Decisions, Faster Patient Care

Real-time assessment of Anatomy, Plaque + Flow* enables faster, more informed treatment

* Salix Coronary Flow not yet cleared by FDA

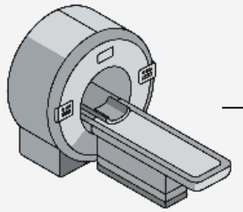
ARTRYA®

Salix® is a single platform able to transform clinical workflows

Salix® is a single solution that fits directly into the existing clinical workflow, no portals, no off-site vendors

Current approach

Fragmented & off-site



Onsite - Manual CCTA Assessment

CCTA Visualisation Software

Review & Prepare Scan for Reporting

Clinician Reports CCTA

4-8-week backlogs Volume outpaces capacity

Techs prep scan and reporting can take hours or days

Offsite - 'Human in the loop'

Clinician Orders Plaque and/or Flow Assessment

Heartflow cleerly elucid

Review, Prepare & Report **24hrs-48hrs**

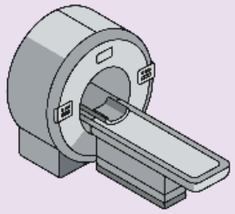
Clinician Receives results and finalizes CCTA report and clinical decision

24-48hrs offsite analysis for Plaque and Flow. Introduces latency and compounds backlog, Can take weeks for result if clinician disagrees

Currently

- Inefficient workflow
- Downstream treatment delays

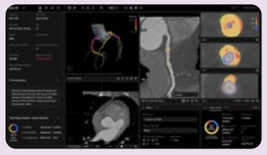
Streamlined approach with Salix®



Reduced backlogs

Point of Care

SALIX®



CCTA Report, Plaque, FFRCT **in <10mins**

Real-time at point of care within 10mins

Clinician Finalizes CCTA Report and clinical decision

Reporting within 5-10mins

With Salix®

- Faster throughput
- Faster time to treatment

ARTRYA®

Commercial footprint to support leading health systems

Foundation customers, SAPPHIRE sites, and our Atlanta support pod working together to drive U.S. growth

1 MASS. GENERAL BRIGHAM
Massachusetts
12 hospitals
32 Cardiology Centres

2 DIGNITY HEALTH (COMMONSPIRIT)
HQ: Chicago
- Across the U.S.
137 hospitals

3 HUNTSVILLE HOSPITAL HEALTH SYSTEM*
Alabama & Tennessee
15 hospitals
19 Heart Centres

4 PIEDMONT HEALTHCARE
Georgia & Alabama
25 hospitals
75 Cardiology Centres

5 HCA HEALTHCARE
HQ: Nashville
- Across the U.S.
190 hospitals
2,400 Care Centres

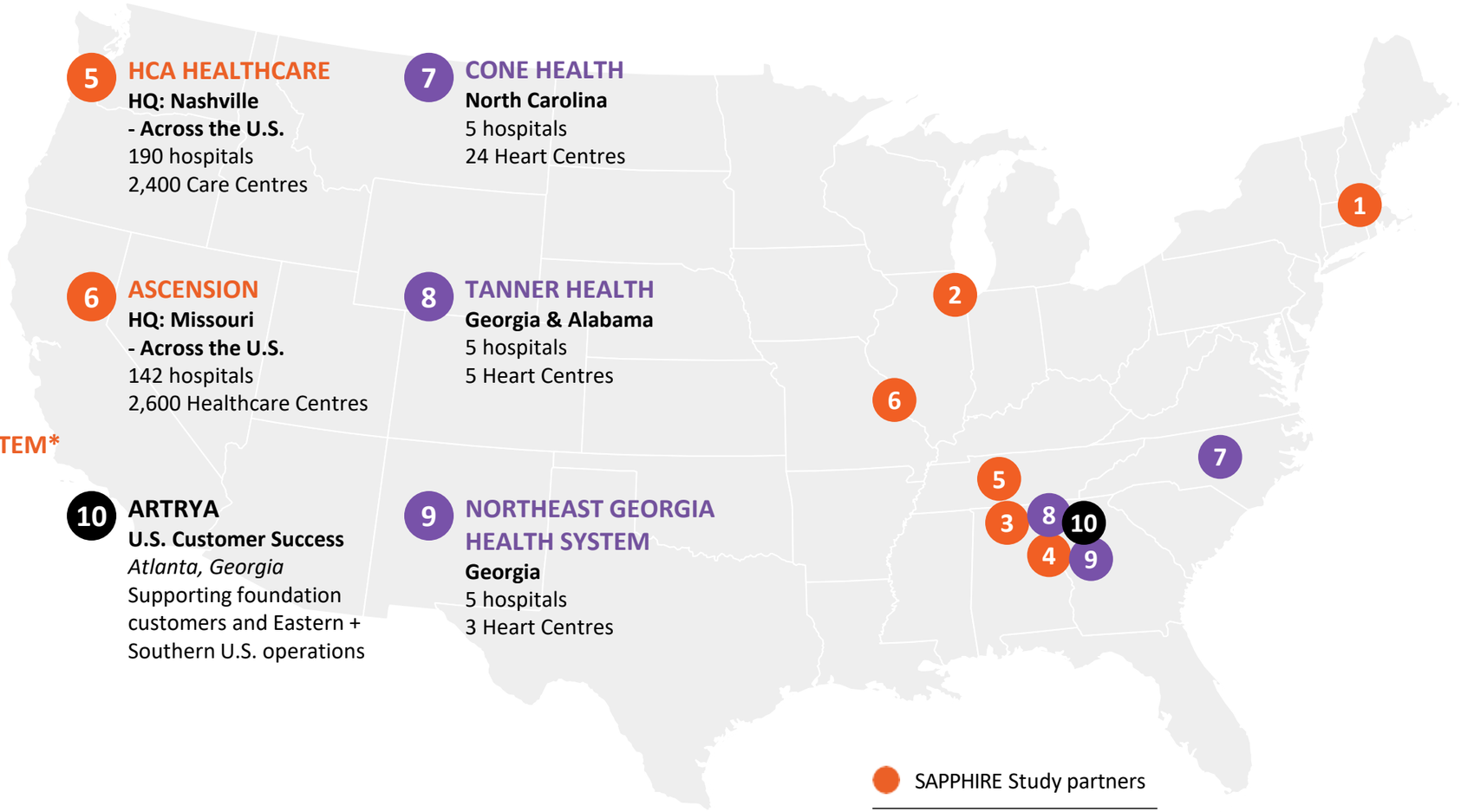
6 ASCENSION
HQ: Missouri
- Across the U.S.
142 hospitals
2,600 Healthcare Centres

10 ARTRYA
U.S. Customer Success
Atlanta, Georgia
Supporting foundation customers and Eastern + Southern U.S. operations

7 CONE HEALTH
North Carolina
5 hospitals
24 Heart Centres

8 TANNER HEALTH
Georgia & Alabama
5 hospitals
5 Heart Centres

9 NORTHEAST GEORGIA HEALTH SYSTEM
Georgia
5 hospitals
3 Heart Centres



*** Huntsville is also a commercial customer**

ARTRYA®

Flagship Novel Plaque Study - SAPPHIRE underway

Validating the novel Salix® Plaque Dispersion Score to identify patients at risk of heart attack

Overview

- Evaluate Salix® Plaque Dispersion Score assessing cardiovascular risk
- Specific focus on CAD in women
- 6 high volume U.S. Centres
- Multicentre, retrospective study
- **HCA, Dignity Health, Mass General**, **Ascension**, **Piedmont Healthcare**, and **Huntsville** confirmed as participants

Mass General Brigham

Piedmont HEALTHCARE

HCA MIDWEST HEALTH

Ascension

Health HUNTSVILLE HOSPITAL HEALTH SYSTEM

Dignity Health. A member of CommonSpirit

Key phases

PHASE 1

Identify patients at risk using Salix® Plaque analysis compared to current standard of care. ~12 months

PHASE 2

Leverage Salix® Plaque Dispersion Score to further risk stratify patients and change treatment. ~12 months

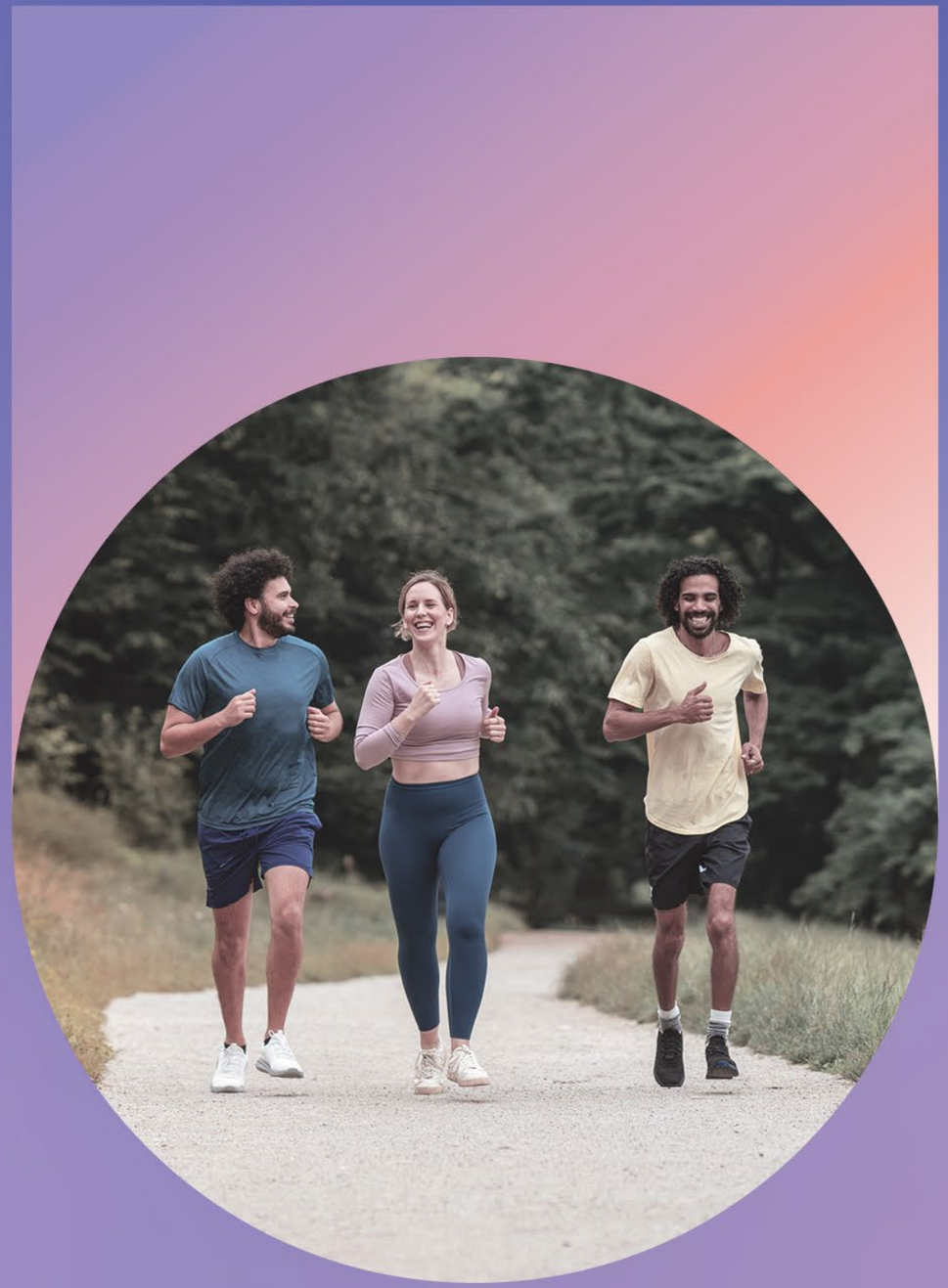
Key benefits

1. Predict future adverse events and improve treatment
2. Build clinical awareness and credibility in U.S.
3. Accelerate commercial adoption in US hospitals

Commercial opportunity ▶ **Large high-volume systems** ▶ **Sales Pipeline of SAPPHIRE partners**

Commercial execution

A clear path forward

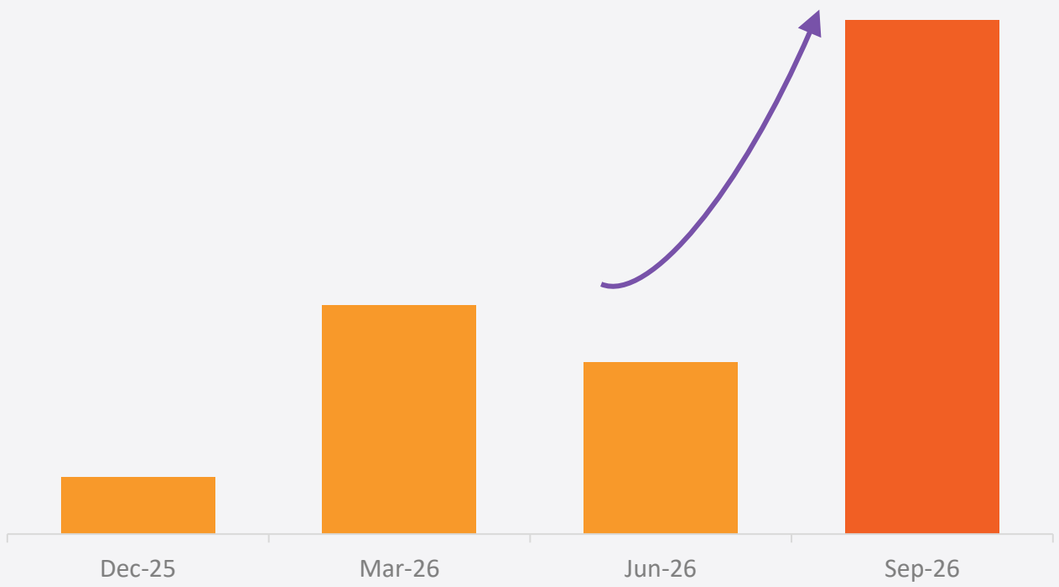


Growing our Customers and Revenue base

Plaque scan volumes are trending upward as early customers integrate and adopt Salix®

Salix® Coronary Plaque scan volumes

Quarterly, directional



Volumes not disclosed at this early stage; chart shows directional trend only. Quarters ending.

Levers to grow revenue

01 **Onboard all contracted customers and 'Go Live'**

Onboarding capabilities building on early customer success – Near term focus on Cone Health, all remaining NGHS hospitals, Huntsville and HonorHealth

02 **Increase plaque utilisation per site and per clinician**

Salix® Anatomy becomes the workflow tool to drive greater adoption of Coronary Plaque scans – supported by the streamlined pre-authorisation pathway

03 **Secure additional health system customers**

Convert further SAPPHIRE partners and progress inbound commercial discussions

Commercial execution is our focus

ARTRYA®

Salix® Coronary Flow: expanding clinical utility

One scan, one platform – with access to U.S. reimbursement once FDA cleared

Salix® Anatomy
FDA cleared

+

Salix® Plaque
FDA cleared

+

Salix® Flow
Preparing additional clinical evidence*

=

One scan
complete coronary assessment

Salix® Coronary Flow module – regulatory pathway



FDA Q-Sub completed	Module complete and calibrated	**Additional reader study**	510(k) submission	FDA clearance – US$877 per scan[1]

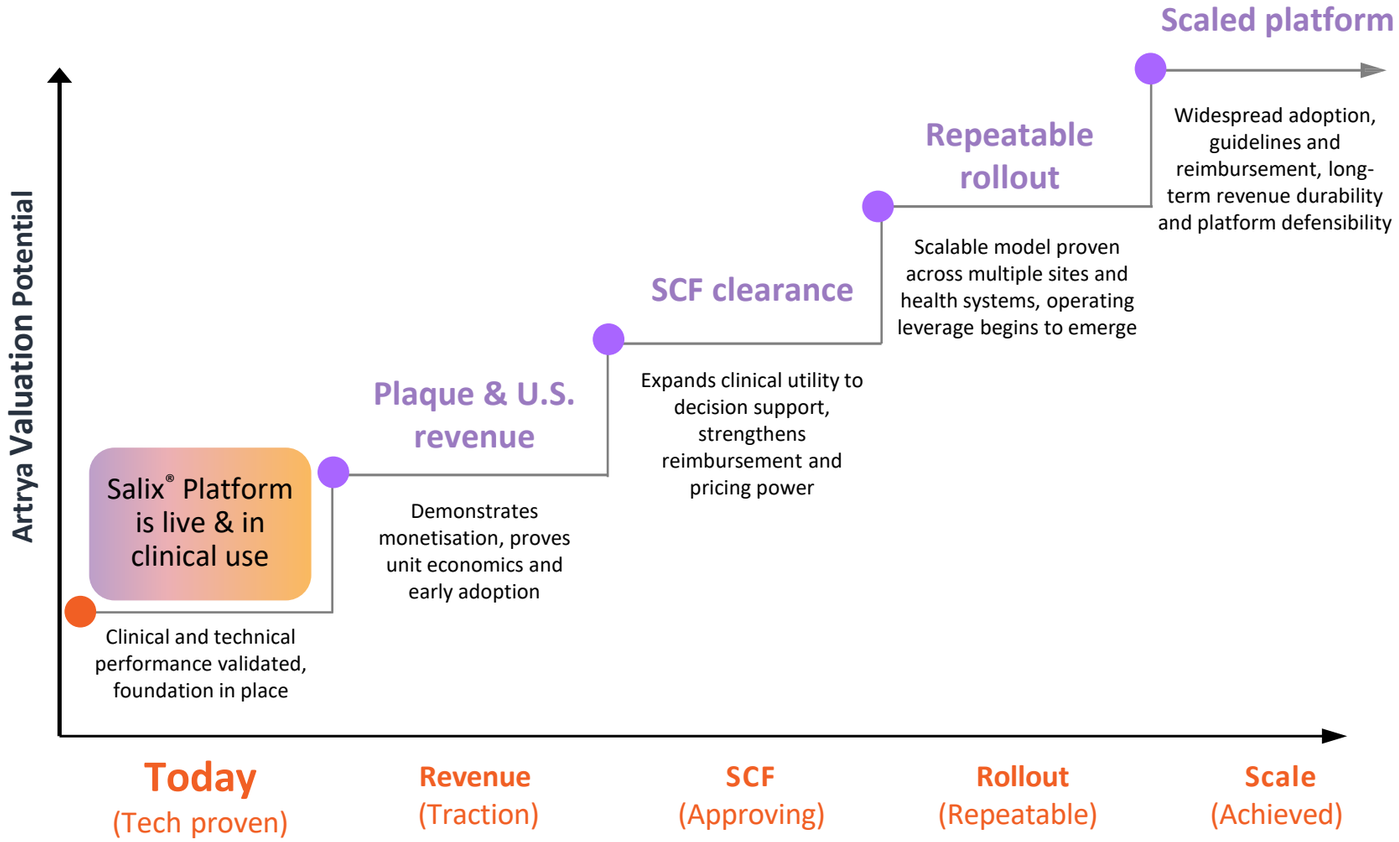
* Salix® Coronary Flow is not yet cleared by the FDA
1. CPT rate is reimbursed to the hospital; Artrya earns a contracted per-scan share

ARTRYA®

Our pathway to creating future value for shareholders

Clearly identified value inflection points that drive towards repeatable adoption and a scaled Salix® platform

1. **Commercial execution will shift from early wins to repeatable US rollout**
2. **SAPPHIRE is the primary commercial adoption engine not just a validation study**
3. **SCF approval adds additional in clinical relevance and commercial potential**



Roadmap: Key priorities

Converting contracted customers into recurring, expanding U.S. revenue

Complete deployment across existing customers

Full integration at Cone Health and all NGHS hospitals, Huntsville integration and first-site go-live

Recurring revenue

Grow plaque usage - building revenue per site

Increase Plaque per-scan utilisation and layer Flow on the Anatomy subscription, supported by the streamlined pre-authorisation pathway

Higher revenue per site

Build customer base - SAPPHIRE partners & pipeline

Five further SAPPHIRE health systems, plus new live sites from an accelerated sales pipeline

New health systems

Secure Salix® Coronary Flow FDA clearance

Additional reader study underway to bolster FDA submission, followed by rollout to existing customers

Step-change in clinical utility

Build clinical credibility and scale U.S. operations

All six SAPPHIRE systems active in Phase 1, publications and conferences, disciplined deployment of $67.2m cash

Capacity to scale

Objective: a repeatable U.S. commercial model with expanding revenue per site

Conclusion: Growth stage business with a strong moat

Artrya's competitive advantage is built across four reinforcing layers — each harder to replicate and strengthening with scale

1 One Integrated Platform

Anatomy + Plaque + Flow through one platform, with architecture designed to support additional modules.

BARRIER: Each new module increases platform value and customer stickiness — without adding another vendor

2 Real-Time, Point-of-Care Delivery

~8-10 minute automated analysis delivered within the clinical decision window.

BARRIER: Enables Salix to operate within the clinical workflow rather than as a delayed downstream service

SALIX®
Platform

3 Streamlined and Efficient Workflow

Enables more patients with existing resources, while reducing physician workload and reporting costs.

BARRIER: Salix is embedded in how CCTA is delivered, increasing workflow dependence and switching costs

4 Stronger Hospital Economics

More patients + more revenue per patient + lower costs drive higher margins

BARRIER: Supports hospital margins and revenue enabling a profitable cardiovascular service line

ARTRYA®

Thank you

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