



LENSAR<sup>®</sup>

November 2024



Combining Robotic Intelligence and Precision with Surgeon Expertise

# DISCLAIMER



This presentation includes estimates regarding market and industry data. Unless otherwise indicated, information concerning the industry and the markets in which LENSAR, Inc. (the “Company,” “we,” “our” or “us”) operates, including management’s general expectations, market position, market opportunity and market size, are based on management’s knowledge and experience in the markets in which the Company operates, together with currently available information obtained from various sources, including publicly available information, industry reports and publications, surveys, customers, trade and business organizations and other contacts in the markets in which the Company operates. Certain information is based on management estimates, which have been derived from third-party sources, as well as data from internal research, and are based on certain assumptions that management believes to be reasonable. While we are not aware of any misstatements regarding industry data provided herein, our estimates involve risks and uncertainties and are subject to change based upon various factors, including those discussed in our filings with the Securities and Exchange Commission (“SEC”). We have not independently verified data from third-party sources and cannot guarantee their accuracy or completeness.

This presentation contains “forward-looking statements” within the meaning of the Private Securities Litigation Reform Act of 1995. All statements contained in this presentation that do not relate to matters of historical fact should be considered forward-looking statements, including, without limitation, statements regarding the Company’s development and commercialization of the ALLY™ Adaptive Cataract Treatment System® (“ALLY System”), benefits of laser assisted surgery, the ALLY System’s performance, potential efficiencies and cost savings, and market trends and opportunity. In some cases, you can identify forward-looking statements by terms such as “aim,” “anticipate,” “approach,” “believe,” “contemplate,” “could,” “estimate,” “expect,” “goal,” “intend,” “look,” “may,” “mission,” “plan,” “possible,” “potential,” “predict,” “project,” “pursue,” “should,” “target,” “will,” “would,” or the negative thereof and similar words and expressions.

Forward-looking statements are based on management’s current expectations, beliefs and assumptions and on information currently available to us. Such statements are subject to a number of known and unknown risks, uncertainties and assumptions, and actual results may differ materially from those expressed or implied in the forward-looking statements due to various important factors, including, but not limited to, the important factors that are disclosed under the heading “Risk Factors” contained in the Company’s Quarterly Report on Form 10-Q for the quarterly period ended September 30, 2024, filed with the Securities and Exchange Commission (“SEC”), as such factors may be updated from time to time in our other filings with the SEC, each accessible on the SEC’s website at [www.sec.gov](http://www.sec.gov) and the Investor Relations section of the Company’s website at <https://ir.lensar.com>.

All forward-looking statements are expressly qualified in their entirety by such factors. Except as required by law, the Company undertakes no obligation to publicly update or review any forward-looking statement, whether as a result of new information, future developments or otherwise. These forward-looking statements should not be relied upon as representing LENSAR’s views as of any date subsequent to the date of this presentation.

The Company prepares and analyzes operating and financial data and non-GAAP measures to assess the performance of its business, make strategic and offering decisions and build its financial projections. The key non-GAAP measures it uses are EBITDA and Adjusted EBITDA. EBITDA is defined as net loss before interest expense, interest income, income tax expense, depreciation and amortization expenses. EBITDA is a non-GAAP financial measure. EBITDA is included in this filing because we believe that EBITDA provides meaningful supplemental information for investors regarding the performance of our business and facilitates a meaningful evaluation of actual results on a comparable basis with historical results. Adjusted EBITDA is also a non-GAAP financial measure. We believe Adjusted EBITDA, which is defined as EBITDA and further excluding stock-based compensation expense, change in fair value of warrant liabilities, impairment of intangible assets and the Employee Retention Credit provides meaningful supplemental information for investors when evaluating our results and comparing us to peer companies as stock-based compensation expense and change in fair value of warrant liabilities are significant non-cash charges and impairment of intangible assets is a non-cash charge that is not indicative of our core operating results and the Employee Retention Credit is not recurring. We use these non-GAAP financial measures in order to have comparable financial results to analyze changes in our underlying business from quarter to quarter. However, there are a number of limitations related to the use of non-GAAP measures and their nearest GAAP equivalents. For example, other companies may calculate non-GAAP measures differently, or may use other measures to calculate their financial performance and, therefore, any non-GAAP measures we use may not be directly comparable to similarly titled measures of other companies. Investors should not consider our non-GAAP financial measures in isolation or as a substitute for an analysis of our results as reported under GAAP.

## Leading Laser Cataract Surgery Innovator In Growing Cataract Procedure Market

### Large Growing TAM

- **Cataract Surgery** : ~32M procedures worldwide in 2024<sup>1</sup>
  - **Significant Unmet Need; 22-29 M** w/Treatable Astigmatism –Majority Go Untreated<sup>1,4</sup>
- **Laser Cataract Surgery (LCS)**: ~1M procedures in 2024; projected to 1.2M in 2029<sup>1</sup>
- **LENSAR®** : ~21% global LACS procedure market share in Q3 2024<sup>2</sup>



### Proprietary Technology

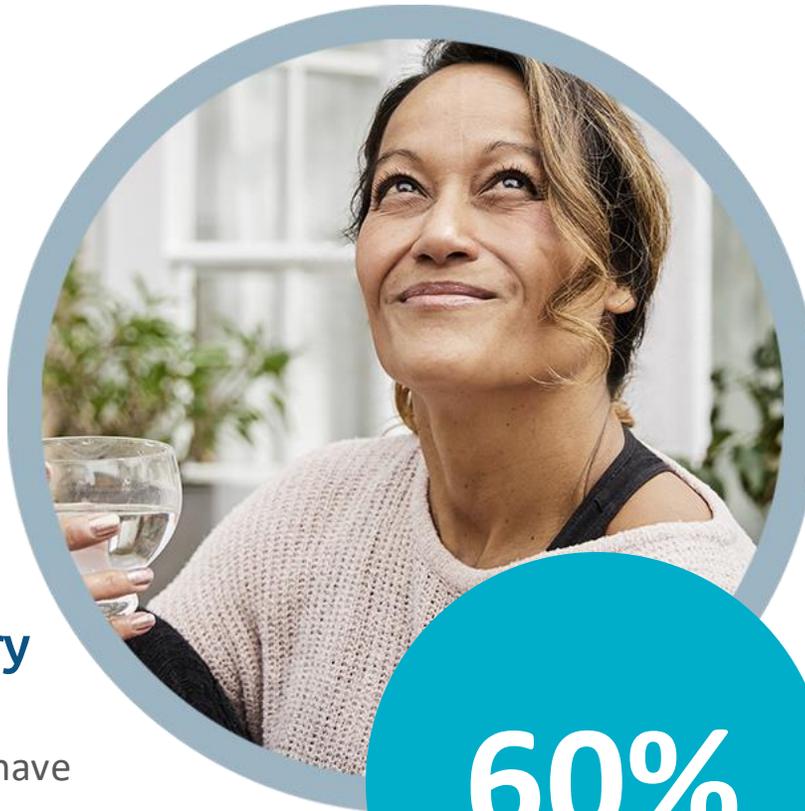
- **ALLY Robotic Cataract Laser System**: combining world class imaging, extremely fast, dual-modality laser, in a compact, highly ergonomic system
- **Driving single-step, sterile robotic LCS**: Significant time savings for surgeon, staff, and patient, improving surgical experience for all stakeholders
  - Saving up to 19 minutes per procedure for staff and up to 51 minutes for patients<sup>5</sup>
- **First and only dual-modality, tissue specific laser: up to 4X faster**, optimized for cornea and lens treatment in cataract surgery
- **Astigmatism management: 1<sup>st</sup> AI Embedded software** guides planning, treatment using Iris Registration for detailed surface identification to improve efficiencies and outcomes
- **Optimizes treatment**: Employs superior imaging system and AI

### Surgeon Centric Organization

- **Improved efficiencies**: cost savings for ASCs (\$400k-\$540k/year)/or increased revenue for both ASCs and surgeons (up to \$497k/year for ASCs and \$499k/year for surgeons)<sup>16-18</sup>
- **Improved outcomes**: within 0.5 diopters of target for up to 98% of patients

### Positioned for Growth

- ALLY is designed to extend real benefits of laser cataract surgery to a broader patient base
- ALLY is driving greater ROI for surgeons and surgical facilities
- Recent EU, Southeast Asia regulatory approvals expand LENSAR's addressable opportunity



## PATIENTS PREFER Robotic Laser Cataract Surgery

Patients who said they would prefer to have Robotic Laser Cataract Surgery™ said it would make them feel:

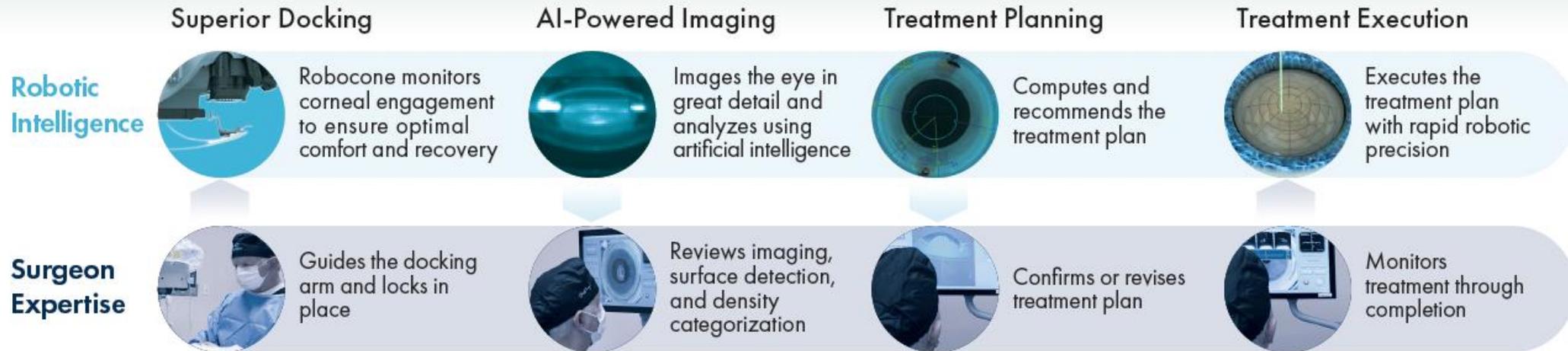
- + Calm
- + Confident
- + Assured

60%

Of patients said they would choose a surgeon who performed robotic laser cataract surgery over one who didn't.

Only ALLY Robotic Laser Cataract Surgery combines robotic intelligence and precision with surgeon expertise to deliver the most advanced cataract procedure available.

## Robotic intelligence and precision guide and optimize every step of cataract surgery





Surgeon Experience



Staff Experience



Patient Experience



Up to 17 Minute Savings

Up to 19 Minute Savings

Up to 51 Minute Savings

# YOUR ALLY<sup>®</sup> IN WORKFLOW TO INCREASE YOUR BOTTOM LINE



## ASC Savings<sup>16-18</sup>

Decrease  
ASC Hours

90 – 120  
MIN/Day

\$9k - \$12k/Day  
\$400k - \$540k/Year

Or



## Increase Revenue<sup>16,18-22</sup>

Increase  
Pt Treated

10 More  
Cases /Day

ASC  
\$11.04k/Day  
\$496.8k/Year

Surgeon  
\$11.08k/Day  
\$498.6k/Year

# PREMIUM EXPERIENCE FOR SURGEONS



"I am most impressed with the ALLY, in my 12+ years of laser cataract surgery experience, it is a significant step forward. Powerful, elegant software and superb cutting make it an exciting instrument that delivers for us and our patients."

– **STEVE SLADE, MD**

"I like that the ALLY speaks to different diagnostic devices. As surgeons, we don't like being handcuffed to one set of options as far as diagnostics are concerned. I like the idea that my preferences can be taken into account and I'm not going to be limited in how that image quality or image is transferred to the ALLY. ALLY is flexible in that it brings the image over from either the IOLMaster 700, Pentacam, or other devices, and in a sense then allows flexibility around the surgeon's preference."

– **NEDA SHAMIE, MD**



"I used the LenSx from day one of the LenSx, up until recently. But the ALLY is totally different. I've been incredibly impressed with it. I think the ergonomics of it are terrific, the speed, it's fast. The capsulotomies are less than a second, and the capsulotomies themselves, the quality has been terrific. The speed of what we do in the lens, is really great. My total docking time is less than a minute in almost all cases, which I love....I only operate now with ALLY, and at this point, I wouldn't operate without it."

– **KERRY SOLOMON, MD**



# PREMIUM EXPERIENCE FOR STAFF



“When you are saving between 2-5 minutes per patient, on a very busy day, doing 15-25 cases, that adds up to an hour. You can take off, send staff home early or do more cases... It's just a wonderful experience for us. All of this makes ALLY a better choice.”

– JAMES KHODABAKHSH, MD

“We involved the staff in the design of how we were going to lay out the operating room with ALLY. They got really involved and enthusiastic because they could see that they're going to be able to execute our cases in a much shorter time period, way more efficiently. We live in Hawaii. Everyone wants to go home at four o'clock and go to the beach at least for an hour or so or get outdoors. Our staff sees it as a positive for their lifestyle.”

– ALAN FAULKNER, MD



“Our staff was actually pretty adaptable and excited about the fact that ALLY can be done sterile and they see the value in it. It's a lot of mental work when you're juggling the laser, going out and marking a patient, and then you come in and do the case. You must have a head nurse as a quarterback to make sure the surgeon is in the right place... But if you perform sterile LACS, you just walk in and all you're thinking about is that patient. It's just you and the whole team focused on that patient.”

– NEDA NIKPOOR, MD



# PREMIUM EXPERIENCE FOR PATIENTS



"The beauty of (ALLY) is you can use any bed, so the patient doesn't have to transfer to a different bed. It's very seamless and flexible in terms of how you bring the patient in; different angles don't matter with the patient bed relative to the laser because I'm registering the patient to the laser. That's really efficient. The speed of the laser is unlike any of the other ones we have. It gets through everything in about 30 seconds. The pressure on the eye is minimal, so the patient experience is the best of all the lasers I've used. Patients don't complain at all. We don't even need to give any sedation before the laser because it's very comfortable for the patient."

**– REX HAMILTON, MD**



"The patient perceives that time where they get moved and have the second step in a LACS procedure, it takes longer. I had a patient that was done non-sterilely and then was done sterilely and she said "Yesterday was so much quicker. It seemed so much easier. I don't even remember you moving me to the other room." Not only is the surgeon experience better, but the patient experience is better also."

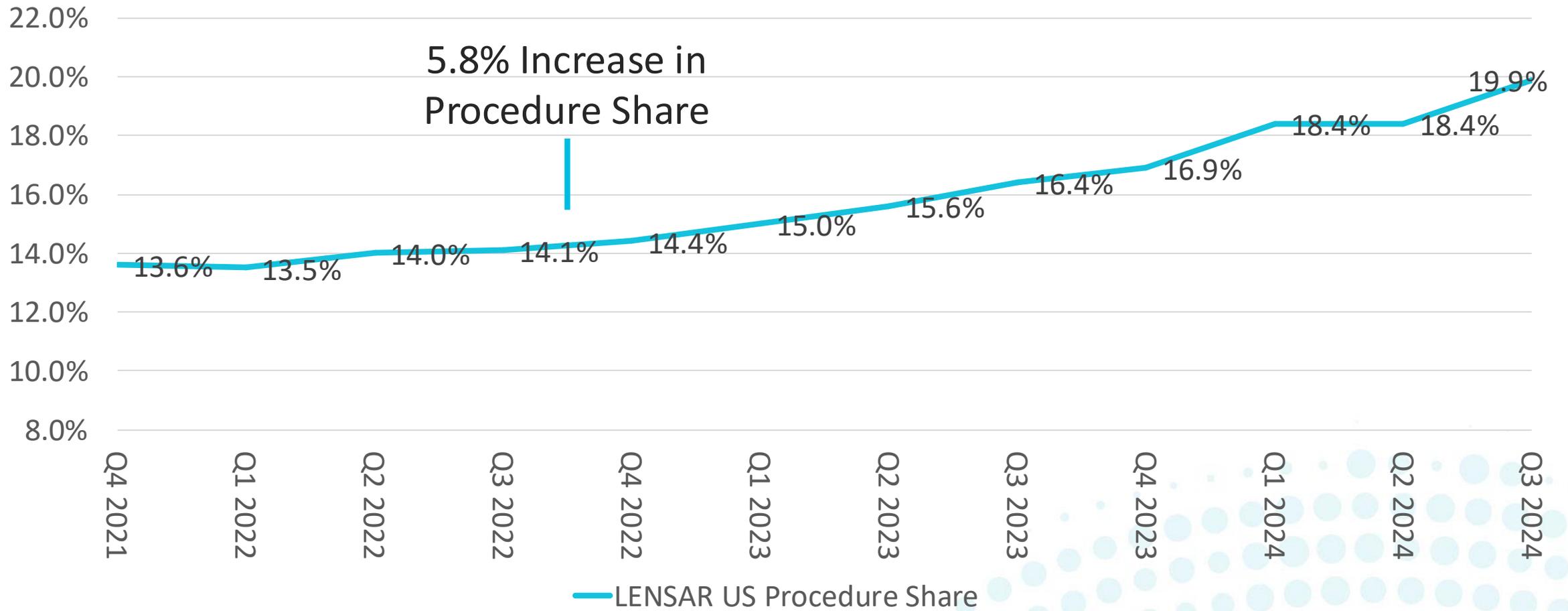
**– ALAN FAULKNER, MD**

"The patient experience, when you do a sterile LACS procedure, is so far superior because in their mind it's one procedure...The patient knows as soon as they're draped the surgery is starting. I can't tell you how many times in a surgery day, even though we tell the patient we're doing the laser part, they routinely will say "Is that it? Are we done with the surgery?" That doesn't happen when you perform sterile LACS because it's just all part of the same experience in their mind. And that really can help reduce patient anxiety when they just start the procedure one time."

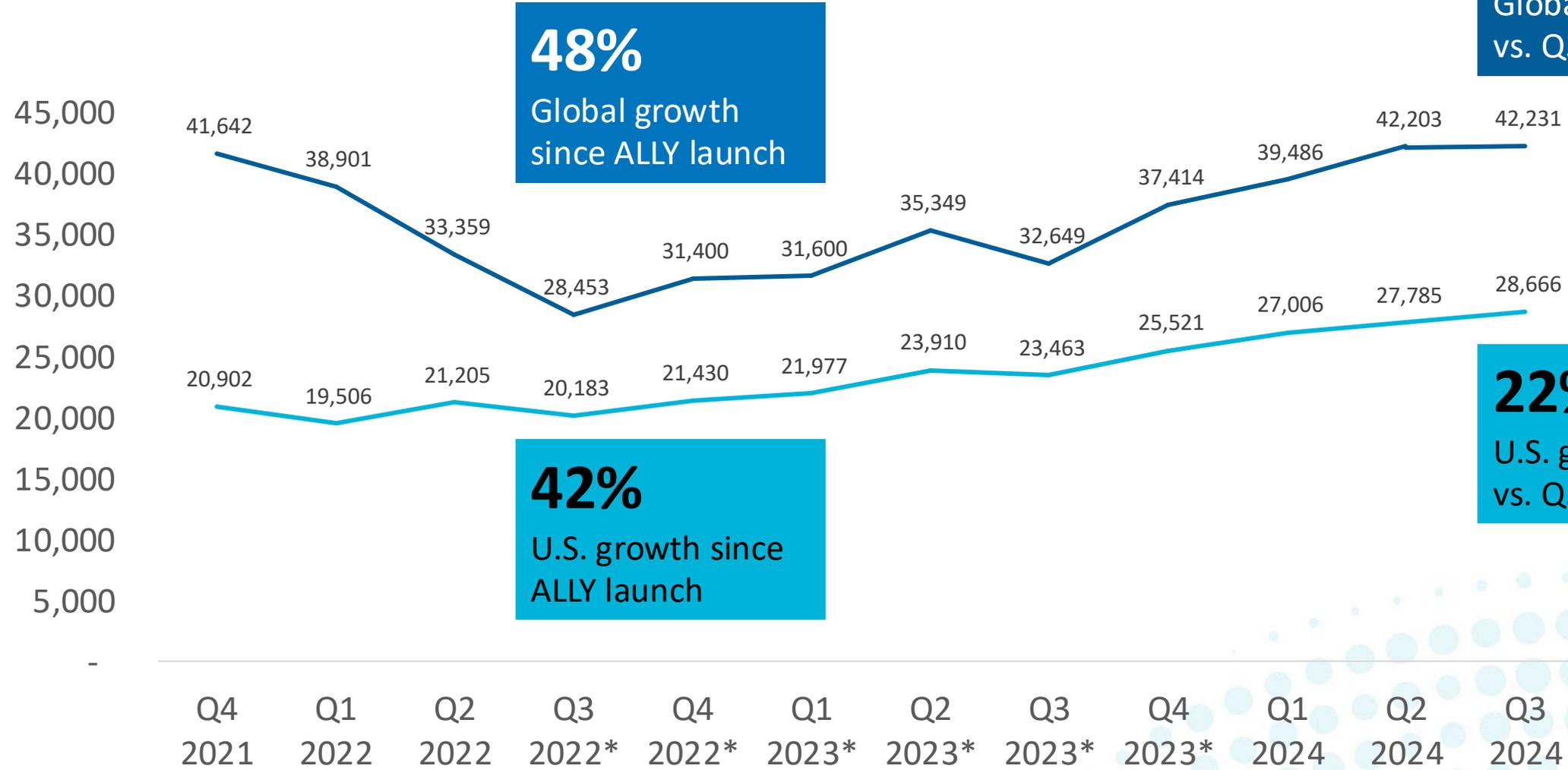
**– NEDA NIKPOOR, MD**



# US MARKET SHARE GROWTH



# PROCEDURE VOLUME



**48%**  
Global growth since ALLY launch

**29%**  
Global growth vs. Q3 2023

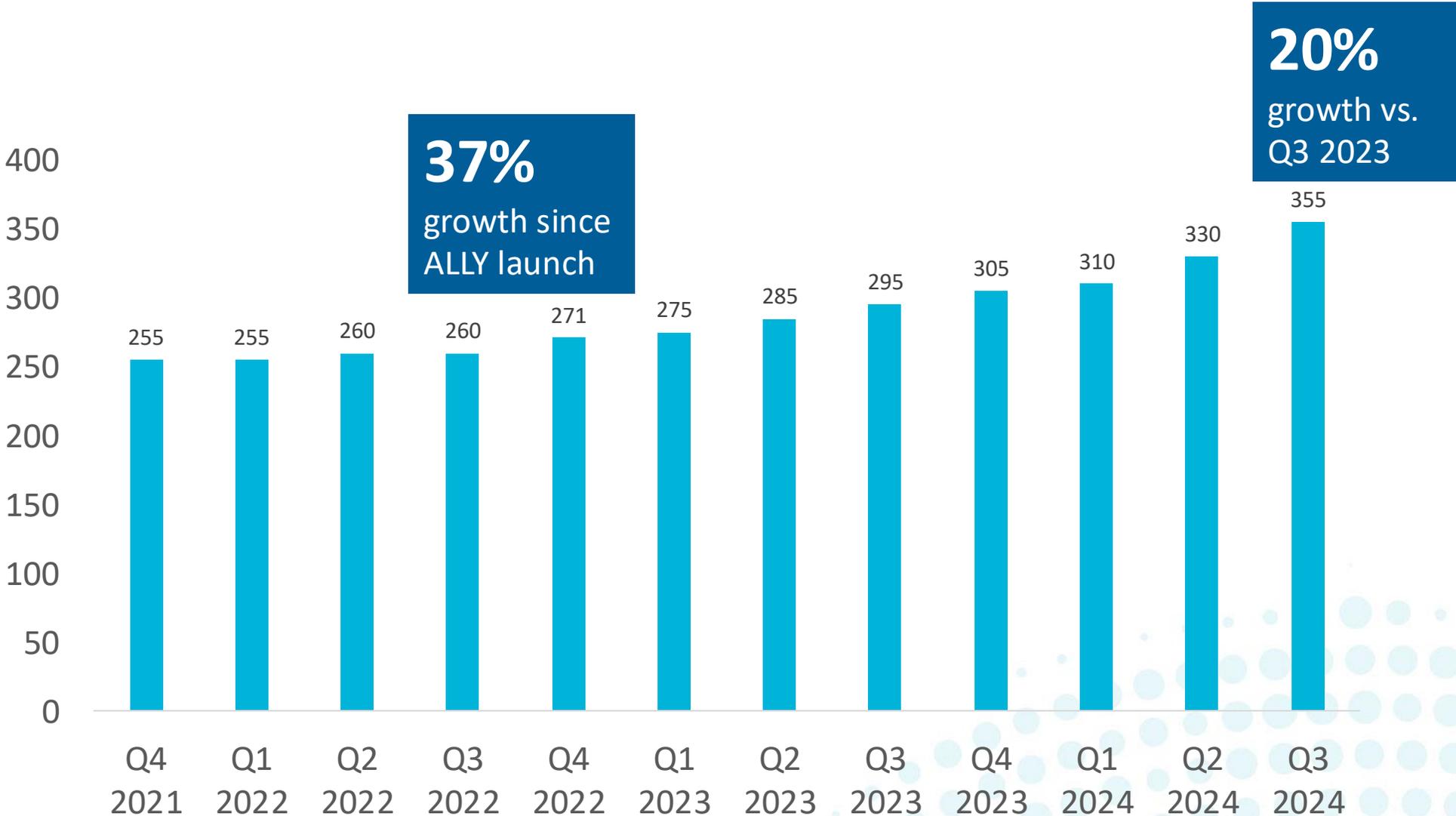
**42%**  
U.S. growth since ALLY launch

**22%**  
U.S. growth vs. Q3 2023



\* Worldwide procedure volume was negatively impacted by South Korea third-party reimbursement issues in 2022 and 2023.

# INSTALLED BASE



# REVENUE RESULTS AND METRICS



<i>\$ in thousands</i>	Three Months Ended September 30,		Nine Months Ended September 30,	
	2024	2023	2024	2023
Revenue				
System	\$3,660	\$1,953	\$7,404	\$6,251
Recurring source revenue				
Procedure	6,918	5,203	20,141	15,940
Lease	1,724	1,524	5,623	4,844
Service	1,237	1,115	3,595	3,024
Total recurring source revenue	9,879	7,842	29,359	23,808
% Change	26.0%	15.6%	23.3%	3.0%
<b>Total revenue</b>	<b>\$13,539</b>	<b>\$9,795</b>	<b>\$36,763</b>	<b>\$30,059</b>
% Change	38.2%	26.4%	22.3%	19.6%
Recurring source revenue %	73%	80%	80%	79%
12-month trailing recurring source revenue	\$38,155	\$31,259		
% Change	22.1%	(2.5%)		
Gross Margin <sup>1</sup> (\$ / %)	\$6,266 / 46%	\$4,877 / 50%	\$18,743 / 51%	\$15,958 / 53%



<sup>1</sup> Gross Margin excludes amortization

# FINANCIAL INFORMATION



	Three Months Ended September 30,		Nine Months Ended September 30,	
	2024	2023	2024	2023
<i>\$ in millions</i>				
<b>Revenue</b>	\$13.5	\$9.8	\$36.8	\$30.1
<i>% Change</i>	38.2%	26.4%	22.3%	19.6%
<b>Net (loss) income</b>	(\$1.5)	\$2.6	(\$12.7)	(\$10.5)
<b>EBITDA<sup>1</sup></b>	(\$0.6)	\$3.2	(\$10.4)	(\$8.3)
<b>Add:</b>				
Non-cash stock-based compensation expense	0.7	1.2	2.0	4.7
Non-cash change in fair value of warrant liabilities	0.3	(4.4)	3.9	1.7
Impairment of intangible assets	—	—	3.7	—
Employee retention credit	—	(1.4)	—	(1.4)
<b>Adjusted EBITDA<sup>1</sup></b>	<b>\$0.4</b>	<b>(\$1.4)</b>	<b>(\$0.8)</b>	<b>(\$3.3)</b>
<b>Cash and Investments Balance<sup>2</sup></b>	<b>\$18.6</b>	<b>\$24.9</b>		

<sup>1</sup> EBITDA and Adjusted EBITDA are non-GAAP measures. Please refer to the next slide for a reconciliation of EBITDA and Adjusted EBITDA to net income (loss).

<sup>2</sup> Cash and investments increased \$3.1 million in the quarter ended September 30, 2024, and was primarily related to 11 ALLY Systems sold outside the U.S. in the third quarter of 2024 as well as periodic changes in working capital balances.



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17. Data From Denise Visco, MD at Eyes of York.
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19. CMS average ASC payment of \$1,104 per case.
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# NON-GAAP RECONCILIATION



*\$ in thousands*

	Three Months Ended September 30,		Nine Months Ended September 30,	
	2024	2023	2024	2023
<b>Net (loss) income</b>	<b>(\$1,502)</b>	<b>\$2,568</b>	<b>\$(12,702)</b>	<b>\$(10,457)</b>
Less: Interest income	(153)	(265)	(511)	(465)
Add: Depreciation expense	774	609	2,087	1,767
Add: Amortization expense	232	273	738	824
<b>EBITDA</b>	<b>(649)</b>	<b>3,185</b>	<b>(10,388)</b>	<b>(8,331)</b>
Add: Stock-based compensation expense	668	1,173	2,003	4,723
Add: Change in fair value of warrant liabilities	410	(4,343)	3,838	1,654
Add: Impairment of intangible assets	—	—	3,729	—
Add: Employee retention credit	—	(1,368)	—	(1,368)
<b>Adjusted EBITDA</b>	<b>\$429</b>	<b>\$(1,353)</b>	<b>\$(818)</b>	<b>\$(3,322)</b>