New levels of productivity and digitalization for the clinical lab

Diagnostics

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Please find further explanations regarding our financial key performance indicators in chapter “A.2 Financial performance system” and in the notes to the consolidated financial statements on page 29 “Segment information” in the Annual Report 2019 of Siemens Healthineers. Additional information is also included in the Quarterly Statement. These documents can be found under the following internet link: https://www.corporate.siemens-healthineers.com/investor-relations/presentations-financial-publications. As of beginning of fiscal year 2020, Siemens Healthineers applies the accounting standard IFRS 16, Leases. Comparative figures for the preceding fiscal year were not adjusted. Instead, the overall insignificant transition effects were recognized in equity as of October 1, 2019.

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Diagnostics – Building from a leading position with the broadest portfolio in the industry

Strong positions …

Laboratory Diagnostics  Automation  Point-of-Care

… in an attractive market …

€28bn+  >5%

Market Size$1  Market CAGR$1

… with global scale

300k+  135+

Global Installed Base$2  Number of Countries$2

Decentralized settings

Connected point-of-care solutions

Urinalysis  Blood Gas

Automated, high throughput solutions

Automated Urinalysis System

Hematology  Coagulation  Urinalysis

End-to-End Solutions

Workflow excellence  Clinical excellence

Digitalization

HbA1C  Cardiac  Informatics

Atellica Solution (CC/IA)  Automation/IT

1 2019 BBC Annual IVD Market Book in USD and calendar year, excludes Molecular Diagnostics  2 Internal data

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Atellica® Solution delivers tangible value to customers (catalyst for growth)

Product availability may vary from country to country and is subject to varying regulatory requirements

1) Based on tests per hour per m² when compared to leading competitive modular immunoassay instrument
2) Labs processing in excess of ~30k tubes/day
3) TLA = Total Lab Automation
4) The outcomes obtained by individual Siemens Healthineers customers were realized in the customers unique setting. Since there is no typical laboratory, and many variables exist, there can be no guarantee that others will achieve the same results. Source: Laboratory Diagnostics

- Designed to meet evolving needs of customers...
- ...with good uptake in the market...
- ...and tangible customer impact.

>35% Competitive wins

>80% Mega Lab² competitive win rate with TLA³

86% fewer operators⁴

33% fewer analyzers⁴

>73% less hands-on time⁴

Advanced automated workflow to reduce manual interventions

Customized configurations to meet individual lab needs

Highest immunoassay productivity¹

Remote proactive monitoring and support

Seamless integration of emergency and routine testing

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COVID-19 impacted performance – improvement expected in FY21

Performance in FY20 significantly impacted by COVID
- Severe decline in routine care testing, partial recovery in Q4
- Continued “investment” in service and maturing Atellica systems: foundational to margin improvement in FY21, high seeding rates for Atellica instruments

Outlook FY21: improvement expected in both top and bottom line
- Routine care recovers but remains below 2019 levels
- Good progress in maturing of Atellica platform
- Improved factory utilization
- Strengthened leadership team
Our portfolio innovations will deliver the lab of the future

Grow | Expand | Elevate

Lead in workflow and achieve clinical excellence

Positioning ourselves for the future

- Deliver further Atellica innovations incl. Mid-Volume system (Cl19001)
- Launch assays to continue menu enrichment

Innovating in workflow

- Enhance and expand Atellica Solution IT
- Strengthen laboratory automation offerings

1 In development. Future availability cannot be guaranteed.
Best-in-class testing for COVID-19

critical care tests for COVID-19 patients including D-Dimer, IL-6®, SAA*, CRP, Procalcitonin (PCT), TnI

Molecular SARS-CoV-2 test kit**
- FDA EUA-authorized, CE-marked, WHO EUL
- 100% positive, 100% negative agreements

Rapid SARS-CoV-2 POC Antigen Test
- CE-marked; under FDA review for EUA
- Portable visual read, 15-min. TAT

Total Antibody Assay: IgG/IgM**
- 100% sensitivity, 99.8% specificity
- Utilizes the spike protein to detect total antibodies to block the virus entry into human cells

IgG Quantitative Antibody Assay**
- 100% sensitivity, 99.9% specificity
- Measures levels of IgG neutralizing antibodies to the spike protein, enabling tracking of changes over time

Do I have antibodies to the SARS-CoV-2 virus?
- Yes

Do I have COVID-19?
- Yes

* Not available for sale in the U.S.
** These SARS-CoV-2 molecular and serology tests have not been FDA cleared or approved. These tests have been authorized by FDA under an EUA for use by authorized laboratories. The molecular test has been authorized only for the detection of nucleic acid from SARS-CoV-2, not for any other viruses or pathogens. The serology test has been authorized only for detecting the presence of antibodies against SARS-CoV-2, not for any other viruses or pathogens. These tests are only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner. Product availability may vary from country to country and is subject to varying regulatory requirements.

1) In method comparison studies, FTD SARS-CoV-2 has shown Positive Percent Agreement: 100% (91.8-100, 95% CI) and Negative Percent Agreement: 100% (88.7-100, 95% CI) when tested in Copan eSwab nasopharyngeal and oropharyngeal swabs.
2) CE-IVD labeled for diagnostic use in the EU. Research Use Only (RUO) in the U.S.
3) For samples collected ≥14 days after positive PCR result.
4)www.thelancet.com Published online September 25, 2020 https://doi.org/10.1016/S0140-6736(20)32006-7 and Clarke C, Prendecki M, Dhutia A, et al. High prevalence of asymptomatic COVID-19 infection in hemodialysis patients detected using serologic screening. J Am Soc Nephrol 2020; 31:1569–75. Commentary from Barnaby Flower, Christina Atchison Department of Infectious Disease, Faculty of Medicine, Imperial College London
5) Do I have COVID-19?

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