



Using Risk Assessment Tests to Transform Gynecological Health Starting with Ovarian Cancer

Corporate Overview
September 2023

Safe Harbor

This presentation contains forward-looking statements, as defined in the Private Securities Litigation Reform Act of 1995. All statements, other than statements of historical facts, included in this presentation are forward-looking statements. These forward-looking statements include, among others, statements about the strategies and objectives of Aspira Women's Health Inc. (the "Company"), including product and financial goals, potential addressable market and revenue opportunity, potential product expansion, anticipated timing of product launches and expected development of commercial relationships. The Company's actual results may differ materially from the views expressed in these forward-looking statements. Words such as "may," "expects," "intends," "anticipates," "believes," "estimates," "plans," "seeks," "could," "should," "continue," "will," "potential," "projects" and similar expressions are intended to identify such forward-looking statements.

The events and circumstances reflected in the Company's forward-looking statements may not be achieved or occur, and actual results could differ materially from those projected in the forward-looking statements. Readers are cautioned that these forward-looking statements speak only as of the date of this presentation, and the Company does not assume any obligation to update, amend or clarify them to reflect events, new information or circumstances after such date except as required by law. Company estimates set forth in this presentation are based on various sources of information and various assumptions and judgments made by the Company, which Company management believes are reasonable. However, the Company cannot assure you that Company estimates are correct, and actual data may materially differ from Company estimates.

The forward-looking statements are subject to certain risks, uncertainties and assumptions, including the risks and uncertainties inherent in the Company's business and including those described in the section entitled "Risk Factors" in the Company's Annual Report on Form 10-K for the year ended December 31, 2022, as supplemented by the section entitled "Risk Factors" in the Company's Quarterly Report on Form 10-Q for the quarter ended June 30, 2023.

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Investment Highlights

	Revenue Generating Company	Commercial diagnostics company with revenue producing blood tests processed in our own CLIA-certified laboratory
	Strong Growth Metrics	Consistent revenue and volume growth since Q2 2020
	Innovative Products	OvaSuite SM : A group of unique ovarian cancer risk assessment assays
	Near-Term Pipeline	2H 2023: Expansion of OvaWatch SM for longitudinal monitoring 4Q 2023: Commercial launch of EndoCheck SM for endometriosis
	Market Access & Reimbursement	Nationwide Medicare reimbursement rate of \$897 for Ova1Plus [®] OvaWatch SM crosswalk in process Unique PLA code for OvaWatch SM effective as of April 1, 2023
	Experienced Management	Leadership team of mission-driven executives with significant, relevant experience in small and mid-cap diagnostic companies

A New Executive Team and a Fresh Perspective



Nicole Sandford
CEO, President & Director



Torsten Hombeck, PhD
SVP, Chief Financial Officer



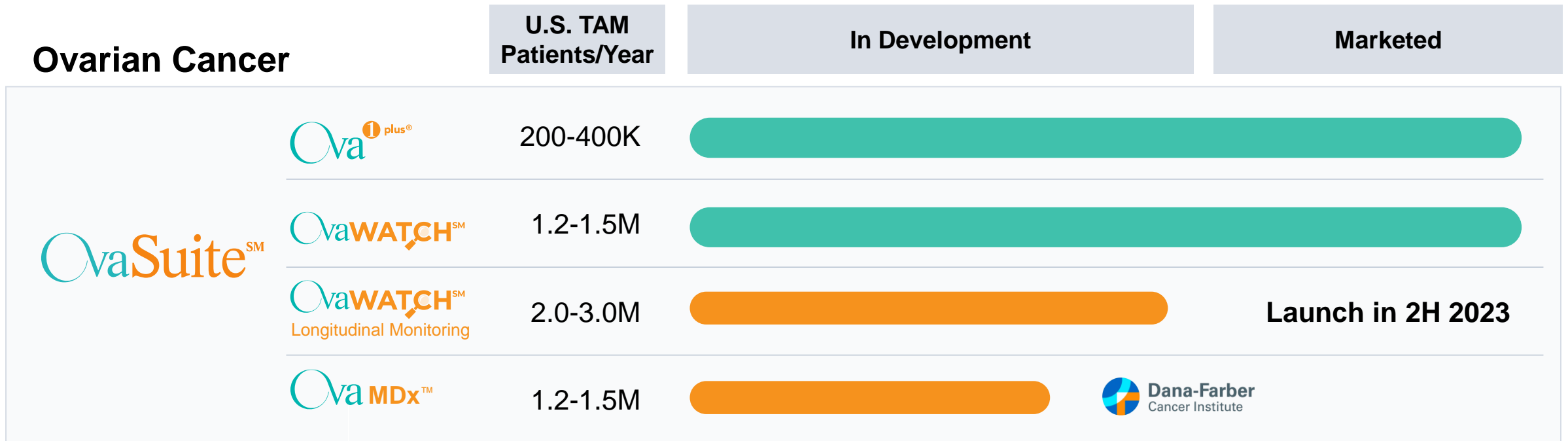
Minh Merchant
SVP, General Counsel, & Compliance Officer



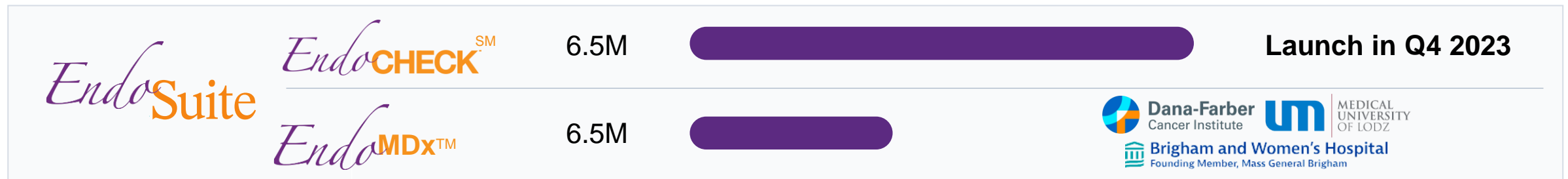
Michelle Snider
SVP, Commercial Strategy & Operations



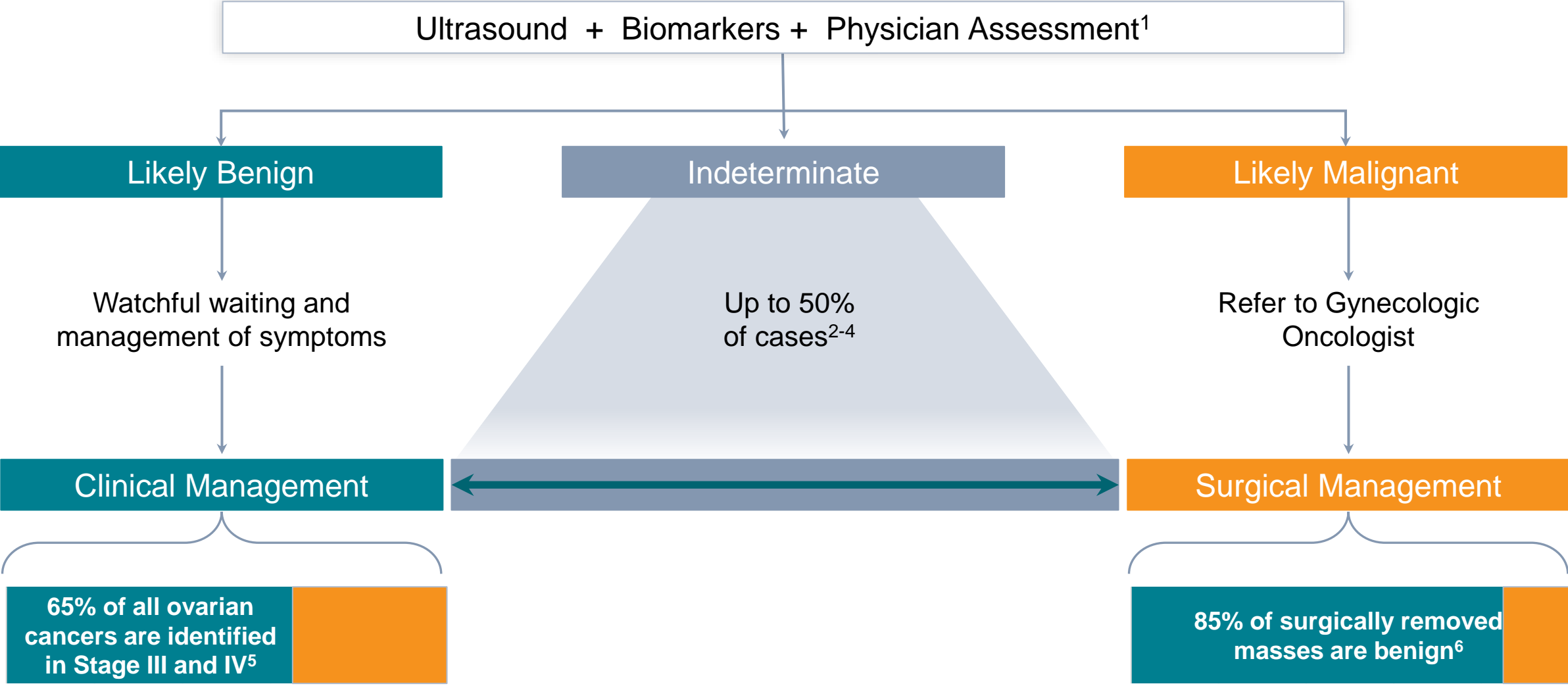
Commercial Products with Rich Pipeline of Near-Term Assets



Endometriosis



Ovarian Cancer Presents A Diagnostic Dilemma



1. American College of Obstetricians and Gynecologists' Committee on Practice Bulletins—Gynecology. Practice Bulletin No. 174: Evaluation and Management of Adnexal Masses. Obstet Gynecol. 2016;128(5):e210-e226. doi:10.1097/AOG.0000000000001768; 2. Meys EMJ, Kaijser J, Kruiwagen RFP, et al. Subjective assessment versus ultrasound models to diagnose ovarian cancer: a systematic review and meta-analysis. Eur J Cancer. 2016;58:17-29. doi:10.1016/j.ejca.2016.01.007; 3. Froyman W, Landolfo C, De Cock B, et al. Risk of complications in patients with conservatively managed ovarian tumours (IOTA5): a 2-year interim analysis of a multicentre, prospective, cohort study. Lancet Oncol. 2019;20(3):448-458. doi:10.1016/S1473-2045(18)30837-4; 4. <https://seer.cancer.gov/statfacts/html/ovary.html>; 5. Stampler K, DeFilippis DJ, Holtz DO, Twigg LB, & Dunton CJ. (2023, March 25–28). Pelvic ultrasound findings: Prevalence of adnexal masses with indeterminate features in community settings. Society of Gynecologic Oncology National Meeting on Women's Cancer, Tampa, FL, United States; 6. Alcázar JL, Pascual MA, Graupera B, et al. External validation of IOTA simple descriptors and simple rules for classifying adnexal masses. Ultrasound Obstet Gynecol. 2016;48(3):397-402. doi:10.1002/uog.15854

A Comprehensive Suite of Ovarian Cancer Risk Assessment Tests

OvaSuiteSM

OvaWATCHSM

Initial Clinical Assessment

For adnexal masses evaluated by initial clinical assessment as indeterminate or benign.

Ova¹ plus[®]

Planned for Surgery

For women with pelvic masses that are planned for surgical management.

In combination with ultrasound and physical examination, OvaSuiteSM products provide physicians with data to develop appropriate treatment plans for all women with pelvic masses.

Ova1Plus[®] for Women with Pelvic Masses Planned for Surgery



Combines two FDA-cleared tests (Ova1[®] and Overa[®])

With 4 additional biomarkers and a proprietary algorithm, Ova1[®] has dramatically improved performance compared to CA-125 alone.



Ova1 has increased sensitivity compared to CA-125 alone to capture early-stage cancers (stage I and II)²

1. Dunton, C. J., Hutchcraft, M. L., Bullock, R. G., Northrop, L. E., & Ueland, F. R. (2021). Salvaging detection of early-stage ovarian malignancies when ca125 is not informative. *Diagnostics*, 11(8), 1440. 2. Bristow, R. E., Smith, A., Zhang, Z., Chan, D. W., Crutcher, G., Fung, E. T., & Munroe, D. G. (2013). Ovarian malignancy risk stratification of the adnexal mass using a multivariate index assay. *Gynecologic oncology*, 128(2), 252-259.

OvaWatchSM for Initial Clinical Assessment of Adnexal Masses



OvaWatchSM is intended for use as a non-invasive test to assess the risk of ovarian cancer for women with adnexal masses, evaluated by initial clinical assessment as indeterminate or benign.

The OvaWatchSM report includes:

PATIENT INFORMATION
 Last Name: xxxxxxxxxx
 First Name: xxxxxxxxxx
 MRN: xxxxxxxxxx
 DOB: xxx/xx/xxxx
 Age: xx
 Ethnicity: xxxxxxxxxx
 Clinical Info: Premenopausal

PROVIDER INFORMATION
 Ordering Provider:
 Practice Name:
 Street Address:
 City, State, ZIP:
 Tel:
 Fax:
 Copy-to-Physician:
 Fax:

LAB INFORMATION
 Accession No:
 Client No:
 Collection Date:
 Received Date:
 Report Date: 17 August 2022
 Comments:

Results:	Score	Status	Reference Range	NPV*	PPV**
OvaWATCH SM	0.6	Low probability of malignancy	Low probability of malignancy <5.0 Indeterminate ≥5.0	99.5%	N/A

OvaWatchSM Scores

Report date: 17 August 2022

LOW PROBABILITY OF MALIGNANCY

OvaWatch result indicates a low probability of malignancy for this adnexal mass. Consultation with gynecology and monitoring is recommended, if indicated, follow up imaging and clinical studies.

NR: No Read; TNP: Test Not Performed

OvaWatch result should always be interpreted in combination with clinical assessment, personal history and imaging studies. OvaWatch employs a combination of AGE, MENOPAUSAL STATUS, and serum PROTEIN BIOMARKERS into an algorithm to provide this personalized risk assessment. CA 125 II and HE4 are components of the OvaWatch Test, and both tests are performed on the Cobas Analyzer manufactured by Roche Diagnostics.

* NPV is the probability of absence of ovarian cancer at this OvaWatch score and at an estimated 5% prevalence of malignancy.
 ** PPV is the probability of presence of a non-benign or suspicious mass at this OvaWatch score and at an estimated 5% prevalence of malignancy.

OvaWatch performance characteristics were established in a study of 2,000 women with adnexal mass, in which the ovarian cancer prevalence was 4.9%. OvaWatch specificity was validated at 84% with negative predictive value (NPV) of 99.4%, whereas its sensitivity was validated at 90% (98.0% for Stage 3&4 and 76.9% for Stage 1&2 cancers) with positive predictive value (PPV) of 22.5%.

Additional Results

Test Name	Result	Status	Reference Range
CA 125 II	88.5 U/ml	Elevated	Premenopausal ≤67.0 U/ml ² Postmenopausal <35.0 U/ml ³
HE4	67.4 pmol/L	Elevated	Age ≤49 y ≤63.6 pmol/L ⁴ Age ≥50 y ≤105 pmol/L ⁴

References

1. Reilly G, Bullock R, Greenwood, et al. "Analytical Validation of a Deep Neural Network Algorithm for the Detection of Ovarian Cancer." *JCO Clinical Cancer Informatics* 2022; 6:e2100192.
2. Dearnaley AC, Aleotti GD, McGree ME, Weaver AL, Sommerfield MK, Cilby WA. "How relevant are ACOG and SGO guidelines for referral of adnexal mass?" *Obstet Gynecol* (2007) Oct; 110(4):841-8. doi:10.1097/01.AOG.0000267198.25223.bc. PMID:17906018.
3. Practice Bulletin Number 174: Evaluation and Management of Adnexal Masses. *Obstet Gynecol* (2016) 128:5.
4. Instructions For Use: cobas Elexys HE4, Roche Diagnostics, 2021-07 V 4.0.

Disclaimer

This test was developed and its performance characteristics determined by Aspira Laboratory. It has not been cleared or approved by the FDA, nor is it required to be. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. The results obtained from this multivariate index assay should always be interpreted in the context of clinical examination, patient medical history, and other findings.

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 CLIA # 45D2073394 CAP # 9021192

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OvaWatchSM risk score

Ovarian cancer risk assessment chart

CA-125 and HE4 results

Provides a single risk assessment score delivering a Negative Predictive Value of over 99%¹

OvaWatchSM Meets a Critical Unmet Need for Initial and Longitudinal Assessment



OvaWatchSM benefits

With **Sensitivity*** (81.8%) and **Specificity*** (87.4%), OvaWatchSM may provide healthcare professionals with many benefits including:

- Enhanced provider confidence in the chosen medical management plan
- Efficient triaging of specialist referrals for only higher risk patients
- Avoidance of potentially unnecessary or premature surgeries



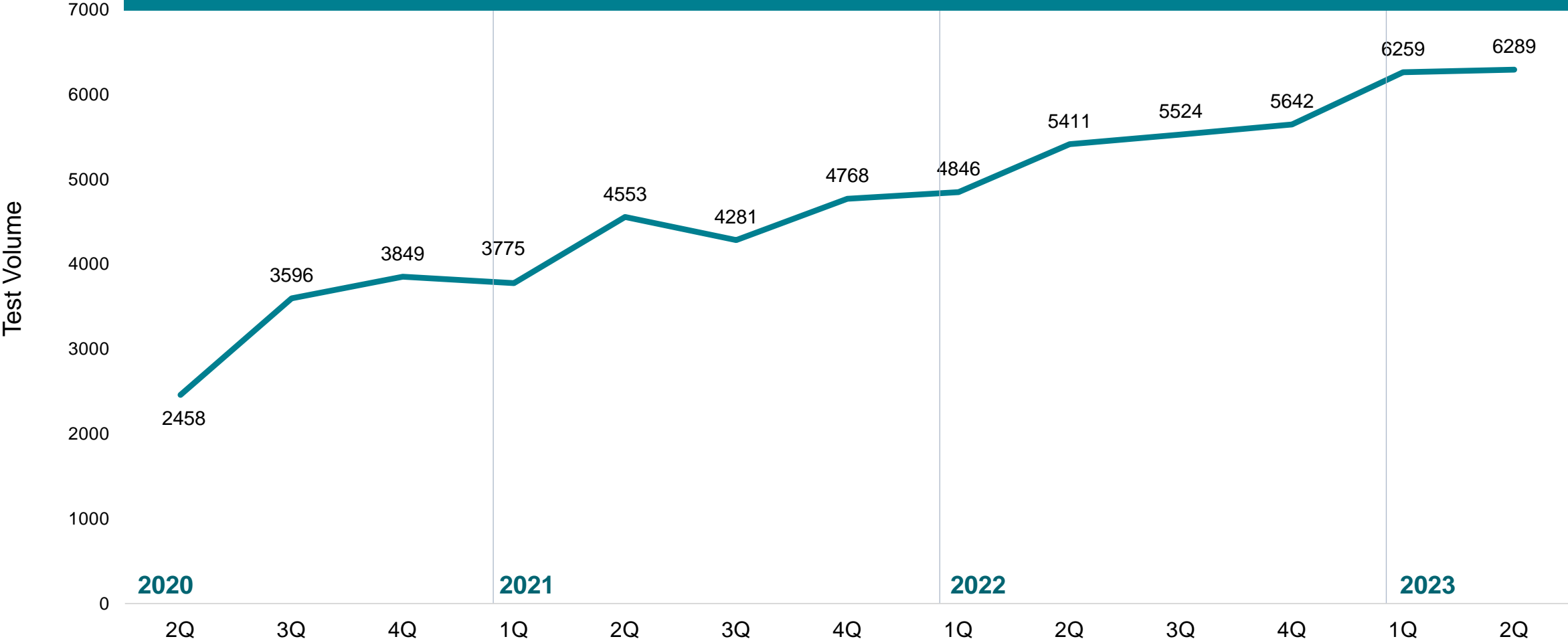
*Validation of a deep neural network-based algorithm supporting clinical management of adnexal mass. *Frontiers in Medicine*, 10. Reilly, et al. (2023).

OvaSuiteSM Test Volumes Have Grown Consistently

23% Annual CAGR over the past 3 years

>170,000 tests since launch

Quarterly Test Volume



Market Access and Coverage



We aim to make our OvaSuiteSM of products available to all women

Coverage



Medicare Contracted
Ova1Plus[®] Price **\$897**



Medicaid Contracted (Average)
Ova1Plus[®] Price **\$541**

Critical Factors for Success in Expanding Coverage

- Clinical Utility Study for Ova1[®] published in 2023
- Crosswalk request for OvaWatchSM based on Ova1Plus[®] CMS pricing pending for 2024
- Leverage high-volume users in key states to drive Medicaid contracting
- Federal and State legislative efforts to put pressure on both government and commercial payers



A Non-invasive Assay for the Diagnosis of Endometriosis



Endometriosis: Large Market with Clear Need for Better Diagnostic



Endometriosis is a debilitating condition in which tissue similar to the lining of the uterus grows outside the uterus.

6.5 million women impacted in the U.S.¹



Untreated endometriosis leads to pain, excessive menstrual bleeding, digestive distress, and infertility

Endometriosis can only be definitively diagnosed through laparoscopy which provides sensitivity = 90% and specificity = 40%²

Clinicians and patients are seeking a noninvasive alternative with similar performance

New Treatment Options Require Dx



There is no available clinical assay supporting identification of patients for coverage of commercial stage therapeutic medications.

AbbVie ORILISSA[®] (GnRH antagonist)

Myovant MYFEMBREE[®] (GnRH antagonist + Estradiol +NETA)

Current diagnostic methods are inadequate

1. Esther Eisenberg, M.D., M.P.H., Medical Officer, Project Scientist, Reproductive Medicine Network, Fertility and Infertility Branch, National Institute of Child Health and Human Development 2. Gratton, S. M., Choudhry, A. J., Vilos, G. A., Vilos, A., Baier, K., Holubeshen, S., ... & Chen, I. (2022). Diagnosis of endometriosis at laparoscopy: a validation study comparing surgeon visualization with histologic findings. *Journal of Obstetrics and Gynaecology Canada*, 44(2), 135-141.

First-of-its-Kind Noninvasive Assay for the Diagnosis of Endometriosis



EndoCheckSM Assay Features

- Noninvasive, blood-based assay utilizing multiple, differentiating biomarkers
- Proprietary algorithm leverages core Aspira technologies and experience
- Developed with histology confirmed endometriosis and appropriate control cohorts
- Validated in CLIA-certified laboratory environment

Aspira's Advantages

- ✓ CLIA-certified platform
- ✓ Validating in CLIA/CAP/NY/CA state-approved laboratory
- ✓ Experience with both FDA-cleared and Lab Developed Tests utilizing protein biomarkers and proprietary algorithms

EndoCheckSM is a simple, non-invasive blood test:

EndoCheckSM Commercial Launch Timeline



- ✓ EndoCheckSM to be launched by the end of 2023
- ✓ Currently being validated in the same CLIA lab environment where it will be processed commercially
- ✓ Validation is in process with manuscript submission planned
- ✓ Multi-site clinical study launched in 2022 will provide additional clinical data supporting launch of additional endometriosis products, including the in-development EndoMDxTM led by a consortium of leading research partners including Harvard's Dana Farber Cancer Institute
- ✓ Launch activities related to reimbursement, pricing, marketing, and partnerships to prepare for successful commercial launch are ongoing

Financial Performance Snapshot

YTD Year over Year Comparison

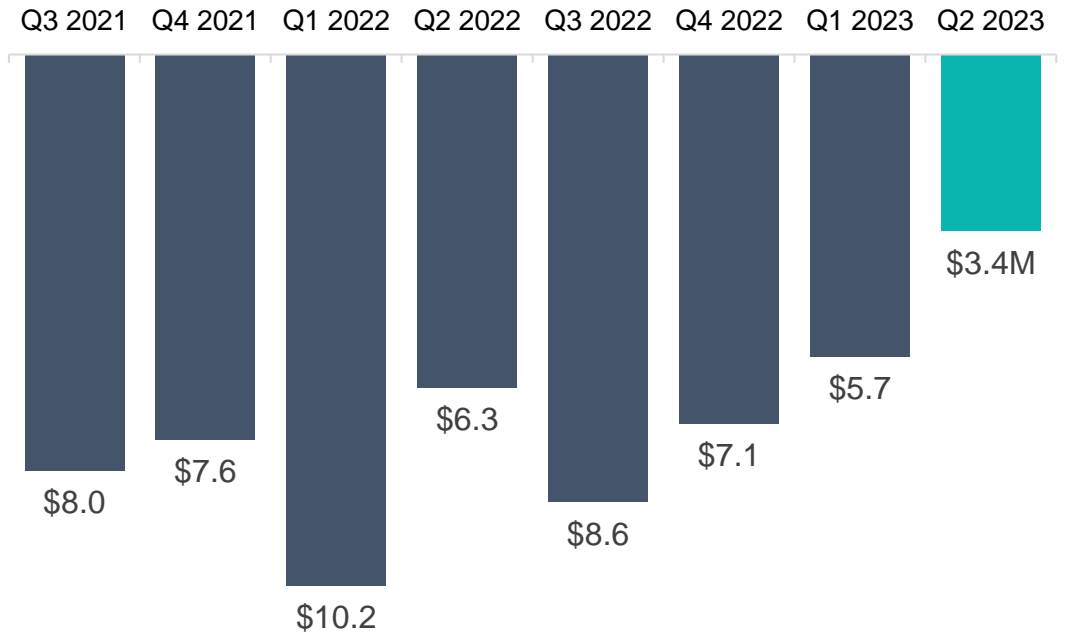


Balance Sheet

Cash Position

Cash* as of June 30, 2023:	\$4.5M
<i>Proforma cash</i> † as of June 30, 2023	\$8.8M
2H23 Operating cash utilization target:	\$6 to 8M

Cash Used in Operations (in Millions)



* Includes cash, cash equivalents and restricted cash

† Includes \$4.3M net proceeds from registered direct offering in July 2023

2023 Key Growth Drivers

OvaSuite Adoption and Growth



Capture the large patient population of women with adnexal masses

Reimbursement Coverage



Expand OvaSuite payer adoption and improve average unit price

Continued Innovation/R&D



EndoCheck development proceeding with anticipated launch in 2H2023

Collaboration Opportunities



Accelerate the MDx collaborations and expand commercial partnerships

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