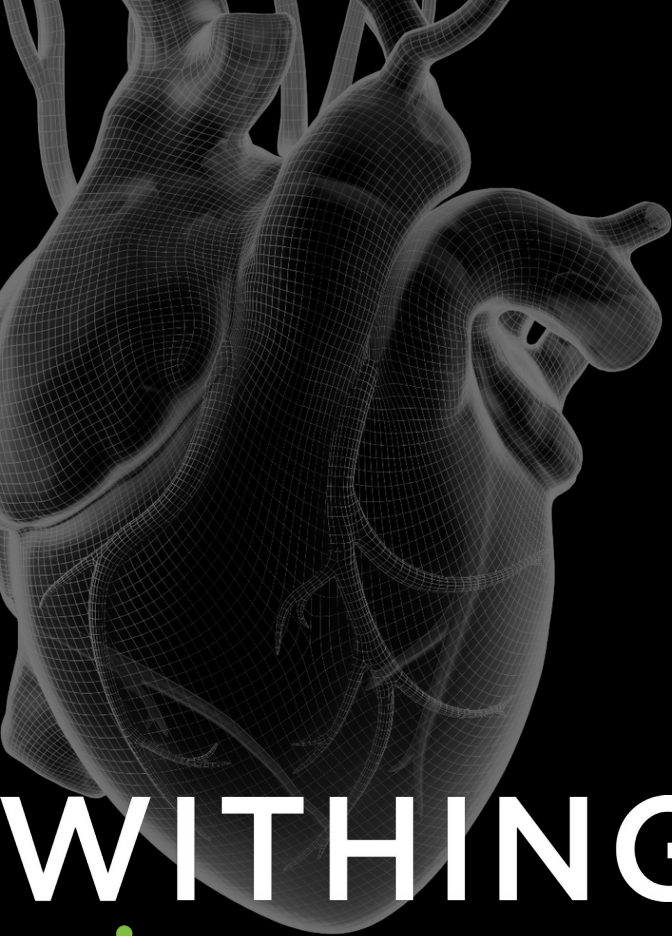




WITHINGS



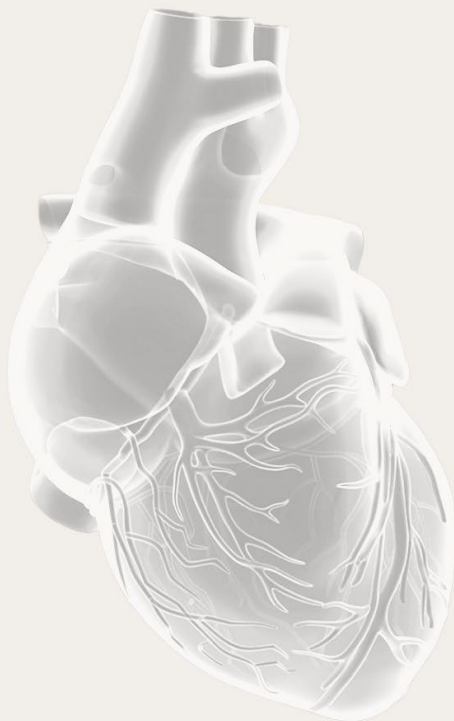
2026 Fall Conference

WITHINGS

We empower people to live longer, healthier lives

+ 15 million
members globally

+ 28
CES Innovation Awards



+ 1 million
patients monitored

+ 70
Patent families

Evolution of Withings into Value-Based Care

2026

**ACCESS
MODEL**

MEDICAL PROGRAMS
Guideline-directed care

2022

**REMOTE
MONITORING**

DATA INTELLIGENCE
Population risk & triage

2009

**CONSUMER
HEALTH**

MEDICAL DEVICES
Biomarker capture



Connected medical device ecosystem

Everything a patient needs to remotely monitor their conditions from home

Body Scales



Blood Pressure Monitors



Cardiopulmonary Wearables



Sleep Monitors



Medical Check-Up



Urinalysis



WITHINGS

Patients who use Withings engage in care and improve their health

Onboarding

94%

Activate and use their device

Engagement

93%

transmit data every month

Retention

92%

use their device after 12 months

90-day
SBP Improv.

20 mmHg*

1-Year
Weight Loss

19%*

Withings Medical Programs

Managing Cardio-Kidney-Metabolic (CKM) conditions in a scalable, outcomes-based model

Medical Devices & Clinical AI

Collect medical data and identify clinical signals for action

Physician-supervised Clinical Team

Individualize care plans focused on guideline-directed medications and sustained lifestyle change

Data Exchange & Care Coordination

Integrate with the member's existing care team



Physician-supervised clinical team

- + Medical Directors
- + Nurse Practitioners
- + Clinical Pharmacists
- + Care Coordinators

Clinician consultations

Telehealth and async engagement with members based on their needs and preferences



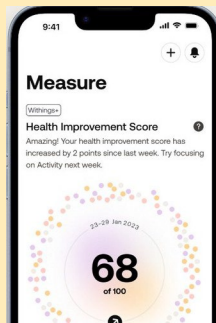
Monitoring & Escalations

Individualized clinical alerts configured to proactively intervene before deterioration



Lifestyle interventions

Behavioral change around sleep, nutrition, activity, and stress



Medication management

Medication prescriptions, titrations and adjustments in accordance with latest guidelines



Member health kit aligned to care pathway

All members receive the App and BPM Pro 2; GLP-1 members also receive Body Pro 3



Cellular BPM Pro 2

All for BP monitoring

Blood Pressure
Heart Rate
Patient-Reported Outcomes



Cellular Body Pro 3

Obesity & Heart Failure

Weight; BMI
Lean Mass; Fat Mass; Visceral Fat
Cardiac Output & Rhythm

Member App

*Access to
data, coaching, and consultations*

Apple App Store:
4.6 Stars
345k Reviews

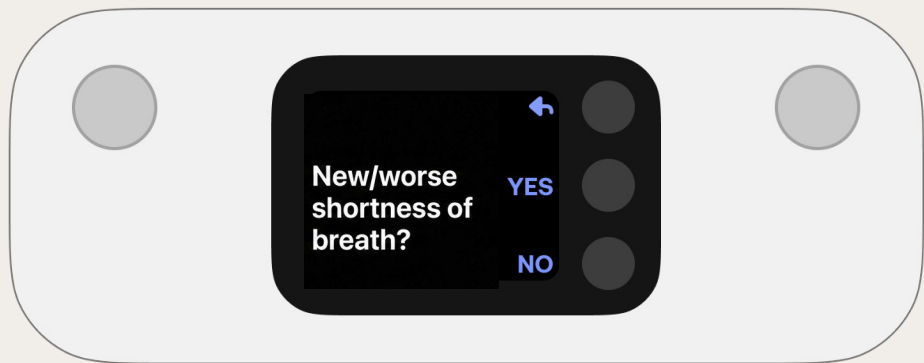


BPM Pro 2: capturing symptoms and medication adherence for safe escalations of care

+ **Monitor medication adherence** alongside the blood pressure reading

+ **Collect symptoms** to triage elevated reading and prioritize care

Triage of elevated BP depends on symptoms – not the BP value alone



Body Pro 3: capturing body composition for safe and effective GLP-1 titrations

+ **Protect lean mass and CKM health**
ensuring high-quality, targeted fat loss

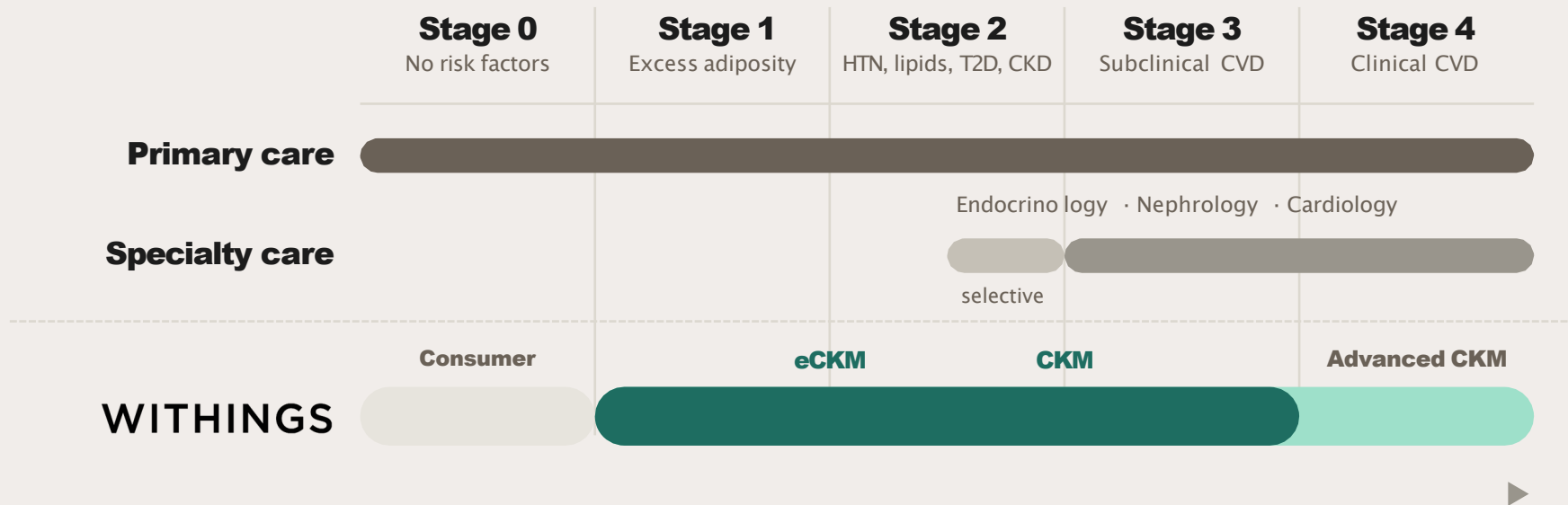
+ **99% correlation with DEXA Scan**
on total fat mass

Lean mass accounts for **20 - 50%** of
the weight loss during GLP-1 therapy



Co-managing the spectrum of CKM syndrome

Withings supports Stage 0, delivers medical care for Stage 1–3, and is building for Stage 4



CKM staging as defined by the AHA / ACC Cardiovascular–Kidney–Metabolic Syndrome framework

Building bridges between Withings members and local ACOs

A digital pathway for patients to enter your ACO's network and receive CKM care at home

New patients into your network

~5M Withings members in the US

~750k age 65+

Connect Withings members in your service area to your primary care, specialty, and diagnostic services.

PCPs practice top-of-license

~70% of ACO patients eligible for ACCESS

~10% eligible for GLP-1 Bridge

Refer eligible ACO patients to Withings for CKM co-management between visits

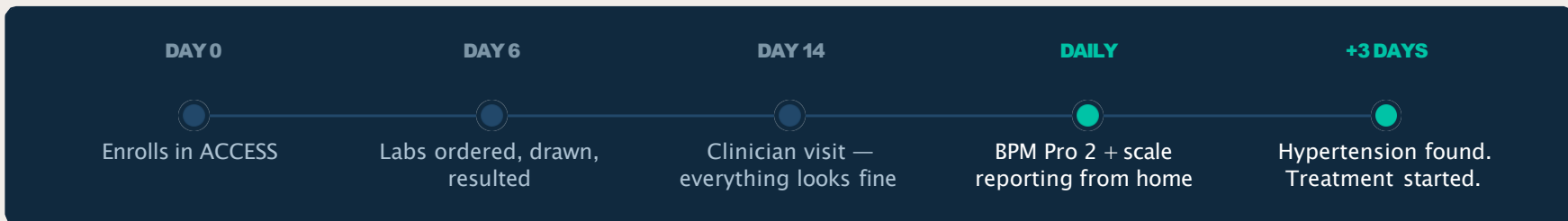
The Withings member journey

From enrollment through treatment and maintenance, Withings creates value across the member journey

	Member journey	Value realized
1 Enroll	Member self-enrolls via the Withings app or is referred for an eCKM/CKM condition	Faster time to treatment
2 Evaluate	Member completes labs and intake across CKM and relevant comorbidities	Finds untreated risk factors and conditions
3 Treat	Member meets their NP, receives devices and an individualized GDMT care plan, and engages in lifestyle change as therapy is rapidly titrated to goal	Faster time to control while increasing PCP capacity
4 Monitor	Member's disease trajectory is modeled continuously; AI-assisted detection flags stagnation, prompts clinical action, and re-engages the member	Avoided acute events and delayed disease progression
5 Maintain	Member completes active treatment at target and moves to maintenance with surveillance retained	Sustained control and step-down therapy success

The record said he was fine. His devices said otherwise.

Enrolled with two well-controlled conditions. Withings found a third one nobody was looking for and treated it.



Automation

Labs ordered, drawn and resulted, devices shipped, education sequenced

Complete baseline in 14 days



Effortless

One enrollment. Devices arrive ready to use. Lessons reach him when they become relevant.

7 lessons read, unprompted



Clinician access

His care team saw the pattern and booked him. No referral, no waitlist, no repeating his story.

3 days: signal → treatment



Connected monitoring

A BPM Pro 2 and a Withings scale reporting daily. The pattern made the diagnosis, not the visit.

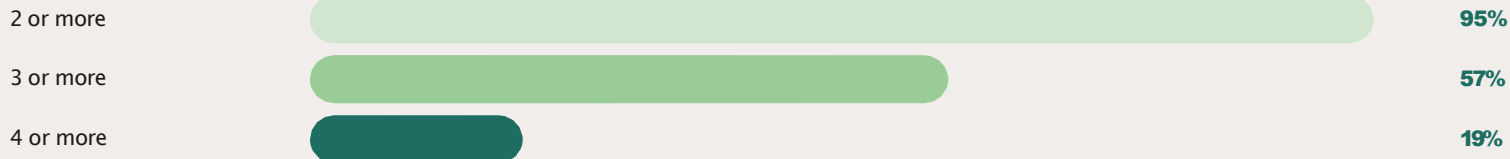
Hypertension found • 3.9 lb lost so far

De-identified ACCESS beneficiary enrolled August 2026. Clinical values, engagement and device data drawn from the medical record and program platform.

Members are initiating care with more than one CKM condition

Conditions are treated with integrated, multi-condition guideline-directed care protocols

CKM conditions per member



Within the eCKM track



Within the CKM track



Connecting Withings members to their local ACO

An integrated model for timely, coordinated care

Value to the ACO

New attributed patients

Withings members without a PCP are connected directly to your primary care.

Specialty and diagnostic referrals

Withings members who need services like cardiology or echocardiography are referred directly.

Community reach

Withings members in your service area who may be unengaged in the ACO.



Referring eligible ACO patients to Withings

Guideline-directed CKM care in collaboration with PCPs

Value to PCPs

Panel capacity

Routine CKM diagnosis, medications and labs handled by Withings Medical

Clinical data

PCPs see patient conditions and progress between visits.

Case finding

Undiagnosed comorbidity surfaced at intake and through monitoring

Quality improvement

Supports ACO quality measures, including blood pressure control and diabetes control.

In scope

CKM condition diagnosis,
monitoring, and management

CKM medication optimization and
side-effect mitigation

CKM labs ordering, management,
and review

Onboarding stages the member and assigns a pathway

Home-captured data and labs resolve into a CKM stage and a care pathway

1**Screen**

Device, HIE, and labs data

2**Stratify**

Total CVD, ASCVD, and heart failure risk

3**Stage**

CKM stage per AHA / ACC, plus kidney health

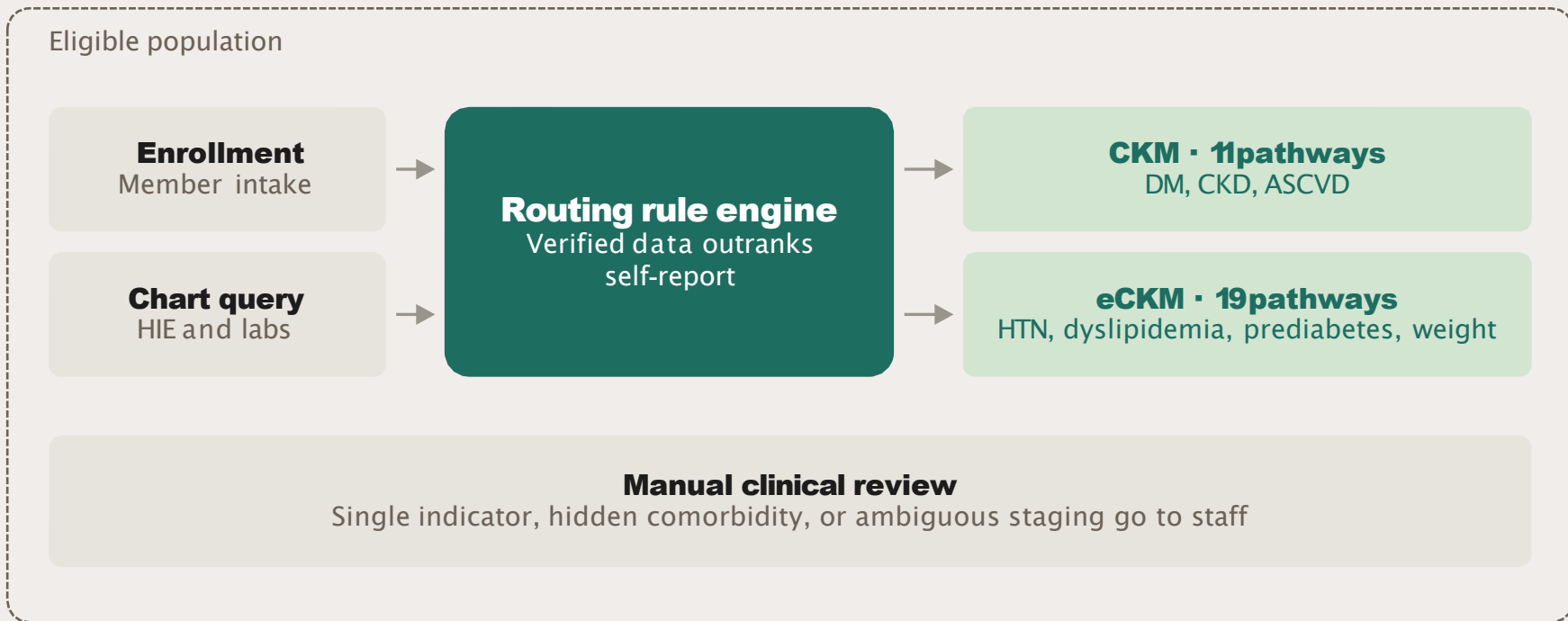
4**Nurse Practitioner visit**

Video visit confirms the pathway assignment



Enrolled members are placed in one of 30 clinical pathways

Members with needs beyond safe remote care are excluded before onboarding



Interventions across a pathway

Treating eligible eCKM and CKM conditions across 30 different pathways

Lifestyle

Education and coaching

Nutrition
Activity and resistance training
Sleep
Tobacco
Alcohol

Screening

Biometrics, labs, risk assessments, PROMs

Obesity
Hypertension
Dyslipidemia
Kidney
Liver and MASLD
Hyperglycemia
CVD risk
Behavioral health
Health-related social needs

Pharmacotherapy

CKM drug classes

Prescription
Side-effect mitigation
Titration
Reconciliation and adherence
De-prescribing

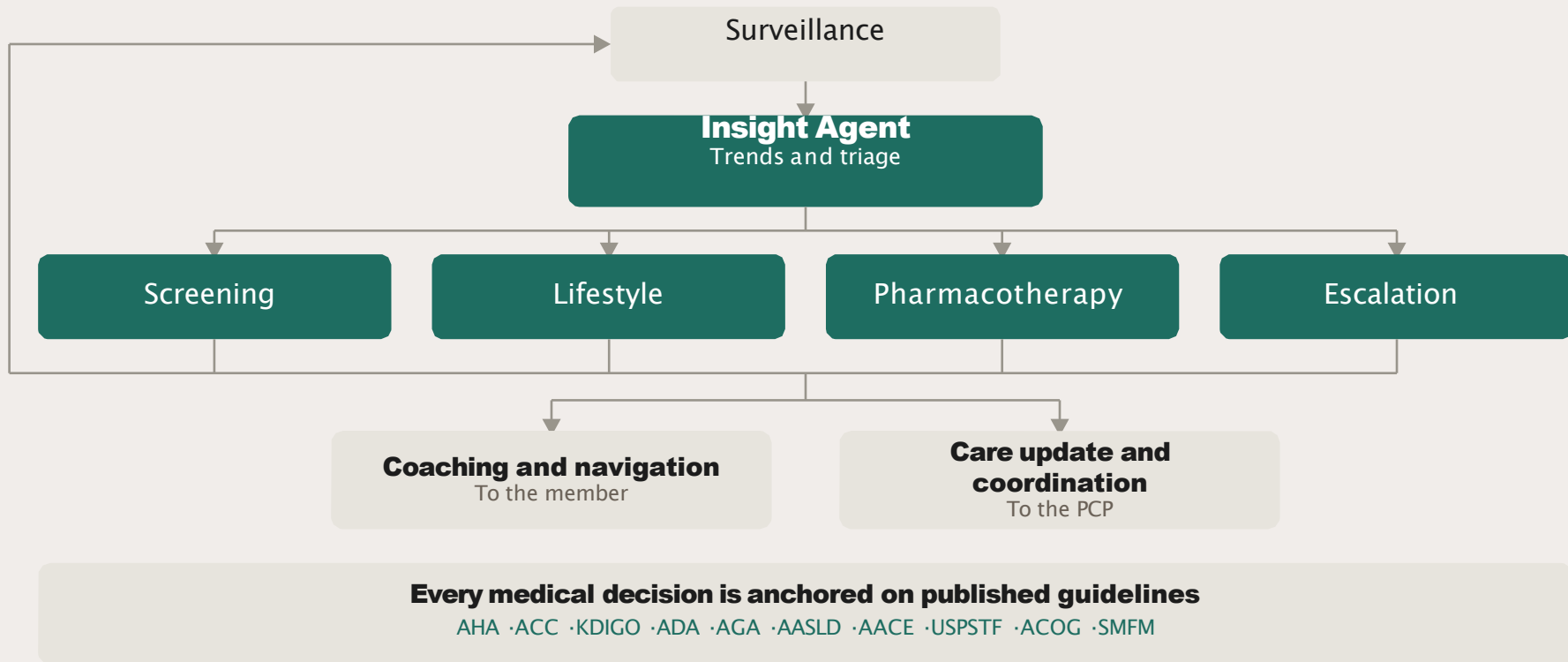
Escalation

Coordination with primary care

Urgent
Specialty care recommendation
Behavioral health needs
Community services

Clinical AI drives guideline-directed care toward control

Continuous surveillance surfaces guideline-directed options for clinicians and PCPs



Predictive analytics to maximize GLP-1 outcomes

Early identification of weight plateaus, lean muscle loss, and therapy non-responsiveness

01 Predictive trajectory modeling

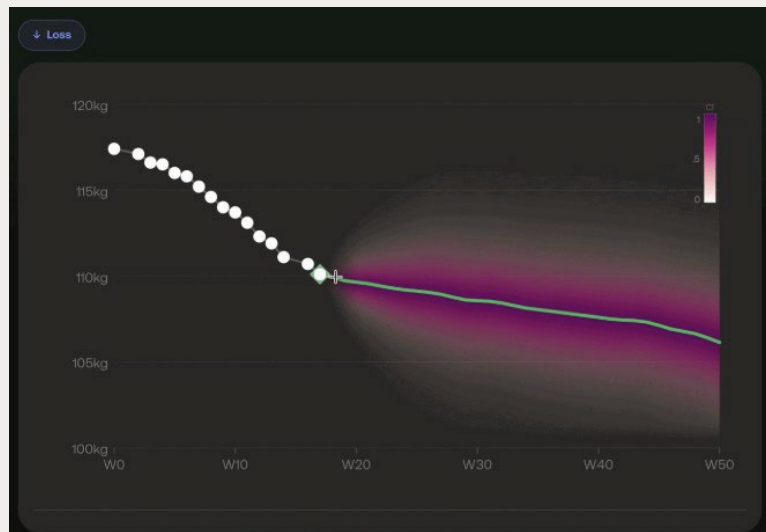
Forecasts weight, fat loss, and lean muscle mass together at every weigh-in

02 Goal probability scoring

Quantifies the probability of meeting target metabolic endpoints by the target date

03 Automated off-track alerts

Separates true plateaus and regain from natural variability



Green line = model estimate. **Shaded band** = confidence interval.

VALIDATED DATASET

Trained on tens of thousands of longitudinal GLP-1 member journeys.

CLINICAL-GRADE PRECISION

DEXA-correlated cellular body composition tracking safeguards lean muscle.

DYNAMIC AUTOMATION

Forecasts and confidence bands recalculate with zero manual input.

GLP-1 optimization toward target control

Surveillance of the member's data enables proactive care decisions

TRENDS AND TRIAGE

ROUTE

INTERVENTION

Member eligible for GLP-1

Screening

Screen for comorbidities and exclusions

Weight plateaus

Pharmacotherapy

Fat mass declining: continue GLP-1 dose
Fat mass flat: up-titrate GLP-1 dose

Lean mass declining

Lifestyle

Increase protein, intensify resistance training.

Eating-disorder screen positive

Escalation

Would not prescribe GLP-1 and recommend behavioral health referral

Co-management — in coordination with the PCP, with care updates on every change

Co-management with PCPs for timely, coordinated care

Care updates

TOUCHPOINT

Care coordinator

CADENCE

Routine quarterly

DELIVERY

HL7/FHIR EHR integrations

Care escalations

URGENT

Coordination within 1 business day

NON-URGENT

PCP notified within 10 days of a change

CLINIC

Mon–Fri, 9 am ET – 6 pm PT

Clinical boundaries

PCP MEDICATIONS

We do not change PCP-owned medications without contacting them

SCOPE

Explicit in-scope and out-of-scope rules

COMMUNICATION

PCPs can contact the care team to review any patient

Thank you

CONTACT US

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WITHINGS