

Company Fact Sheet

About Natera

Natera[®] is a global leader in cell-free DNA testing. The mission of the company is to change the management of disease worldwide with a focus on reproductive health, cancer, and organ transplantation. The company offers proprietary testing services for physicians, researchers and clinicians in cancer including biopharmaceutical companies, and genetic laboratories through its cloud-based software platform.

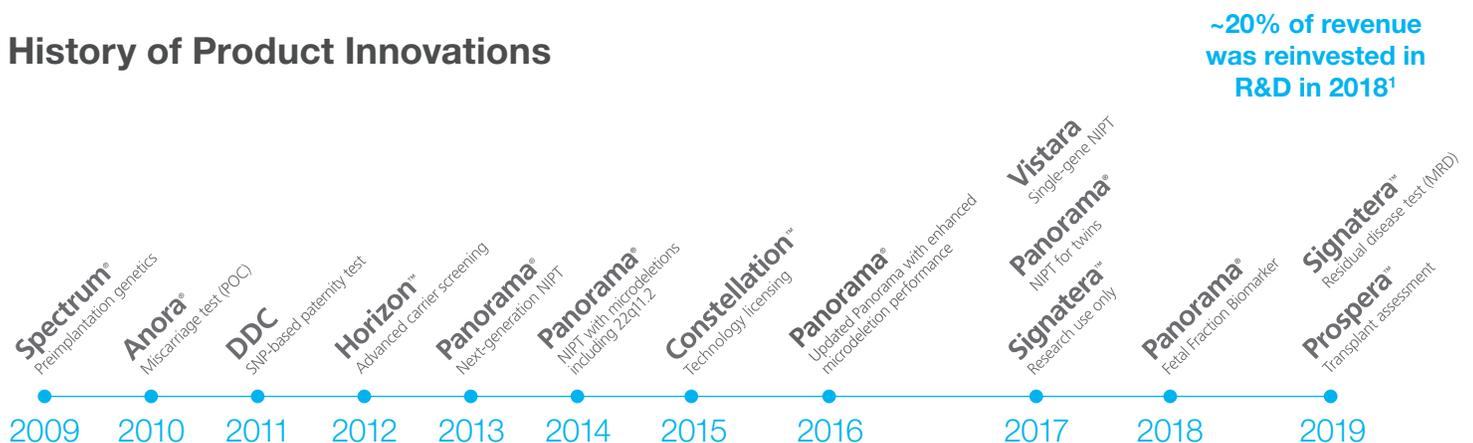
Company Stats¹



Breakthroughs in Science and Technology

Reproductive Health 	Oncology 	Organ Transplantation 
<p>Pioneered SNP-based technology for use in non-invasive prenatal testing, products of conception, and pre-implantation genetic screening and diagnosis.</p> <p>Over 2 million cell-free DNA cases reported¹</p>	<p>The first custom-built circulating tumor DNA (ctDNA) test for molecular residual disease detection and surveillance.</p> <p>May detect molecular recurrence prior to clinical or radiological recurrence, with clinically meaningful lead times²⁻⁷</p>	<p>Natera's core technology has been validated to precisely identify renal transplant rejection—even in difficult biologically-related donor-recipient cases.⁸⁻¹¹</p> <p>Identifies T cell-mediated rejection and subclinical rejection with high precision^{8,10}</p>

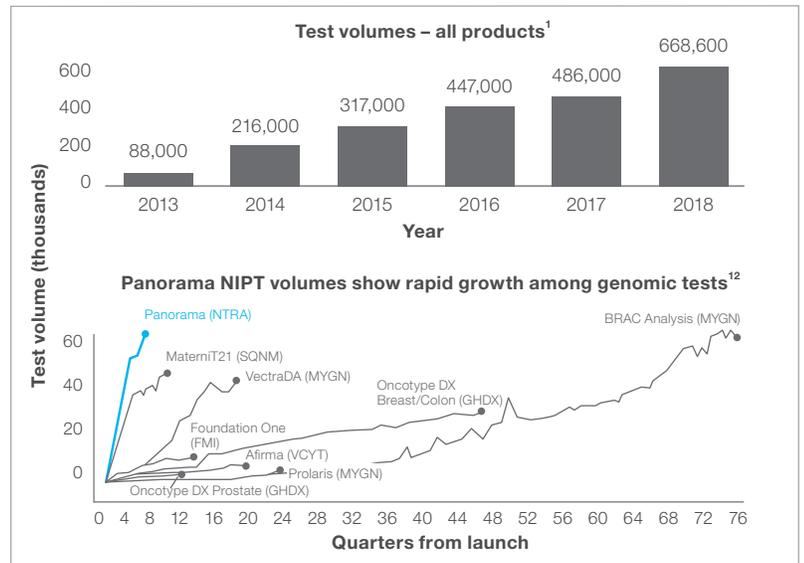
History of Product Innovations





Market Leader in Reproductive Health Genetic Testing

- The unique use of SNPs to analyze DNA allows Natera's Panorama® non-invasive prenatal test to achieve the industry's lowest false negative and false positive rates.¹³⁻¹⁶
- Only Panorama provides zygosity information in twin pregnancies,¹⁷ and detects triploidy and complete molar pregnancies in singleton pregnancies.^{16,18}
- Natera delivers a suite of high-quality products that support families in their journey from preconception to pregnancy, and birth.
- Products include: Horizon™ advanced carrier screening, Spectrum® preimplantation genetics, Panorama next-generation NIPT, Vistara single-gene NIPT, Anora® miscarriage test (POC), and Constellation™ technology licensing.



Pioneering Truly Personalized Cancer Care

- Signatera™ is the first circulating tumor DNA (ctDNA) assay custom-built for molecular residual disease (MRD) detection and surveillance in cancer.
- The Signatera method identifies 16 unique, clonal, somatic variants individualized to each patient's tumor, followed by multiplex PCR and ultra-deep sequencing for serial ctDNA analysis of whole blood samples.
- It is a highly sensitive and specific approach for detecting molecular residual disease in the blood and may identify recurrence months or years earlier than the standard of care.²⁻⁷
- The assay's pan-tumor potential has been demonstrated across multiple tumor types, including breast, bladder, colorectal, and lung.²⁻⁷



Pursuing Earlier, More Precise Assessment of Organ Transplant Rejection

- Natera is applying its expertise in cell-free DNA (cfDNA) to non-invasively identify organ transplant rejection before kidney transplant failure occurs.
- The Prospera™ test assesses kidney rejection by measuring the fraction of donor derived-cfDNA (dd-cfDNA) in the recipient's blood, without the need for prior donor or recipient genotyping.
- The test has been clinically and analytically validated for test performance regardless of donor relatedness,* rejection type, and clinical presentation.
- Studies show Prospera's superior precision and clinical accuracy, relative to other commercially available dd-cfDNA assays.⁸⁻¹¹
- Prospera is the first dd-cfDNA assay with high sensitivity to both T cell-mediated and antibody-mediated rejection, and it is the first to identify subclinical rejection.⁸⁻¹¹

*Except in cases of identical twins

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The tests described have been developed and their performance characteristics determined by the CLIA-certified laboratory performing the tests. These tests have not been cleared or approved by the U.S. Food and Drug Administration (FDA). Although FDA does not currently clear or approve laboratory-developed tests in the U.S., certification of the laboratory is required under CLIA to ensure the quality and validity of the tests. Natera operates an ISO 13485-certified and CAP-accredited laboratory certified under the Clinical Laboratory Improvement Amendments (CLIA) in San Carlos, Calif.

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Conceive. Deliver. Thrive.



Renasight™
Kidney gene panel

A woman with dark, curly hair is shown in profile, looking towards the right. She is wearing a light blue t-shirt. A large, green, stylized speech bubble graphic is positioned to her right, containing the text "Genes have a lot to say".

Genes have a lot to say

Providing insights
with genetic testing
for chronic kidney
disease

Introducing a new tool for the management of chronic kidney disease (CKD)

Renasight™ is a kidney gene panel for patients who have been diagnosed with or who have a family history of CKD.

Renasight has been designed for seamless integration into clinical practice:

- Leverages next-generation sequencing and other methodologies on more than **380 genes** associated with monogenic disorders linked to adult CKD
- Identifies autosomal dominant, autosomal recessive, and X-linked disorders
- Reports out on pathogenic and likely pathogenic variants that were hand-selected by genetics experts to provide actionable information
- Results available within **two to three weeks**



Renascence provides valuable information for patient management



Gain prognostic insight



Test family members and offer genetic counseling



Identify an etiology for patients with unknown cause of their CKD



Prescribe targeted therapies



Refer patients earlier for extra-renal features



Enroll patients in clinical trials

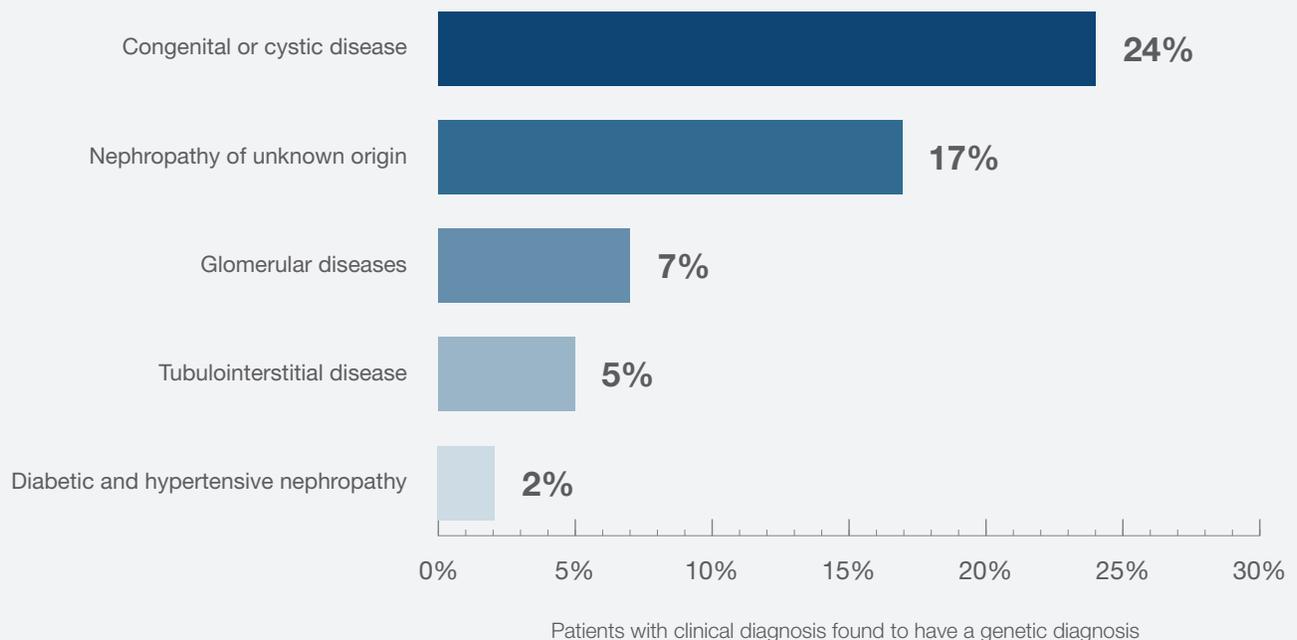
Built on evidence

A recent *New England Journal of Medicine* publication assessing the incidence of genetic disease in a CKD population found **~1 in 10 patients** have a genetic diagnosis.



Pinpoint and plan

Detected diagnostic variants in **9.3%** of 3315 patients with CKD and ESRD¹

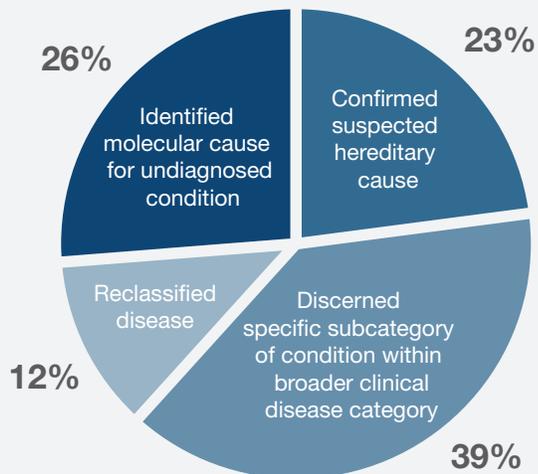




“This yield is similar to that observed for [hereditary] cancer, for which genomic diagnostics are **routinely used.**”¹

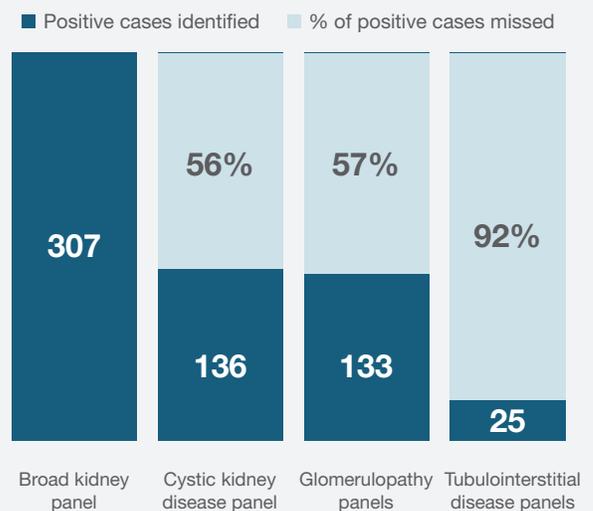
Manage CKD with more information

In **89%** of patients with CKD, a genetic diagnosis had implications for clinical management



Benefit with a broad panel

Targeted panels miss roughly **56%–92%** of positive cases, compared to a broad panel*



*A broad panel was compared to commercially available targeted panels to determine the number of cases identified by the broad panel that targeted panels would potentially be unable to identify.

Improved prognostication of polycystic kidney disease (PKD) progression with genetics²

PKD1/PKD2 mutation-positive

PKD1 Truncating mutations	PKD1 Non-truncating mutations	PKD2
58 Average age of ESRD onset	67 Average age of ESRD onset	79 Average age of ESRD onset

Earlier progression of ESRD by up to 20 years, depending on mutation



PKD1/PKD2 mutation-negative

- **6%–11%** of patients with clinical autosomal dominant PKD (ADPKD) **are negative for mutations in PKD1 or PKD2.**
- Other conditions may present with features similar to PKD but have different disease progression and risks to family members. Genetic testing can distinguish classic ADPKD from other cystic conditions for a more complete clinical picture.



Individualize patient care with **common inherited disorders**

Enhanced insight for glomerular disease^{3,4}

COL4A3, COL4A4, COL4A5 MUTATIONS

Disease	Utility
Focal segmental glomerulosclerosis (FSGS)	Identification of a genetic cause for nephrotic syndromes can prevent unnecessary immunosuppression.
Thin basement membrane disorder (TBMD)	Heterozygous carriers rarely progress to more advanced CKD or ESRD.
Alport syndrome	Establish a diagnosis in individuals without extra-renal manifestations; determine inheritance pattern for genetic counseling.



Clear clinical utility for disease management

Disease	Utility
Primary Hyperoxaluria (PH1, PH2, PH3)	Three forms of PH have been identified, and are associated with different enzyme-producing genes. Specific mutations within these genes may also affect disease severity. Timely diagnosis of PH1 is essential to slow progression, manage medications, and provide appropriate pre-transplant workup. ⁵
Fabry disease	X-linked disorder with ESRD typical in the third to fifth decade for males, and variable presentation in females. Early diagnosis can lead to testing of at-risk relatives, enzyme-replacement therapy, and referrals to other specialists. ⁶



actionable clinical insights for
and **less-frequent disorders**

Applicable for patients being evaluated for kidney transplant

Up to **30%** of patients have end-stage renal disease of unknown etiology



Assess risk of recurrence

C3 glomerulopathy (C3G)*



Accurate diagnosis

FSGS*



Provide treatment info

aHUS*

Disease examples

*KDIGO Clinical Practice Guideline on the Evaluation and Management of Candidates for Kidney Transplantation.

Natera is committed to supporting you



We welcome all insurance plans

and provide affordable testing through a variety of payment methods.

How much will it cost?

- **Compassionate Care Program:** Natera proactively verifies eligibility for all patients. Patients who meet criteria will owe between \$0-149, based on federal income criteria. Patients who aren't eligible for the Compassionate Care Program will generally have an out-of-pocket responsibility of \$0-\$349 depending on their plan.
- **Commercial Insurance:** To protect against unexpected costs, Natera will estimate a patient's out-of-pocket cost and if it exceeds \$349 the patient will be contacted to discuss discounted cash pay options as an alternative to billing insurance.
- **Government Insurance (Medicare and Medicaid):** We do not expect patients to have any out-of-pocket expense.

Access board-certified genetic counselors

Natera has more than 50 certified genetic counselors who are available to answer any provider or patient questions.



Patients can schedule a complimentary information session with a board-certified genetic counselor before or after their Renasight test.



Discover multiple sample options

Natera accepts both blood and saliva samples. Collection kits can be shipped directly to the patient.

REFERENCES

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- 6 Mehta A and Hughes D. Fabry Disease. *GeneReviews*(R) ncbi.nlm.nih.gov/books/NBK1116/?term=fabry

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The test described has been developed and its performance characteristics determined by the CLIA-certified laboratory performing the test. The test has not been cleared or approved by the US Food and Drug Administration (FDA). Although FDA has generally not enforced the premarket review and other FDA legal requirements for laboratory-developed tests in the US, certification of the laboratory is required under CLIA to ensure the quality and validity of the tests. CAP accredited, ISO 13485, and CLIA certified.

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