

INVESTOR PRESENTATION MAY 2026

Paul R. Gudonis, Chairman and CEO
David Henry, CFO

Conquering Upper Limb
Paralysis with Wearable
Medical Robotics



Legal Disclaimer

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Strategic Positioning

Created New Product Category with MyoPro Myoelectric Orthosis

First-Mover Advantage in a Large and Growing Market with Strong Competitive Position

CMS Reimbursement and New Payer Contracts Expanding Patient Access

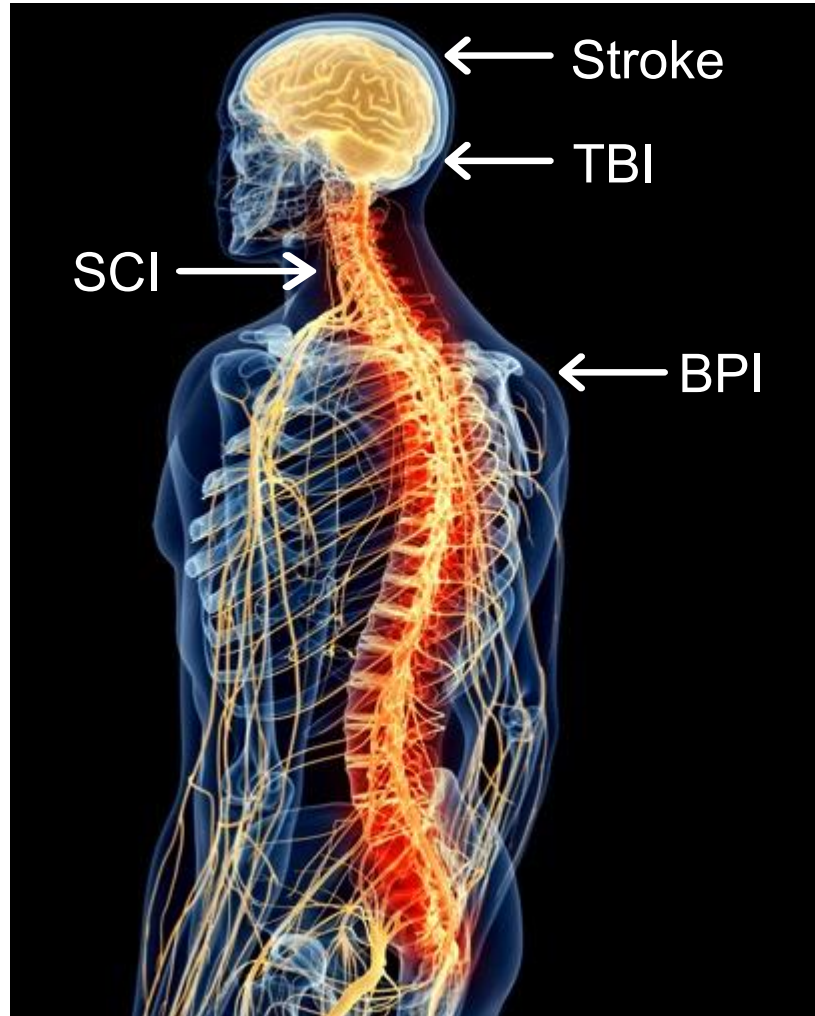
Growing Revenues from Recurring Patient Sources

Attractive Margin Profile with Opportunity for Scale Economics

Causes of Arm and Hand Paralysis: Stroke, Nerve Injury, or Disease

Major Dx

- Stroke/CVA
- Traumatic Brain Injury
- Spinal Cord Injury
- Brachial Plexus Injury



Other Dx

- Cerebral Palsy
- Multiple Sclerosis
- ALS
- Spinal Muscular Atrophy
- Acute Flaccid Myelitis

Substantial Market Opportunity

40,000 to 80,000 patients replenish the prevalence population each year



Roughly 50% – 60% are left with upper extremity impairment

800,000 strokes per year in the U.S.

Annual Incidences

We believe the TAM for the MyoPro approximately doubles with Medicare Part B reimbursement



~ 3.8 million people who have suffered stroke in the U.S who are left with upper extremity impairment.

Prevalence Population

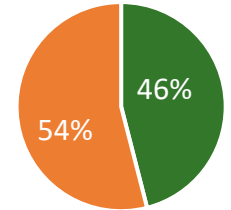
Surviving patients that also carry appropriate insurance

Surviving patients that also meet medical inclusion criteria

Surviving patients that are living at home, not in assisted living

400,000 to 800,000 patients may qualify for a MyoPro

Senior Insured Population



■ Medicare Part B ■ Med. Advantage

Source: Kaiser Family Foundation

Source: Centers for Disease Control and Prevention, Christopher and Dana Reeve Foundation, Frontiers in Neurology, American Heart Association (*Stroke*) and Myomo base model estimates

Recurring Patient Sources: Rehab Hospitals and O&P's



ONSET

Incidence:
800,000
Cases/Yr.
in US

ACUTE CARE

Onset → 1 week

SUB-ACUTE CARE

1 week → 6
months

OUTPATIENT THERAPY

(Incidence)

6–12 months



MyoConnect
& O&P
Channel

CHRONIC HEMIPARESIS

(Prevalence)

> 6–12 months

DTC
Advertising

Reimbursement and Contracting Status

HCPCS Codes L8701, L8702 for MyoPro

- Issued January 2019
- As of January 1, 2024, these codes are in the brace benefit category, meaning lump sum reimbursement
- Effective January 1, 2026, the updated published fees for our HCPCS codes:
 - L8701 (Motion W) - \$34,970
 - L8702 (Motion G) - \$68,802
- Medicare serves approximately 69M* patients

Medicare Advantage plans are required to follow Medicare coverage guidelines.

- Applying legal pressure to increase pre-authorization rates

Have entered into contracts with commercial payers covering over 80 million lives.

- Multi-State contracts with Elevance (Anthem) in progress

More than 100 VA medical centers have ordered MyoPros



BlueCross BlueShield



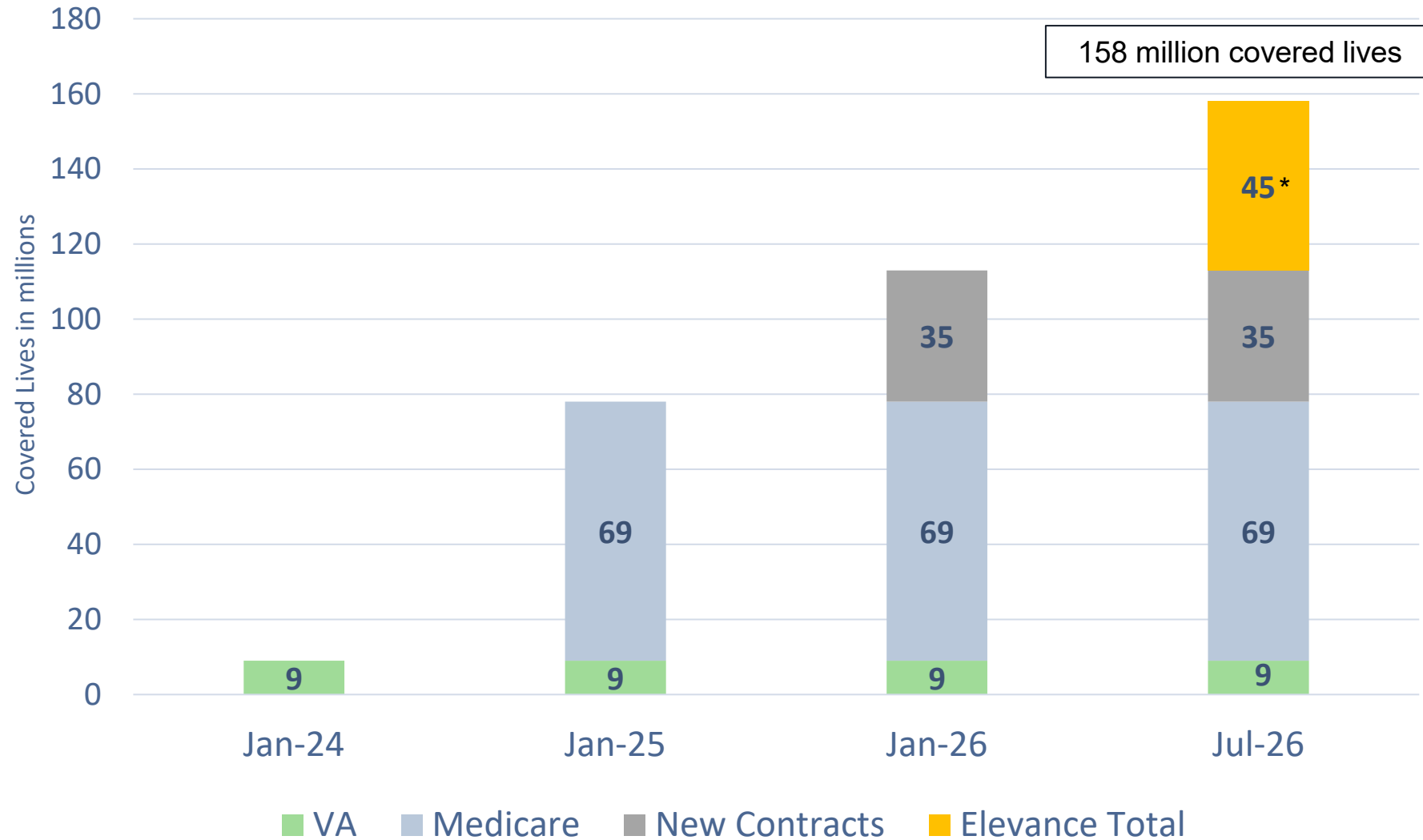
Humana



U.S. Department
of Veterans Affairs

* Source: Centers for Medicare and Medicaid Services monthly enrollment data

Market Access – More Payer Contracts and Covered Lives



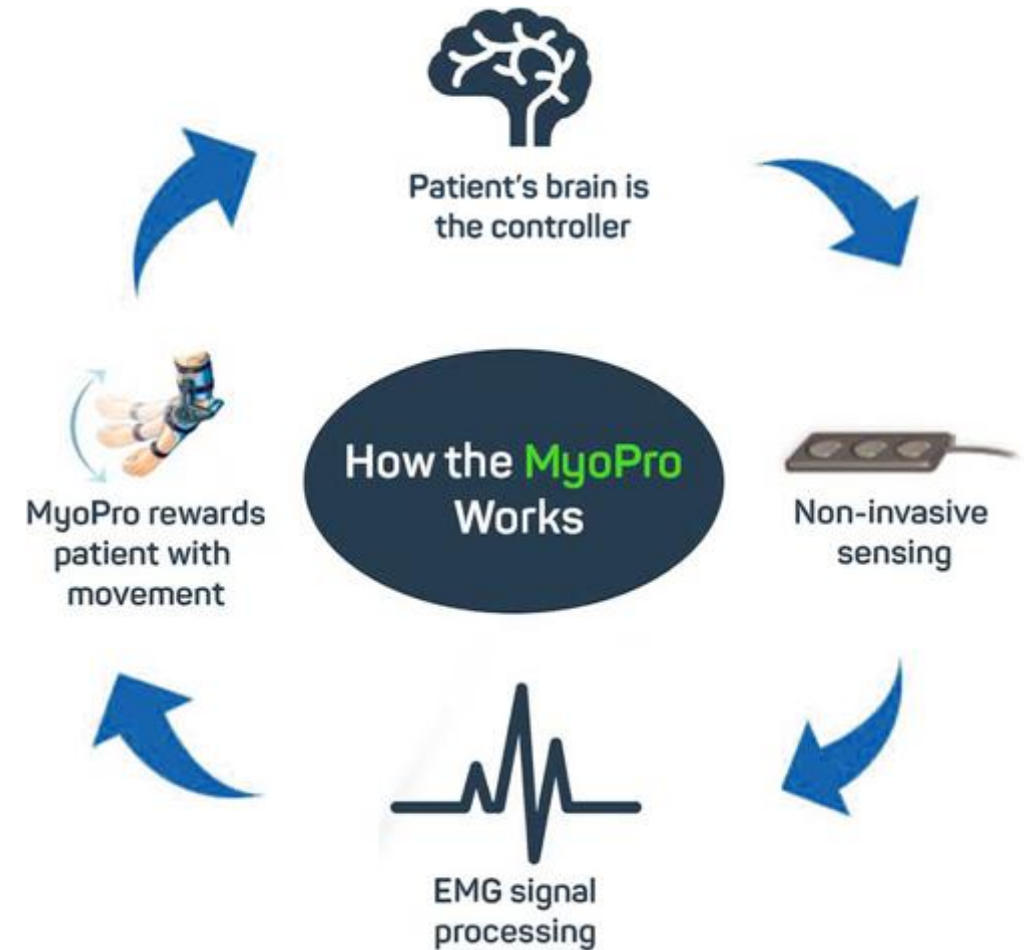
* Pending completion of multi-state contracts expected by the end of Q2'26

Enabling a Paralyzed Arm to Move Again

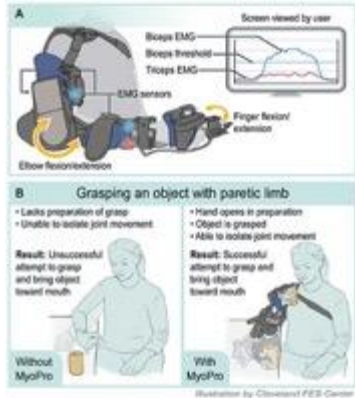


MyoPro Powered Arm Brace: Restoring Upper Extremity Function

- MyoPro uses advanced sensor technology as a **brain-computer interface to detect the user's intention to move** via the body's **electromyogram (EMG) signal**
- Myomo's proprietary control algorithms interpret the strength of the patient's EMG signal, and our microprocessor-based system can amplify the EMG signal by a factor of 100,000x
- Lightweight motors in the device are activated enabling the patient to move their impaired arm through their own volition
- 35 Patents in U.S. and International markets valid through 2042. Additional patents pending.
- MyoPro 2x launched in 2025. Improves ease of donning and user experience.



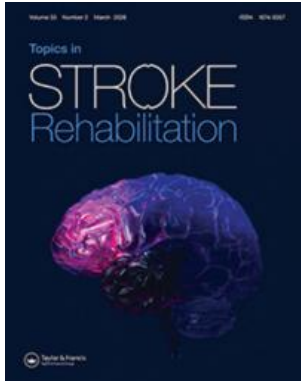
Growing our Body of Clinical Research



Myoelectric Arm Orthosis Assists Functional Activities: A 3-Month Home Use Outcome Report

Influence of a Myoelectric Arm Orthosis. A Minimum 6 to 17-Month Retrospective Home Use Study On Subjects 65 And Older Using The DASH Outcome Measure (Medicare-Age Population)

Results: Both studies showed statistically significant and clinically meaningful improvements in upper extremity function were observed on validated outcome measures and functional tasks with the MyoPro.



Use of Myoelectric Orthosis After Stroke or Traumatic Brain Injury: A Systematic Review

Results: A systematic review published in Topics in Stroke Rehabilitation reports functional improvements in validated outcome measures among stroke survivors using powered upper-extremity orthoses, supporting their role as a compensatory intervention in chronic impairment.

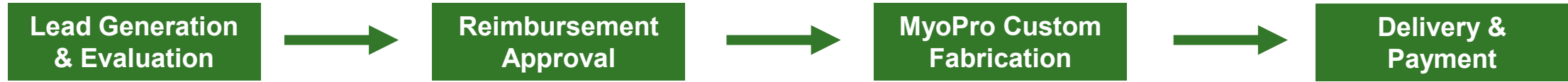


Randomized controlled trial underway at University of Utah.

Other Research:



Go-to-Market Approach: How a Patient Obtains a MyoPro



TV, Social Media

Clinical Referrals



Shirley Ryan AbilityLab



New MyoPro 2x



Fitting by licensed CPO
Referral to OT for training
MyoCare Coaches

Medicare



Medicare Advantage Plans

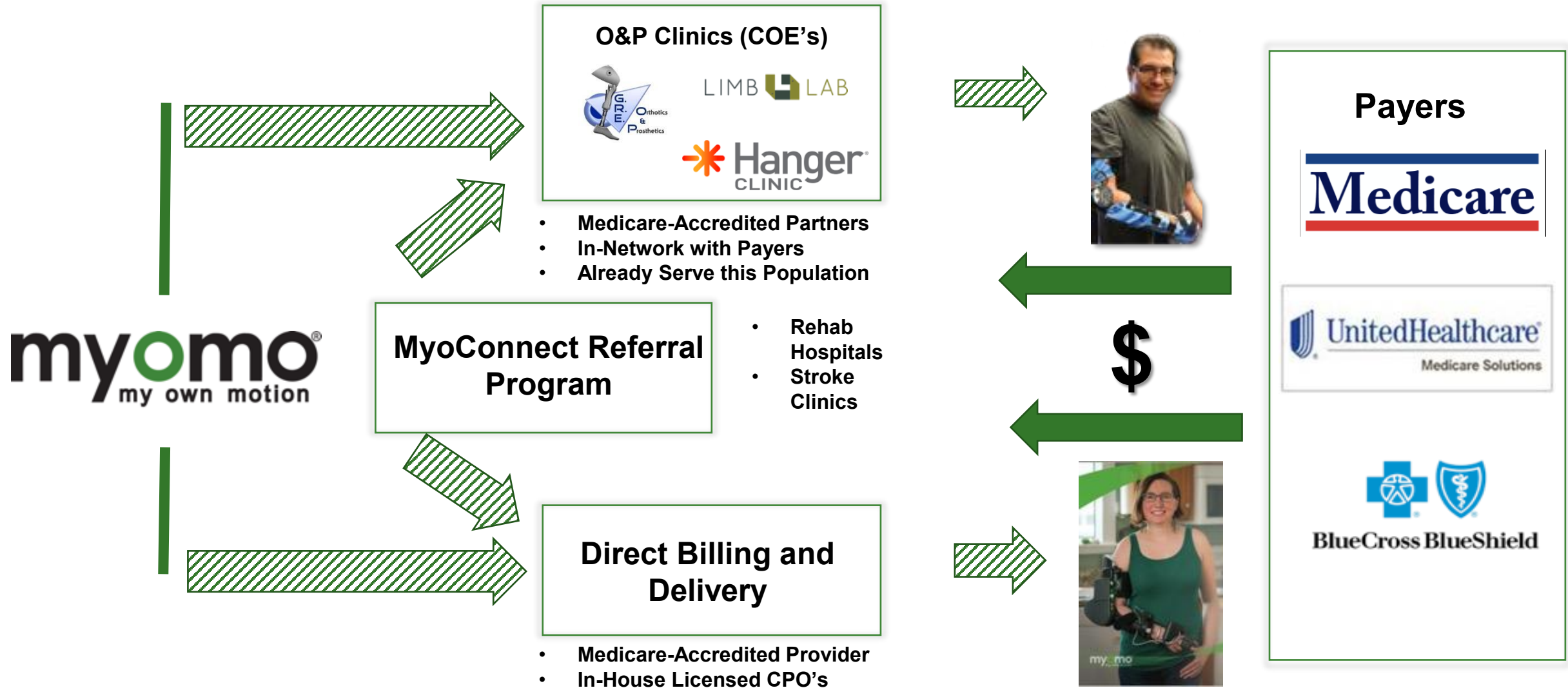
Remote Measurement and In-House Manufacturing



Cost-Effective TV Advertising for Target Demographic



With Reimbursement in Place, We Are Developing a Nationwide Network of Recurring Patient Sources



2026 Strategy Direction & Four Success Pillars

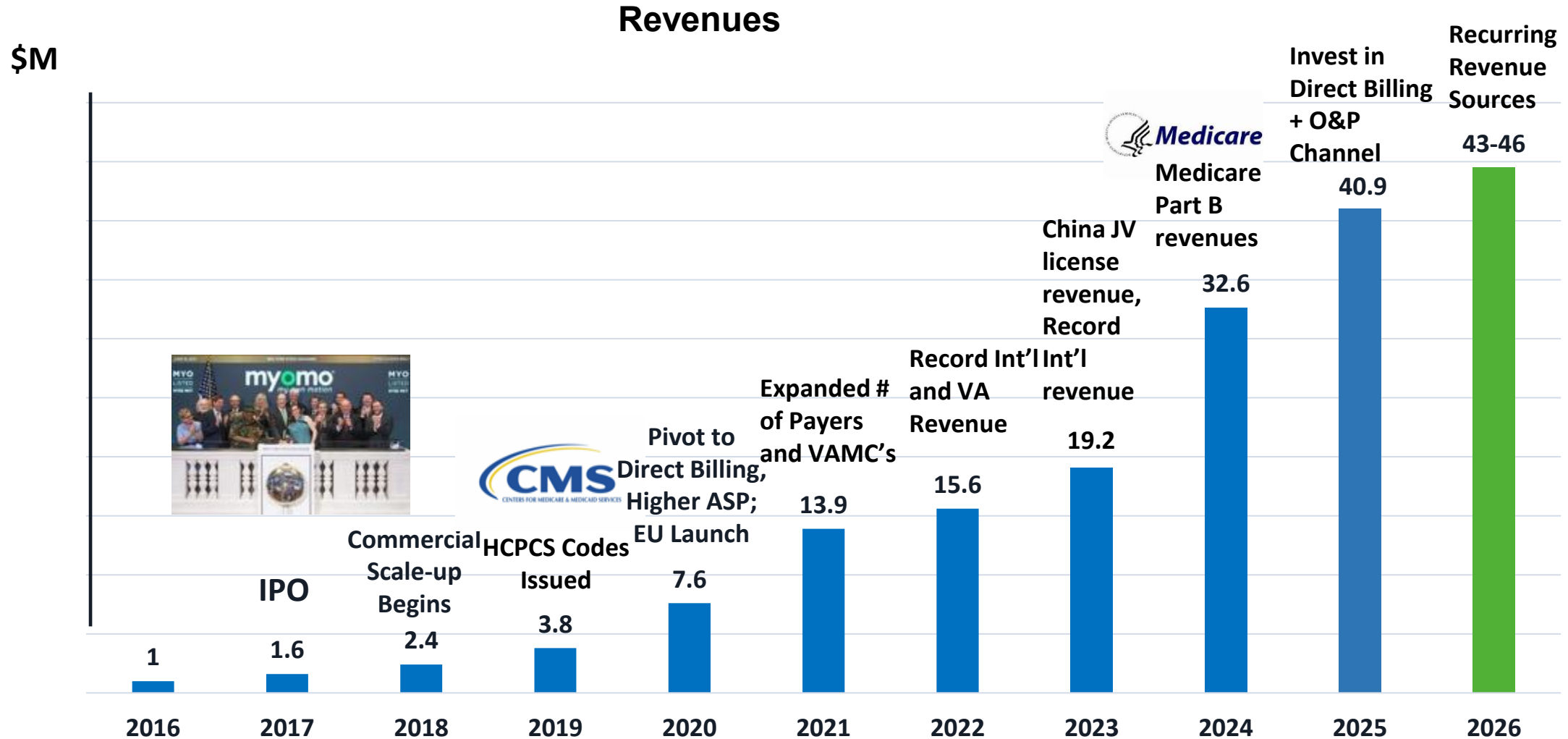
- 1. Shift to Recurring Revenue Sources:**
 - MyoConnect Referrals from Rehab Hospitals and O&P Channel

- 2. Increase Market Access with Additional Payer Contracts**

- 3. Demonstrate Operating Leverage**
 - Grow Revenues > Operating Expense growth
 - Increase Revenue / Head
 - Reduce COGS

- 4. Invest in Product Development and Research**
 - Market Leadership and Competitive Position
 - RCT for Medicare Advantage coverage

Key Milestones Driving Revenue Growth



P&L and Key Balance Sheet Metrics

P&L

(\$000's)	Actual Q1'26	Actual Q1'25	Actual 2025	Actual 2024
Product Revenue	\$ 10,113	\$ 9,832	\$ 40,928	\$ 32,551
License Revenue	-	-	-	-
Total Revenue	10,113	9,832	40,928	32,551
COGS	3,211	3,222	14,040	9,366
Gross Profit	6,902	6,610	26,888	23,185
Gross Margin	68.2%	67.2%	65.7%	71.2%
Operating Expenses:				
R&D	1,623	1,790	6,944	4,772
Selling, Clinical & Mtkg	4,817	4,396	20,385	12,237
G&A	3,619	3,944	13,961	12,383
Total	10,059	10,130	41,290	29,392
Operating Loss	(3,157)	(3,520)	\$(14,402)	\$ (6,207)
Interest expense (income)	504	(192)	451	(389)
Other (income) expense	(839)	-	217	-
Income Taxes	187	137	504	366
	(148)	(55)	1,172	(23)
Net Loss	\$ (3,009)	\$ (3,465)	\$(15,574)	\$ (6,184)

Key Balance Sheet Metrics

(\$000's)	Actual Q1'26	Actual Q4'25
Cash & Investments	\$ 15,696	\$ 18,394
Working Capital	16,273	19,212
Debt	12,568 *	12,527
Shareholders' Equity	9,002	11,403
Shares Outstanding	42,330 **	42,235

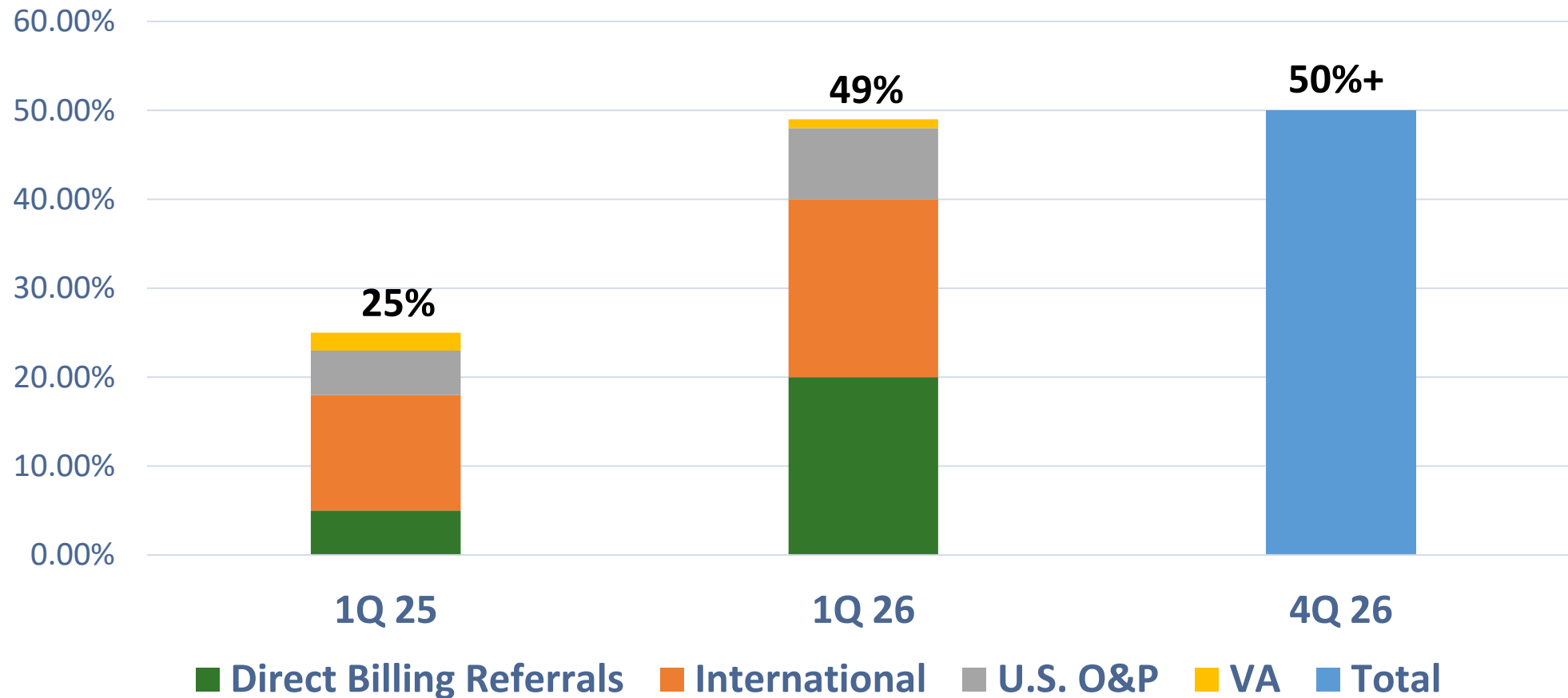
* Face value + accretion of final payment liability

** Includes unexercised pre-funded warrants

Notes:

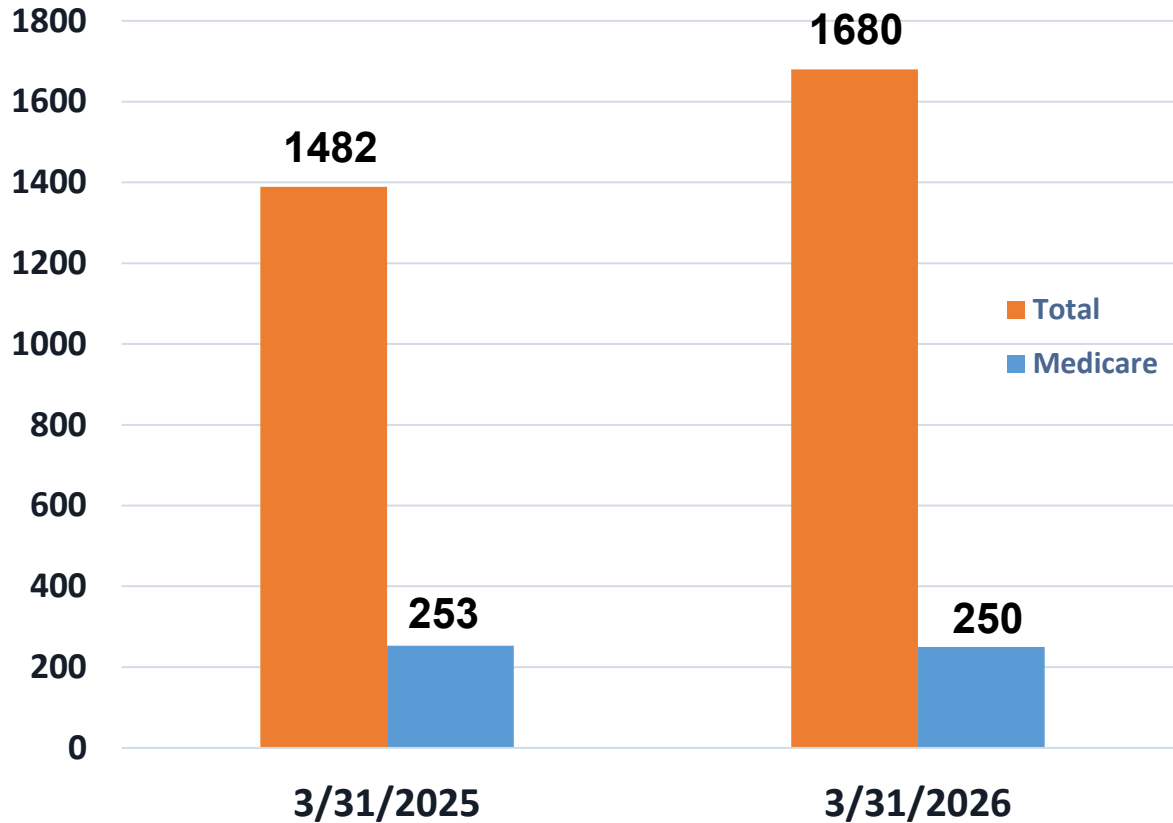
- Interest only on debt until May 2027
- Operating leverage in Q1 as guided

Recurring Patient Sources: Referrals and O&P Channel

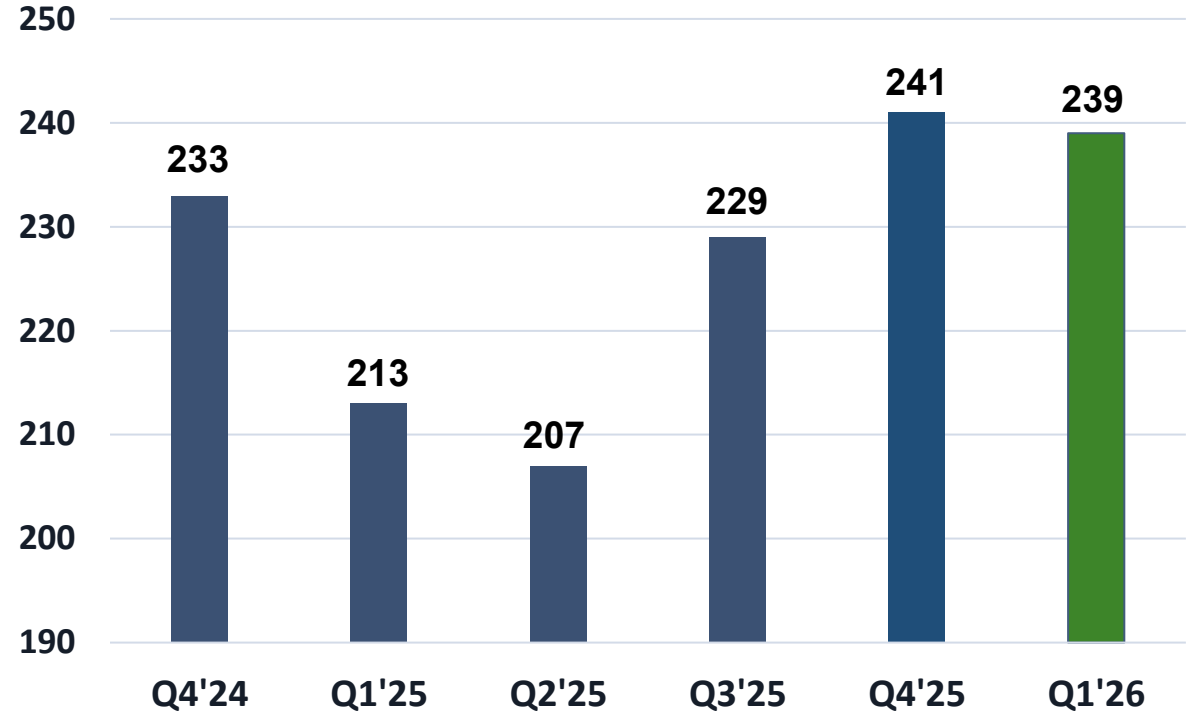


Key Metrics: Pipeline and Authorizations

Pipeline



Orders: Key to Revenue Growth



	Q4'24	Q1'25	Q2'25	Q3'25	Q4'25	Q1'26
Backlog	272	249	230	208	199	226
Revenue Units	220	182	178	186	208	172
Book-to-Bill*	0.84	0.87	0.89	0.88	0.96	1.13

* Net of drops from the backlog

2026 Strategy Direction & Four Success Pillars

1. Shift to Recurring Revenue Sources:

- MyoConnect Referrals from Rehab Hospitals and O&P Channel

Q1 Update – 49% of Q1 revenue from recurring sources vs. 25% a year ago

2. Increase Market Access with Additional Payer Contracts

Q1 Update – Entering into new state-by-state contracts with Elevance

3. Demonstrate Operating Leverage

- Grow Revenues > Operating Expense growth
- Increase Revenue / Head
- Reduce COGS

Q1 Update – 3% revenue growth vs. prior year, Opex 1% lower

Gross margin up 100bps vs prior year

Adjusted EBITDA – improved by 20% vs. prior year

4. Invest in Product Development and Research

- Market Leadership and Competitive Position
- RCT for Medicare Advantage coverage

Q1 Update - RCT in progress. 18 subjects enrolled

Leadership Team & Board of Directors

Management Team Members



Paul R. Gudonis
Chairman & CEO

Scaled multiple tech co's, largest from \$5M to \$1.2B revenue (BBN/Genuity)



David Henry, CFO

Raised nearly \$900M in capital for public companies



Micah Mitchell
Chief Commercial Officer

Grew sales 10x at several custom DME businesses



Dr. Harry Kovelman
Chief Medical Officer

Track record of expanding patent access for new technologies



Malcolm Bock
VP of Engineering and Product Strategy

Experienced Medical Device Engineering Executive



Dennis Shay
Dir - QA/RA

Leads Quality and Regulatory Affairs efforts to enable global market access



John Frijters
Managing Director - International

Experienced executive O&P Europe - based



Kathy Sawyers, PT, ATP Sr.
Dir. - Clinical Outcomes

Oversees clinician training and user support



Colin Anderson
Dir - Global Operations

Experienced at scaling operations in med device industry

Board of Directors



Thomas Kirk
Lead Independent Director

Former CEO, Hanger Clinics



Thomas Crowley
Board Member

Experienced Med Device CEO



Milton Morris
Board Member

Former President & CEO, Neuspera Medical; Boston Scientific exec



Heather Getz
Board Member

CFO & COO
Butterfly Network, Inc.



William Febbo
Board Member

CEO and Director
Performance Health Systems



Joseph Manko
Board Member

Senior Principal
Horton Capital Management

Thank You!



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