7 March 2025

Australian Securities Exchange
20 Bridge Street
Sydney NSW 2000

Coffee Microcaps Presentation

Melbourne, Victoria | Alcidion Group Limited (ASX:ALC) **Alcidion CEO and Managing Director, Kate Quirke** presented at Coffee Microcaps Results Webinar on Thursday, 6 March 2025. The attached presentation was used in support of the webinar.

The recording of the webinar will be available on the Coffee Microcaps YouTube Channel on Monday, 10 March 2025.

ENDS

Authorised for ASX release by the Chair of Alcidion Group Limited.

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About Alcidion

Alcidion Group Limited (Alcidion) has a simple purpose, that is, to transform healthcare with proactive, smart, intuitive technology solutions that improve the efficiency and quality of patient care in healthcare organisations, worldwide.

Alcidion offers a complementary set of software products and technical services that create a unique offering in the global healthcare market. Based on the flagship product, Miya Precision, the solutions aggregate meaningful information to centralised dashboards, support interoperability, facilitate communication and task management in clinical and operational settings and deliver Clinical Decision Support at the point of care; all in support of Alcidion's mission to improve patient outcomes.

Since listing on the ASX in 2011, Alcidion has acquired multiple healthcare IT companies and expanded its foothold in the UK, Australia, and New Zealand to now service over 400 hospitals and 87 healthcare organisations, with further geographical expansion planned.

With over 20 years of healthcare experience, Alcidion brings together the very best in technology and market knowledge to deliver solutions that make healthcare better for everyone.

www.alcidion.com

ALCIDION

Coffee Microcaps Presentation

March 2025

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Alcidion: rapidly scaling, best-in-class

Healthcare software and informatics company revolutionising efficiency and quality of care

- Best-in-class, Australian-made healthcare software – now rapidly scaling as a preferred supplier in key global markets.
- 100+ clinical implementations in Australia and abroad. Lucrative, long-term contracts expected to expand in size and value as new features are deployed.
- Strong balance sheet, with more than AU $150m revenue locked in for the five years from FY26-FY30 – and more deals imminent.
- Highly experienced team with specialist expertise translating clinical needs into technical solutions.
- Compelling lead technology - Miya platform - transforming data interoperability and software integrations to streamline patient flow, unify patient records, support clinical decision-making, and scale remote patient monitoring.

What is Miya Precision?

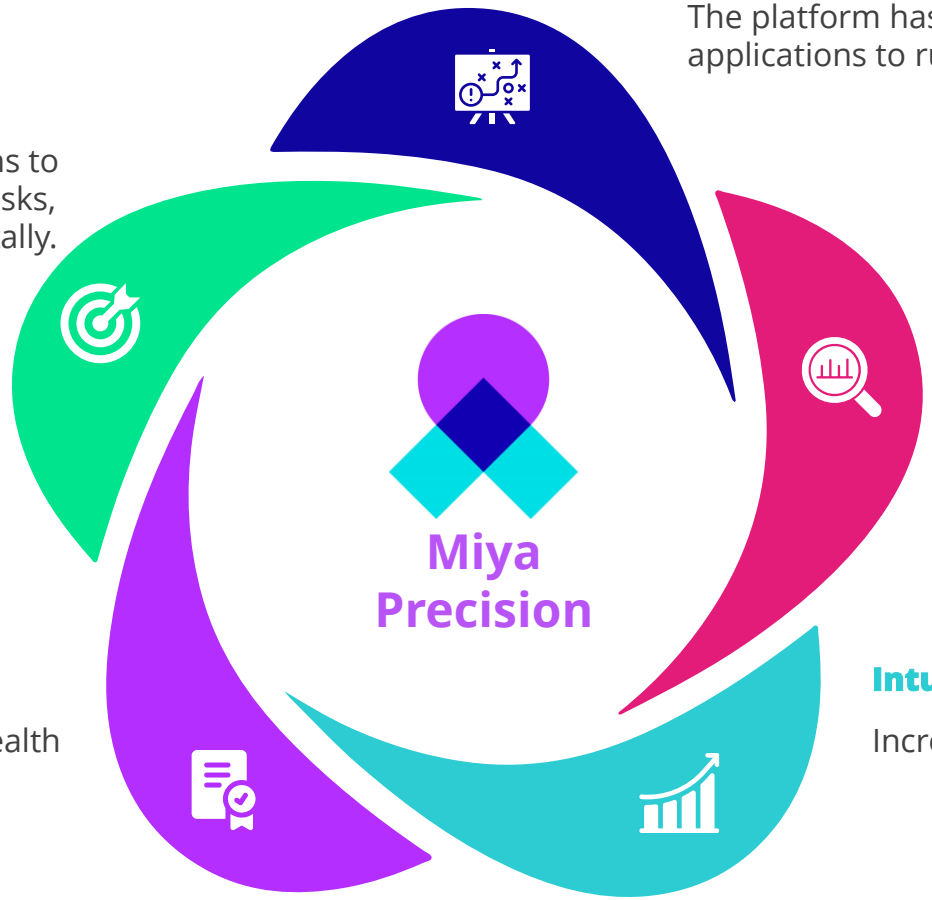
First and foremost, Miya Precision is a data platform for healthcare. Miya Precision provides the foundation for the application of AI in healthcare.

Designed for AI

The platform has been designed for AI, enabling 3rd party applications to run and deliver insights to clinicians

Digital Clinical Workflow

Miya Precision enables clinicians to fully coordinate patient care, tasks, alerts and communication digitally.



Operate in Real-Time

Systemwide transparency is available in real-time, showing bed availability, blockages, and critical events

Integrate and Liberate Data

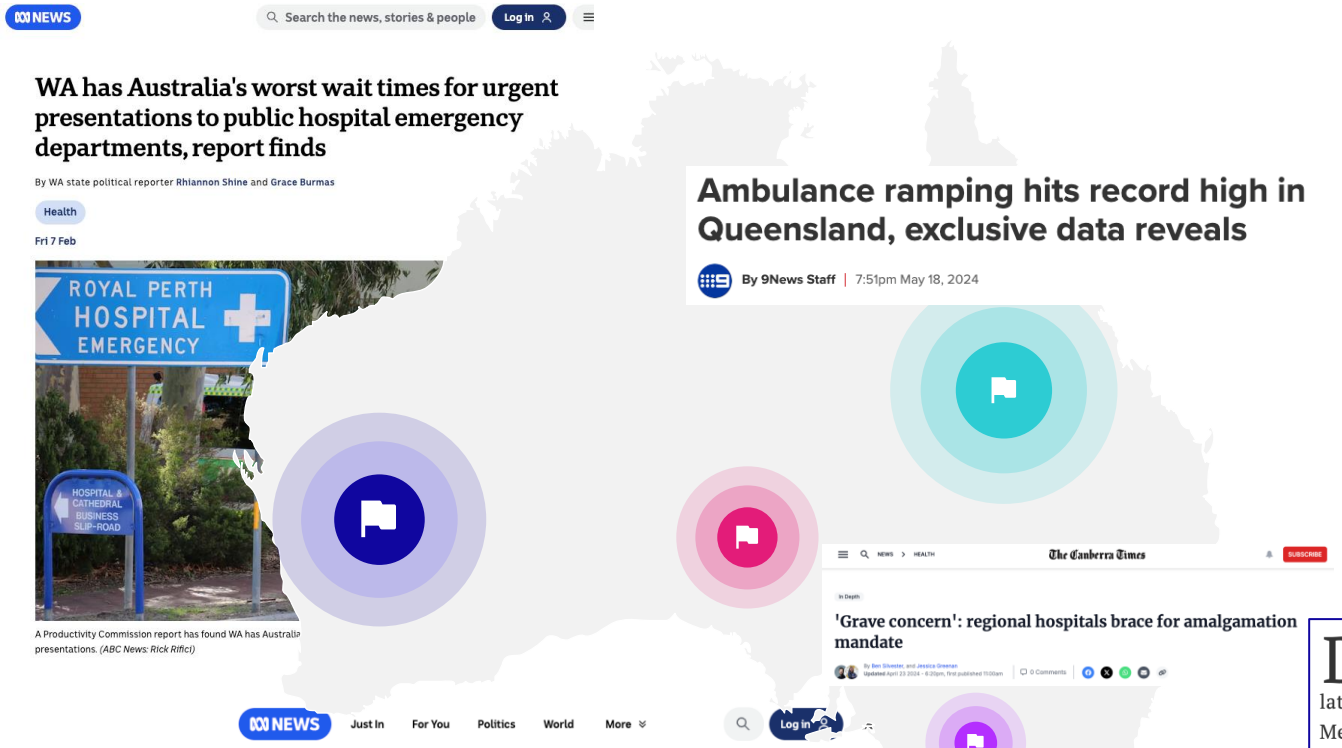
Maximise the value of exiting Health IT investments

Intuitive User Interfaces

Incredible visualisation

The Opportunity in Australia

Significant opportunity in Australia to improve data, health system transparency and enable the future of patient care.



19 FEBRUARY 2025

Interoperability issues span neighbouring LHDs

The session's facilitator, chief digital officer of the ADHA Peter O'Halloran was concerned by the labour required of clinicians and patients to access information.

"I think if consumers knew how fragmented the health system was, they'd be horrified," he said.

"As a technologist, can I say I'm horrified with what we put clinicians and consumers through every day.

Despite some green shoots the road ahead for public hospitals remains "grim" and long, according to the latest Public Hospitals Report Card from the Australian Medical Association.

The report card – available in full here – covers the 2023–24 financial year, the most recent data available.

"We are glad to see some good news in this report card, however, there is no escaping the reality that Australia's public hospitals remain critically logjammed," said AMA federal president Dr Danielle McMullen.

MEDIA RELEASE

'Hospital exit block' costing health system billions

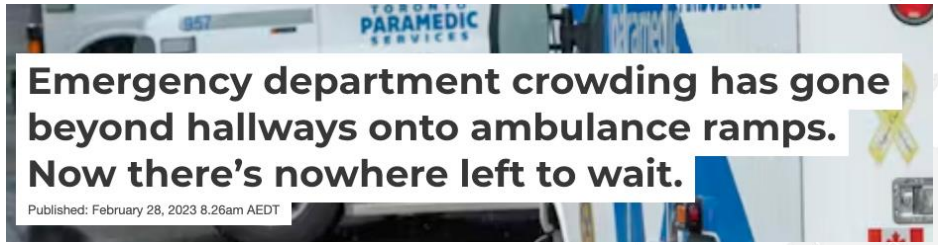
Published 8 February 2023

Opportunities with the NHS

The NHS continues to face digitisation challenges, with older technology plaguing efforts to modernise the health system.

Wednesday 26 February 2025 11:54 am | **Updated:** Wednesday 26 February 2025 6:34 pm

Old tech driving NHS and public sector inefficiencies



NEWS

Labour's 10-year health service plan will open up data sharing

To save the health service, Labour is focusing on bolstering the NHS app and enabling greater sharing of patient records in England

NHS 'bed blocking' crisis laid bare: Up to one in THREE beds are taken up by medically-fit patients with nowhere to go at busiest hospitals

- **An average of 13,662 patients were stuck in hospital every day in February 2024**

One in three NHS doctors so tired their ability to treat patients is affected, survey finds

Exclusive: Medics more sleep deprived now than during Covid crisis amid staff shortages and surging demand

Miya: Solving Problems

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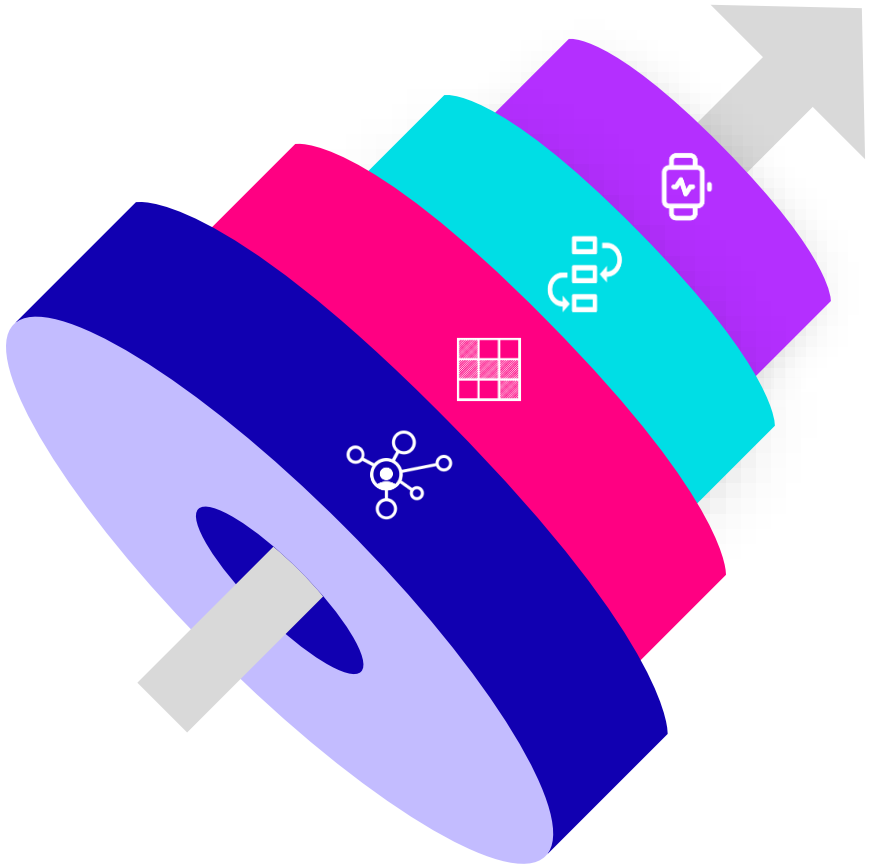


1) Integrating the Care Record

Creating the longitudinal record for every patient, in every setting.

2) Digitising Clinical Workflow

Deploying digital tools to improve efficiency, accuracy, and patient care.

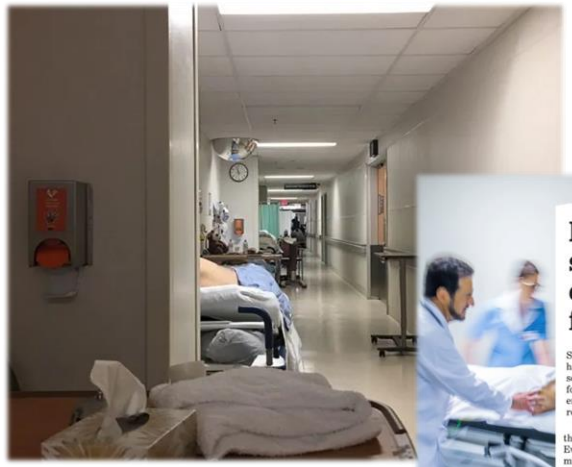
3) Releasing Health System Capacity

Digital solutions to optimise patient journeys, resource allocation and clinical decision-making.

4) Scaling Remote Patient Monitoring

Efficient patient monitoring using automated data collection, analysis, and clinical alerting.

Releasing Health System Capacity



Corridor care is on the rise

Ramping continues to be an issue

Patients stuck in emergency for days

Staff at Sydney's busiest hospital have said a lack of beds is leaving some patients stuck in emergency for days, four years after taxpayers spent $900 million on a major redevelopment.

"All the pressure that generates just blows up. Every day between about 5pm and midnight, the place is just absolutely out of control."

Time spent in major NSW emergency departments (July-September 2024)

Westmead Hospital	**387 mins**
Liverpool Hospital	335 mins
Nepean Hospital	311 mins
John Hunter Hospital	305 mins
Wollongong Hospital	299 mins
Gosford Hospital	277 mins
Royal North Shore	266 mins
Prince of Wales	260 mins
RPA Hospital	248 mins
NSW median	**223 mins**
St Vincent's Sydney	218 mins

Table compares the median time between arriving and leaving the ED at Westmead.

The Sydney Morning Herald

With Miya Precision and Miya Flow:

- We digitise clinical workflows and trigger activity which optimise patient flow
- We deliver real-time system transparency of available resources
- Independent studies show that Miya Precision can reduce length of stay and release system capacity

Hospitals over capacity	Health systems frequently report operating at occupancy levels of ~120%.
Shortage of GPs	Often patients turn to emergency rooms because they lack access to primary care doctors.
Aging population	Many countries are experiencing a demographic shift with a growing elderly population.
Increasing complexity of care	Conditions like diabetes, heart disease, cancer and mental health conditions are becoming more common.
Staff shortages	Insufficient care workers leads to inefficiencies, increasing patient wait times and hospital stays.
Growing Wait Lists	Delayed procedures and check-ups due to increasing wait lists are driving up the frequency of urgent hospital care.
Stranded patients	The are insufficient beds in alternative care facilities for patients who are medically ready to leave.
Constrained investment	Governments are unwilling to expand health system capacity with additional investment.

Scaling Remote Patient Monitoring

ALCIDION

Hospitals over capacity	Hospitals are overwhelmed, making it essential to shift lower-risk cases to home care.
Pressure to reduce cost of care	Home-based care is significantly cheaper than inpatient hospital stays.
Focus on patient outcomes	Studies show that patients recover faster in familiar home environments, reducing stress and hospital-acquired infections.
Chronic Disease Management	More people are living with long-term conditions that can be managed at home.
Patient expectations	As consumer accessible devices mature, patients are demanding care services in their own home.
Scaling the right model	Operators are struggling to scale HITH services whilst ensuring continuity across care delivery models

With Miya Precision and Miya Virtual Care:

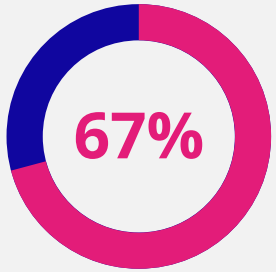
- We extend the common interface clinicians are familiar with in ward settings;
- We enable remote monitoring to occur at scale; with
- Studies showing we deliver ~20% lower cost of care

Ongoing partnership with iHealth

Case Study: Alfred Health – Independent Study on Miya Precision Benefits

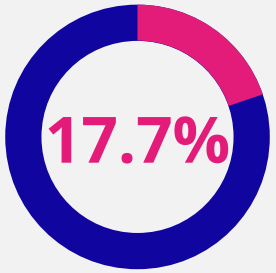
In 2023, Alfred Health introduced electronic patient journey boards (EPJBs) to 38 inpatient wards at The Alfred, Caufield and Sandringham hospitals. As part of the deployment, the Digital Health CRC & Monash University were engaged to conduct a study on the benefits of EPJBs. The study was conducted over 12 months capturing a series of baseline metrics to compare and evaluate impact.

1. Efficiency in bed allocation



Digital bed allocation **decreased call duration by 67%,** highlighting transparency, process simplification, capacity improvements and freeing up resources for additional tasks.

2. Reduction in outliers

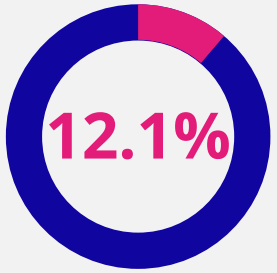


The study identified a **17.7% reduction in the number of outliers** at the point of admission, indicating improved availability of beds and visibility of both incoming patient demand and bed capacity in target wards.

3. Real-time patient information

100% Alignment of Patient Information
FHIR-based two-way real-time integration **eliminated a 25-40% discrepancy** between EMR data and traditional whiteboards, enhancing patient safety and streamlining clinical updates.

4. Reductions in length of stay



During the course of the study, a consistent decline in patient length of stay (LoS) was observed**, decreasing by 12.1%** over an 18-month period from 3.15 days to 2.77 days.

5. Discharge planning improvement

100% of patient records now include an Estimated Date of Discharge (EDD), up from a baseline of 61%. Changes to EDDs require a reason, aiding analysis of discharge forecast accuracy and continuous improvement.

6. Consistency in ways of working

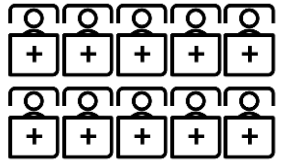
From 30 different ways of working

To 9 variations of EPJB tailored to the clinical workflow (with 80% commonality)

Further information can be found here: https://www.alcidion.com/news/an-independent-study-shows-the-ripple-effect-of-benefits-from-adopting-a-patient-flow-management-solution/

For an 800-bed healthcare system...

ALCIDION

	 Released Nursing Time	 Released Physician Time	 Released Non-clinical Time	 Released Capacity	 Released Operational Cost
How much capacity have we released?	321,235 hours (165 FTEs)	408,220 hours (209 FTEs)	27,397 hours (14 FTEs)	35,375 bed days (97 beds)	3,002,125 documents digitised
What is the estimated value to the system?	$8-12m	$16-20m	$0.8-1.0m	$30-150m	$0.85m

Estimated Value: **$55.6-183.9m**

Estimated value of annual benefits for an 800-bed provider using the full suite of Alcidion modules

More than 1000 trees saved

H1 FY25 – Summary

ALCIDION

$17.6M
H1 FY25 revenue

Down 7% on pcp[1],as expected due to lower product implementation revenue as project work for Leidos Australia nears completion

$18.3M
H1 New TCV[2] sales

Includes both contracted & renewal:

Hume (AUS)
NALHN (AUS)
Peninsula Health (AUS)
Sydney LHD (AUS)
Northumbria (UK)

$61M
FY25 YTD New TCV sales

Highest new TCV signed in Company's history

H1 contracts, plus:
Hywel Dda
North Cumbria

$39.5M
FY25 contracted revenue

Includes Hywel Dda & North Cumbria

Minimum $8M from NCIC, predominantly licence fees

$0.5M
Underlying EBITDA

Material improvement of $3.3M vs. H1 FY24

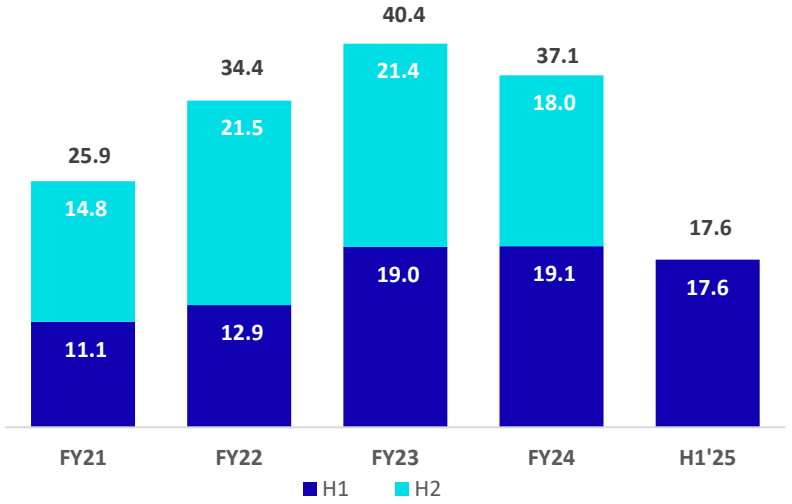
Confident of being EBITDA and cashflow positive in FY25

(ALC does not capitalise any R&D)

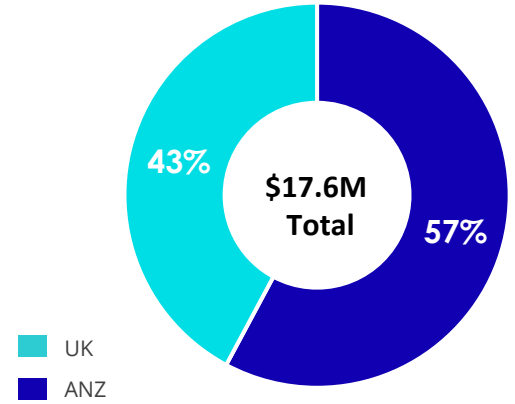
1. Comparisons are to prior corresponding period (1H24)
2. Total Contract Value and includes both contracted and scheduled renewals. Does not include Hywel Dda or North Cumbria.
3. Underlying EBITDA = EBITDA excluding one-off restructure costs and share based payments)

Revenue Dashboard

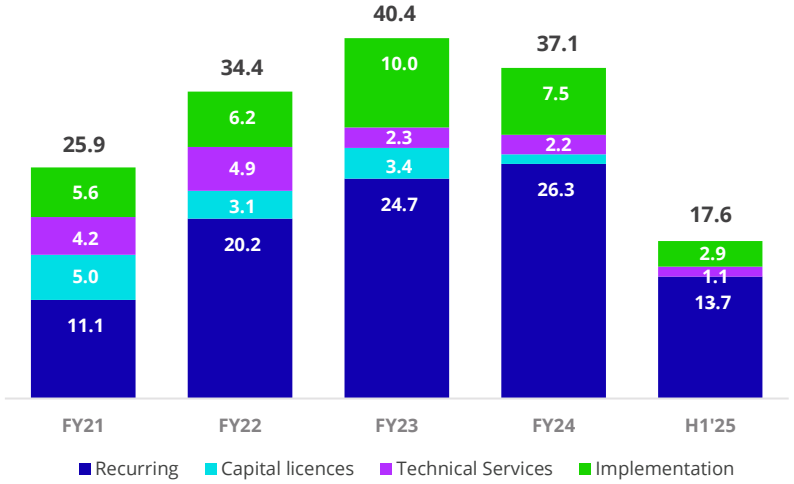
H1 vs H2 Revenue Split ($M)



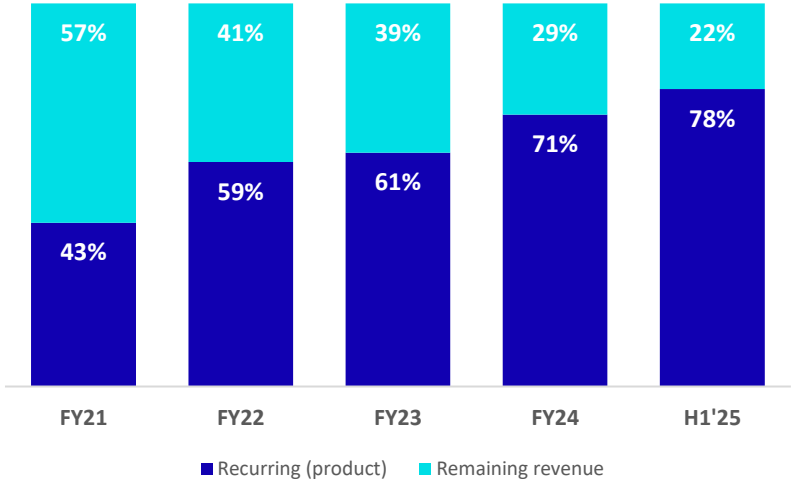
Geographical Split (%)



Revenue Category Breakdown ($M)



Recurring (product) / Total Revenue (%)



Notable Contract Wins & Renewals

New contracts reinforce modular strategy, catering to needs of customers as they enhance their digital maturity

Hume Rural Health Alliance (AUS)

- TCV of $4.0m over 5 years
- Miya Precision deployed as an enterprise digital platform across multiple sites in regional Victoria with a focus on patient flow and virtual care
- Potential for module expansion in future periods

Hywel Dda (Wales)

- TCV of $5.5M over 5 years (with 2-year option to extend, increasing TCV to $7.7m)
- Miya Precision – Patient Flow, Observations & Assessments and Smartpage
- First customer in Wales and won via a competitive tender process

North Adelaide Local Health Network (AUS)

- TCV of $4.5M over 5 years
- Miya Precision deployed across portfolio of the South Australian Department for Health and Wellbeing
- Contract won via a competitive tender process

Peninsula Health (AUS)

- TCV of $3.7m over 5 years
- Miya Precision deployed as an electronic patient flow management solution within all Peninsula Health sites.
- Platform integrated with the existing EMR highlighting Alcidion's ability to integrate with existing solutions

EPR Validation: North Cumbria

Signed contract with North Cumbria Integrated Care NHS Foundation Trust (NCIC) for new EPR platform solution

Contract Signed - Overview

- Selected following a competitive tender process
- Deploy Miya Precision encompassing full suite offering incl. Silverlink PCS
  - NCIC is an existing Alcidion customer utilising Silverlink PCS PAS
- Solution will provide clinicians real-time access to patient records while streamlining patient flow & improving clinical decision-making processes

Key Contract Terms

10 years	Contract duration
A$37.5M	Total Contract Value (TCV)
Q3 FY25	Targeted deployment

Traction in UK EPR Market

- 2nd UK EPR contract following 10 year $23m extension of South Tees contract signed in Dec-23.
  - Optionality for additional modules; if selected would add TCV of $10m+ and thus similar size to NCIC
- NCIC and South Tees provide two good reference points as to the shape and size of various EPR contracts

NCIC - Overview

- Provides care for approx. half a million people in the North of the UK
- Hospital & community care provided across:
  - 2 acute care hospitals
  - 8 community-based hospitals
  - 8 Integrated Care Communities (ICC)

High Value, Long-Term Customers

Alfred Health
Electronic Patient Journey Boards

Western Health
Patient Flow, Command Capability

NT Health
Patient Flow & Command Capability

South Tees NHS Trust
EPR, Flow & Noting

Australian Defence Force
Longitudinal Health Record

Sydney Virtual Hospital
Virtual Care & Remote Patient Monitoring

Bright Path Ahead

FY25 contracted revenue signed to date will result in full year revenue growth (vs. FY24) and positive EBITDA and cashflow

- As of 31 December 2024, minimum FY25 contracted revenue of $39.5M
- Confident of delivering a positive EBITDA and cashflow result for the full year FY25
- Strong momentum building for our solutions across existing markets
- Alcidion able to demonstrate referenceabilty across our core products in all our key markets; important role in the selection criteria
- Long, stable engagements with negligible churn
- Option for new geographies
- Cash balance of $7.7M and no debt at 31 December 2024, heading into H2 which is a strong period for cash collections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