

Changing lives with every breath

Investor Presentation Q3 2015 June 10, 2015

FORWARD LOOKING STATEMENTS

Statements contained in this presentation that are not historical facts are "forwardlooking" statements as contemplated by the Private Securities Litigation Reform Act of 1995. These forward-looking statements -- including statements regarding ResMed's projections of future revenue or earnings, expenses, new product development, new product launches and new markets for its products -- are subject to risks and uncertainties, which could cause actual results to materially differ from those projected or implied in the forward-looking statements. Additional risks and uncertainties are discussed in ResMed's periodic reports on file with the U.S. Securities & Exchange Commission. ResMed does not undertake to update its forward-looking statements.





WHO WE ARE







> Overview

Leading global developer, manufacturer and marketer of medical solutions to treat and manage sleep-disordered breathing, chronic obstructive pulmonary disease and other chronic respiratory conditions.

- Operate in more than 100 countries directly and with distribution partners
- Integrated global manufacturing operations:
 - Australia, France, Singapore, and USA
- Invest ~7% of revenue in R&D
- More than 5,000 patents and designs
- FY 2014 annual revenue > US\$1.5 billion
- Over 4,000 employees world-wide
- Listed: New York Stock Exchange (NYSE) and in Australia (ASX)





Holy Grail: *Improve outcomes & reduce healthcare costs*

- Improve quality-of-life for patients
- Prevent chronic disease progression
- Reduce costs of managing chronic disease



Opportunity to shift care from hospital to home



Source: OECD report (2011) - WHY IS HEALTH SPENDING IN THE UNITED STATES SO HIGH? www.oecd.org



We can reduce costs of key chronic diseases

Annual costs per chronic condition



MMWR, Vol 60, 2011

\$403

billion

CDC National Asthma Control Program CDC, National Diabetes Fact Sheet, 2011 Eric A. Finkelstein, et al, Health Affairs 28, no. 5 (2009): w822-w831 McKinsey & Company analysis Harvard Medical School, 2010













> Why invest

Strong Portfolio

- Broad range of products & solutions
 - Wireless, cloudconnected devices
 - End-to-end patient management solutions
 - Consumer sleep wellness offerings
- Over 100 countries



Strong Performance

- Solid revenue growth track-record
- Operational excellence is part of our DNA
- Strong cash flow
- Active capital management - share repurchase, dividends



Growth Drivers

- Underpenetrated global SDB market
- New adjacent markets in COPD, CAD & AF
- Emerging markets in China, India and Brazil
- Product and service innovation





Q3 2015 Results

Key Financial Metrics	Q3 2015
Revenue	\$422M +6% (13% CC)
Gross margin	59.5%
GAAP net income	\$91M +1%
Non-GAAP EPS	\$0.65 +2%
GAAP EPS	\$0.64 +2%
Operating profit	\$106M
Cash flow from operations	\$91M
Free cash flow	\$80M

ResMed

Diversified revenue sources by region & product





Strong financial performance

(USD in Billions, except EPS)





O Robust capital management

Capital Deployment



YTD 2015 combined dividend and stock repurchase = 92% of free cash flow

Increasing Dividend

- YTD 2015 Dividend payout ratio of 44% of net income
- 2015 dividend per share increased 11% over prior year

Investment for Growth

- New products
- Geographic expansion
- Acquisitions

Combined dividend and buy-back over rolling 5 years = 98% of free cash flow













ResMed's Three Horizon Growth Strategy

\uparrow Changing lives with every breath

20 million lives changed by 2020

Improve patient quality of life Prevent chronic disease progression Reduce healthcare system costs

Patient Growth

Horizon 2

Scale-Up Respiratory Care and Grow in Emerging Markets

- Adjacent growth in COPD, OHS, NMD, including ALS
- Emerging markets growth in China, India and Brazil

Horizon 3 Accelerate and Expand into New Markets

- Respiratory monitoring solutions for HF & COPD
- Cardiology
 - Coronary Artery Disease
 - Atrial Fibrillation

Horizon 1 Lead SDB Industry

 Ground breaking end-toend solutions



Time

Air Solutions: Smaller, Quieter, More Comfortable... and More Connected





Proven HI Solutions builds competitive advantage

Analytics

Statistics

Compliance

130%

105%

75% 60%

30%

The ability to predict outcomes, communicate insights and act on data effectively and efficiently keeps ResMed in a leadership position.

50 mm



U-Sleep – Better Efficiency, Better Outcomes



Multiple Points of Value

- Improve Workflow Efficiency
- Improve Patient Outcomes
- Add Analytical Insight

Clinically-Proven* Efficiencies

Proven ability to maintain positive patient outcomes with significant reductions in labor

Results	SOC Group	U-Sleep Group	
AHI	2.8 ± 3.8	3.0 ± 4.1	
Medicare Adherence	73%	83%	
Mean Hours of CPAP Usage	4.7 ± 2.1	5.1 ± 1.9	
Epworth Sleepiness Score	5.1	5.8	
Mean Minutes of Coaching	58.3 ± 25	23.9 ± 26	
	59% reduction		



* Source: ATS Abstract A6570 San Diego May 2014

AirFit range – World-leading Patient Interfaces



We continue to build sleep apnea awareness



WSJ









facebook

"Ignorance is our major competitor"

- "Better Sleep for Women" education
 and product focused campaign
- **S+ by ResMed** consumer sleep management solution available online and retail; connected to Apple HealthKit







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Horizon 3 Accelerate and Expand

Accelerate and Expand into New Markets

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>> Horizon 2: Huge potential to improve outcomes in COPD

- Mortality risk reduced by over 60% on a relative basis when using long-term non-invasive ventilation (NIV) treatment in chronic obstructive pulmonary disease (COPD)
- One-year mortality in the two matched COPD cohorts was:
 - -12% mortality (NIV therapy)
 - -33% mortality (no intervention)
- 80 Million COPD patients worldwide
 - –NIV underpenetrated as treatment for COPD
 - -Significant upside: Europe, US, China, Brazil

References: Köhnlein et al. Lancet Respir Med 2014



ResMed

Our new respiratory care platform: *Astral*

ResMed introduces the Astral life support ventilator globally:



reddot design award

* The AstralTM platform is water resistant, but is not waterproof. Please consult the users' manual for further information.

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> Horizon 2: Full spectrum of ventilation products





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 Ground breaking end-toend solutions

Time

Sleep apnea: *Highly prevalent in key diseases*



References: Logan et al. J. Hypertension; O'Keefe and Patterson, Obes Surgery; Oldenburg et al., Eur J Heart Failure; Einhorn et al. Endocrine Prac; Basseti et al. Stroke



26

• SERVE-HF Headline Result:

-Neutral with no signal in the primary endpoint: all-cause mortality and HF hospitalization

• SERVE-HF Safety Signal:

- Adaptive servo-ventilation (ASV) in patients
 - with symptomatic chronic heart failure with

reduced ejection fraction and predominant central sleep apnea

• Key Points:

- The use of positive airway pressure in other clinical indications is not associated with increased cardiovascular risk
- -We will present detailed clinical data on SERVE-HF at medical conferences this calendar year, and we will publish detailed data in peer-reviewed journals.



Dose-response relationship between SDB and cardiovascular outcome







into the ACC/AHA heart failure guidelines in class 1A and as standard of care treatment

• Goal: Incorporate ASV therapy • Status: Enrollment underway as preparation for future clinical study focused on HFpEF.

Note: Further trial details can be obtained from http://clinicaltrials.gov/; CAT-HF: NCT01953874



> Horizon 3: Atrial Fibrillation (AF)

JACC: CLINICAL ELECTROPHYSIOLOGY © 2015 BY THE AMERICAN COLLEGE OF CARDIOLOGY FOUNDATION PUBLISHED BY ELSEVIER INC. VOL. 1, NO. 1-2, 2015 ISSN 2405-500X/\$36.00 http://dx.doi.org/10.1016/j.jacep.2015.02.014

Effect of Obstructive Sleep Apnea Treatment on Atrial Fibrillation Recurrence

A Meta-Analysis

Ashish Shukla, MD, MPH, Anthony Aizer, MD, MSc, Douglas Holmes, MD, Steven Fowler, MD, David S. Park, MD, PhD, Scott Bernstein, MD, Neil Bernstein, MD, Larry Chinitz, MD

ABSTRACT

OBJECTIVES This study aimed to evaluate the cumulative effect of treatment of obstructive sleep apnea (OSA) with continuous positive airway pressure (CPAP) on atrial fibrillation (AF) recurrence.



- Conclusion of study in JACC:
 - -CPAP use associated with reduced AF recurrence
 - Reduced AF recurrence seen in two key groups
 - · Patients who underwent catheter ablation
 - Patients who underwent non-ablation medical mgmt.
 - -Data included 7 studies with n=1,087 patients





Horizon 3: Coronary Artery Disease (CAD)

Impact of CPAP Treatment on Cardiovascular Outcomes in Coronary Artery Disease and Obstructive Sleep Apnea: The RICCADSA trial

Yüksel Peker^{1,2}, MD, PhD, Prof; Helena Glantz^{1,3}, MD; Christine zu Eulenburg⁴, PhD; Karl Wegscheider⁴, PhD, Prof; Johan Herlitz⁵, MD, PhD, Prof; Erik Thunström^{1,6}, MD ¹Dept. of Molecular and Clinical Medicine/Cardiology, Sahlgrenska Academy, University of Gotthenburg, Sweden; ²Dept. of Molecular and Clinical Medicine, Skaraborg Hospital, Lidköping, Sweden; ⁴Dept. of Medical Biometry and Epidemiology, University Medical Center, Hamburg-Eppendorf, Germany; ⁵Center of Prehospital Care of Western Sweden, University College of Borås and Sahlgrenska University Hospital/Sahlgrenska, Gothenburg, Sweden; ⁵Dept. of Cardiology, Sahlgrenska University Hospital/Sahlgrenska, Gothenburg, Sweden;

- Conclusion of data from ATS
 - Results suggest CPAP reduces risk for adverse cardiovascular outcomes in revascularized patients with CAD and non-sleepy OSA
 - -CPAP usage of at least 4 hours per night is crucial to achieve this risk reduction





Output Changing lives with every breath

In the last 12 months, we changed more than 8 million lives, literally keeping patients breathing... and we are just getting started.





Our aspiration is to change 20 million lives by 2020



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