Strategy, Rejuvenation, and Transformation

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6. increased government pricing pressures;
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Managing COVID-19 / SARS-CoV-2: Roche’s contribution

We are passionate about innovation

Focusing on 4 key areas

Summary
Roche COVID-19 pandemic response

Ramping up SARS-CoV2 testing

- EUA for the cobas SARS-CoV2 PCR test, developed in a record time of 6 weeks
- Continuously increasing production capacity
- 850 high throughput systems installed globally

- Elecsys Anti-SARS-CoV2 serology test for detection of total antibodies (IgA, IgM, IgG) launched in May
- Ramp up to >100 million tests per month by June
- Global cobas e¹ installed base of >40,000

EUA = emergency use authorization; 1 cobas e: cobas e 801, cobas e 602, cobas e 601, cobas e 411; 2 300 tests per hour is the throughput rate for cobas e 801
Roche COVID-19 response
Placebo controlled Actemra trial initiated

Actemra: Ph III (COVACTA) in hospitalized patients with severe COVID-19 pneumonia

- First-in-class IL-6 receptor antagonist
- Approved in >110 countries
- Initially approved in RA and GCA
- Approved for CAR T-cell-induced cytokine release syndrome (CRS)

Preparing for increased global Actemra supply

- Ph III placebo controlled trial with BARDA started beginning of April
- IV Dose: 8 mg/kg (max 800 mg) + standard of care; if clinical signs do not improve one additional dose can be given, endpoints include clinical status, mortality, mechanical ventilation and intensive care unit variables
- Patients followed for 28 days; read-out expected in early summer

RA=rheumatoid arthritis; GCA=giant cell arteritis; BARDA=Biomedical Advanced Research and Development Authority

News: Tocilizumab improves significantly clinical outcomes of patients with moderate or severe COVID-19 pneumonia
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Summary
Roche business update in light of COVID-19
2020 outlook confirmed

Pharmaceuticals:
- New product sales overcompensate for entry of biosimilars (Q1: +7%)
- Launch of NMEs, pivotal readouts and pivotal trial starts largely on track
- Ph III Actemra readout in severe COVID-19 pneumonia expected in June

Watch-outs:
- Chronic diseases: Patients delaying appointments (Ocrevus, Lucentis)
- Potential trial delays for new patients starts (especially outside oncology)

Diagnostics:
- Portfolio shifts from routine testing to COVID-19 testing (Q1: +5%)
- Ramping up SARS-CoV-2 test manufacturing capacity (PCR and antibody)
New products with strong momentum

Q1 values in reported CHFm, variances in CERm;  
1 Erivedge, Perjeta, Kadcyla, Gazyva, Esbriet, Cotellic, Alecensa, Tecentriq, Ocrevus, Hemlibra, Xofluza, Polivy & Rozlytrek; 
2 MabThera & Herceptin in Europe and MabThera, Herceptin & Avastin in Japan; 
3 Herceptin, Avastin & MabThera in US
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Summary
4 Priorities to maintain leadership position

**Cultural transformation**
- Improve structure, processes, behaviour & competitive fitness

**New medicines & technology platforms**
- Improve on current standard of care & smart ways of development
  - 2018: 47% biological, 21% small molecule, 32% combination
  - 2023: 59% biological, 24% small molecule, 17% combination

**Growing installed base & expanding menu**
- Expansion with additional solutions and entering new disciplines

**Leading personalized healthcare revolution**
- Lead in digitalization & transform value chain
4 Priorities to maintain leadership position

- Cultural transformation
  - Improve structure, processes, behaviour & competitive fitness
- New medicines & technology platforms
  - Improve on current standard of care & smart ways of development
- Growing installed base & expanding menu
  - Expansion with additional solutions and entering new disciplines
- Leading personalized healthcare revolution
  - Lead in digitalization & transform value chain
Our cultural transformation: Simplify processes and empower our people to enhance productivity in service of patients

Some of our guiding principles:

- From silos, functional and top down focus to small empowered teams with accountability for results
- From internal / org chart orientation to patient and external focus
- From leadership as command & control to setting a vision, architecting the system, coaching and catalysing change
4 Priorities to maintain leadership position

- **Cultural transformation**
  - Improve structure, processes, behaviour & competitive fitness

- **New medicines & technology platforms**
  - Improve on current standard of care & smart ways of development
  - 2018: 47%, 2023: 59%
  - New products launched after 2012, Other products, Hemopan + Itxoxan + Avastin

- **Growing installed base & expanding menu**
  - Expansion with additional solutions and entering new disciplines

- **Leading personalized healthcare revolution**
  - Lead in digitalization & transform value chain
New medicines: Replace and extend the business

<table>
<thead>
<tr>
<th>Replace/extend existing businesses</th>
<th>Entering new franchises</th>
<th>Sales mix (100%) (Conceptual)</th>
</tr>
</thead>
<tbody>
<tr>
<td>MabThera/Rituxan</td>
<td>Gazyva, Venclexta, Polivy, mosunetuzumab, CD20 x CD3, idasanutlin</td>
<td>Oncology: Tecentriq (mUC, HCC, melanoma)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>MS: Ocrevus</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hemophilia A: Hemlibra</td>
</tr>
<tr>
<td>Herceptin</td>
<td>Perjeta, Kadcyla, Perjeta+Herceptin FDC-SC</td>
<td>CNS: satralizumab (NMOSD), risdiplam (SMA), Huntington’s, Autism, Alzheimer’s</td>
</tr>
<tr>
<td>Avastin</td>
<td>Tecentriq, Alecensa, Rozlytrek, ipatasertib</td>
<td>Immunology: etrolizumab (UC, CD), Gazyva (lupus nephritis)</td>
</tr>
<tr>
<td>Lucentis</td>
<td>faricimab Port delivery system (PDS)</td>
<td></td>
</tr>
<tr>
<td>Tamiflu</td>
<td>Xofluza</td>
<td></td>
</tr>
</tbody>
</table>

FDC=fixed dose combination; mUC=metastatic urothelial carcinoma; HCC=hepatocellular carcinoma; NMOSD=neuromyelitis optica spectrum disorder; SMA=spinal muscular atrophy; UC=ulcerative colitis; CD=Crohn’s disease

2018
- Oncology: 47%
- MS: 21%
- Hemophilia A: 14%
- CNS: 20%
- Immunology: 32%

2023
- New products launched after 2012: 14%
- Other products: 24%
- Herceptin + Rituxan + Avastin: 62%
Establishing Tecentriq as Standard of Care in major tumour types

1. **Checkpoint Inhibitors Monotherapy**
   - Tecentriq in NSCLC: Impower110

2. **Combine with Existing Medications**
   - Tecentriq + chemo/ targeted therapies in SCLC, TNBC, ovarian, HCC, bladder, etc.

3. **Expand to novel CITs**
   - Immune doublets: Tecentriq + Bi-specifics, aTIGIT, etc.

4. **Personalized CIT, RNAseq, etc.**
   - Combos/ NMEs: defined immune profiles

**Opportunity/ Cure Rate**

**Wave 1**
- First wave: Tecentriq in NSCLC: Impower110

**Wave 2**
- Second wave: Tecentriq + Avastin in HCC
  - Medically meaningful improvement

**Wave 3**
- Third wave: Tecentriq and aTIGIT in various cancer types entering Ph III in Q1 20

**Wave 4**
- Fourth wave: Tecentriq in various cancer types entering Ph III in Q1 20

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NSCLC=non-small cell lung cancer; SCLC=small cell lung cancer; TNBC=triple-negative breast cancer; HCC=hepatocellular carcinoma
Risdiplam in spinal muscular atrophy (SMA)
Compelling benefit/risk profile in infants, children, teenagers, and adults

Over 450 patients treated with risdiplam to date

- Durably increases SMN protein throughout the CNS and in peripheral tissues
- Positive efficacy in Type 1 infants (n=62 total)
- Positive efficacy in large (n=180) placebo-controlled study in a broad spectrum of Type 2/3 patients
- Consistent safety profile across trials
- No treatment-related safety findings have led to withdrawal in any study

Potential to be the treatment of choice for a majority of patients living with SMA

Risdiplam program is a collaboration with PTC Therapeutics and the SMA Foundation
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- Expansion with additional solutions and entering new disciplines

Leading personalized healthcare revolution
- Lead in digitalization & transform value chain
Growing installed base worldwide driving reagents consumption

Integrated Core Lab
- cobas 6000/8000: +11%
- cobas 6800/8800: +36%
- cobas 4000: +9%

Middleware
- +21%

Preanalytics
- +21%

Connectivity
- +17%

Growth rates being from the period of January 1, 2019 to December 31, 2019
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**Leading personalized healthcare revolution**
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Building the PHC ecosystem

Using data & insights to improve patient outcomes

**Access to comprehensive genomic profiling (CGP)**
- early, personalized diagnosis

**Molecular tumor board (MTB) / clinical decision support (CDS)**
- personalized care plan

**Access to molecularly guided treatment options**
- rapid therapy access and innovative access models

**Capturing clinical outcomes**
- Leveraging RWD for regulatory filings, publications, policy change, innovative access models

More patients on optimal therapy & creation of ‘learning healthcare system’

**PHC**=personalized healthcare; **RWD**=real world data
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Summary
## Strong short term news flow

**Diversifying late stage pipeline & setting new standards of care**

<table>
<thead>
<tr>
<th>Product</th>
<th>Timing</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>risdiplam in SMA</td>
<td>Filed for type 1/2/3</td>
<td>~18k (rare disease)</td>
</tr>
<tr>
<td>satralizumab in NMOSD</td>
<td>Filed</td>
<td>~21k (rare disease)</td>
</tr>
<tr>
<td>HTT-ASO in Huntington’s</td>
<td>Ph II &amp; III ongoing; Trial fully recruited</td>
<td>~83k (rare disease)</td>
</tr>
<tr>
<td>Gazyva in lupus nephritis</td>
<td>initiating Ph III</td>
<td>~190k</td>
</tr>
<tr>
<td>etrolizumab in UC and Crohn’s Disease</td>
<td>filing in UC in 2020</td>
<td>UC ~700k CD ~640k</td>
</tr>
<tr>
<td>PDS in nAMD</td>
<td>fully recruited; filing in 2020</td>
<td>nAMD ~4,090k DME ~4,400k</td>
</tr>
<tr>
<td>faricimab in DME/nAMD</td>
<td>recruitment ahead of plan; filing in 2021/22</td>
<td></td>
</tr>
</tbody>
</table>

### Product Timing Population

<table>
<thead>
<tr>
<th>Product</th>
<th>Filing date</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tecentriq in 1L HCC</td>
<td>2019</td>
<td>~300k¹ ✔</td>
</tr>
<tr>
<td>Tecentriq in neoadj TNBC</td>
<td>2020</td>
<td>~19k</td>
</tr>
<tr>
<td>Tecentriq in adj bladder cancer</td>
<td>2020</td>
<td>~50k</td>
</tr>
<tr>
<td>Tecentriq in 1L melanoma</td>
<td>2020</td>
<td>~11k (Dx+) ✔</td>
</tr>
<tr>
<td>Tecentriq in FL ovarian cancer</td>
<td>2020</td>
<td>~41k</td>
</tr>
<tr>
<td>idasanutlin in R/R AML</td>
<td>2020</td>
<td>~22k</td>
</tr>
<tr>
<td>Perjeta + Herceptin FDC-SC</td>
<td>2020</td>
<td>~75k</td>
</tr>
<tr>
<td>ipatasertib 1/2L TNBC</td>
<td>2020</td>
<td>~11k (Dx+) ✔</td>
</tr>
<tr>
<td>ipatasertib 1L+ HR+ (chemo treated only)</td>
<td>2020</td>
<td>~83k (Dx+) ~15k (Dx+/chemo only)</td>
</tr>
<tr>
<td>ipatasertib in 1L mCRPC</td>
<td>2020</td>
<td>~200k (AC) 100k (Dx+)</td>
</tr>
<tr>
<td>Polivy in 1L DLBCL</td>
<td>2020/21</td>
<td>~52k</td>
</tr>
<tr>
<td>Tecentriq in (neo)adj NSCLC</td>
<td>2021/22</td>
<td>~75k</td>
</tr>
</tbody>
</table>

### Data Sources

Roche/Genentech, incidence/prevalence in the major markets (US, FR, DE, IT, ES, GB); ¹ including China; SOC=standard of care; SMA=spinal muscular atrophy; NMOSD=neuromyelitis optica spectrum disorder; UC=ulcerative colitis; CD=Crohn’s disease; nAMD=neovascular age-related macular degeneration; DME=diabetic macular edema; HCC=hepatocellular carcinoma; TNBC=triple-negative breast cancer; FL=front line; R/R AML=relapsed/refractory acute myeloid leukemia; FDC=fixed dose combination; HR=hormone receptor; mCRPC=metastatic castration resistant prostate cancer; DLBCL=diffuse large B-cell lymphoma; NSCLC=non-small cell lung cancer; AC=all comers.

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**Oncology**

**Neuroscience**

**Ophthalmology**

**Immunology**

✔ Filing completed or positive pivotal data
2020 outlook confirmed
Further growing top and bottom line

Group sales growth\(^1\)
- Low- to mid-single digit

Core EPS growth\(^1\)
- Broadly in line with sales growth

Dividend outlook
- Further increase dividend in Swiss francs

\(^1\) At Constant Exchange Rates (CER); based on the current assessment of the COVID-19 impact
Doing now what patients need next