UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

Form 8-K

Current Report
Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): February 25, 2025

AXOGEN, INC.

(Exact Name of Registrant as Specified in Charter)

Minnesota	**001-36046**	**41-1301878**
(State or Other Jurisdiction of Incorporation or Organization)	(Commission File Number)	(I.R.S. Employer Identification No.)

13631 Progress Boulevard, Suite 400 Alachua, Florida	**32615**
(Address of principal executive offices)	(Zip Code)

(386) 462-6800
(Registrant's telephone number, including area code)

N/A
(Former Name or Former Address, if Changed Since Last Report)

Check the appropriate box if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- ☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- ☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- ☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- ☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e- 4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of exchange on which registered
Common Stock, $0.01 par value	AXGN	The Nasdaq Stock Market

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company ☐

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 2.02 Results of Operations and Financial Condition

On February 25, 2025, Axogen, Inc. (the "Company") issued a press release announcing its fourth quarter and full year 2024 financial results. A copy of the press release is furnished as Exhibit 99.1.

The information furnished pursuant to Item 2.02 of this Current Report on Form 8-K, including Exhibit 99.1 hereto, shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), or otherwise subject to the liability of such section, nor shall it be incorporated by reference into any future filings by the Company under the Securities Act of 1933, as amended (the "Securities Act"), or under the Exchange Act, unless the Company expressly sets forth in such future filing that such information is to be considered "filed" or incorporated by reference therein.

Item 7.01 Regulation FD Disclosure

On February 25, 2025, the Company also posted an updated corporate presentation to its website at https://ir.axogeninc.com/news-events. The Company may use the corporate presentation from time to time in conversation with analysts, investors, and others. A copy of the corporate presentation is furnished as Exhibit 99.2.

The information in this Item 7.01, including Exhibit 99.2, is being furnished and shall not be deemed to be "filed" for purposes of Section 18 of the Exchange Act or otherwise subject to the liabilities of that section and shall not be deemed incorporated by reference into any filing under the Securities Act or Exchange Act, except as shall be expressly set forth by specific reference in such filing.

Item 9.01. Financial Statements and Exhibits

(d) Exhibits

Exhibit No.	Description
99.1	Axogen, Inc. Press Release, dated February 25, 2025
99.2	Axogen, Inc. Corporate Presentation, dated February 25, 2025
104	Cover Page Interactive Data File (embedded within the Inline XBRL document)

SIGNATURES

Pursuant to the requirements of the Exchange Act, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

AXOGEN, INC.

Dated: February 25, 2025

By: /s/ Marc Began

Marc Began

Executive Vice President, General Counsel and Chief Compliance Officer

Axogen, Inc Reports 2024 Fourth Quarter and Full-Year Financial Results

ALACHUA and TAMPA, FL – February 25, 2025 – Axogen, Inc. (NASDAQ: AXGN), a global leader in developing and marketing innovative surgical solutions for peripheral nerve injuries, today reported financial results and business highlights for the fourth quarter and full-year ended December 31, 2024.

Fourth Quarter 2024 Financial Results and Business Highlights

- Fourth quarter revenue was $49.4 million, a 15.1% increase compared to the fourth quarter of 2023.
- Gross margin was 76.1% for the fourth quarter compared to 74.6% for the fourth quarter of 2023.
- Net income for the quarter was $0.4 million, or $0.01 per share, compared to net loss of $3.9 million, or $0.09 per share for the fourth quarter of 2023, on a fully diluted basis.
- Adjusted net income for the quarter was $3.5 million, or $0.07 per share, compared to adjusted net loss of $2.6 million, or $0.06 per share for the fourth quarter of 2023, on a fully diluted basis.
- Adjusted EBITDA was $6.7 million for the quarter, compared to adjusted EBITDA of $0.6 million for the fourth quarter of 2023.
- The balance of all cash and cash equivalents, restricted cash, and investments on December 31, 2024 was $39.5 million, as compared to a balance of $30.5 million on September 30, 2024.

“We are pleased with our fourth quarter and full year 2024 results. Our performance in 2024 was broad based across our entire portfolio and reflected continuous improvements in execution across all parts of our business,” commented Michael Dale, CEO and Director of Axogen, Inc. “Building on 2024, we are excited about expanding our important work to restore health and improve quality of life by making restoration of peripheral nerve function an expected standard of care in the future. We believe the priorities and workstreams we have established for the business over the next several years will advance fulfillment of Axogen’s business purpose and look forward to sharing our plan in detail during our March 4th Investor Day event," added Michael Dale, CEO and Director of Axogen, Inc.

Full-Year Financial Results and Business Highlights

- Full-year 2024 revenue was $187.3 million, a 17.8% increase compared to 2023 revenue of $159.0 million.
- Gross margin was 75.8% for the full-year, compared to 76.6% in 2023.
- Net loss for the year was $10.0 million, or $0.23 per share, compared to net loss of $21.7 million, or $0.51 per share in 2023.

- Adjusted net income was $5.9 million for the full-year, or $0.13 per share, compared to an adjusted net loss of $7.3 million for the full-year, or $0.17 per share in 2023.
- Adjusted EBITDA was $19.8 million for the full-year, compared to an adjusted EBITDA loss of $1.1 million for 2023.

Summary of Operational and Business Highlights

- 2024 revenue growth was broad based across our portfolio and markets driven by improved commercial execution of our growth strategy focused on driving adoption in high potential accounts and new products.
- The U.S. Food and Drug Administration (“FDA”) accepted the filing of the Company’s Biologics License Application (“BLA”) for Avance® Nerve Graft on November 1, 2024, and assigned a Prescription Drug User Fee Act (“PDUFA”) goal date of September 5, 2025. The Company continues to work through the process with the FDA and anticipates approval in September 2025.
- The Company will be holding an Investor Day on March 4, 2025, to present and discuss its 2025 - 2028 strategic plan objectives and supporting strategies. At this event, management will share in detail their market insights and assumptions, market development plans and future research and development objectives it believes will be required for standard of care status and sustainable leadership.

2025 Financial Guidance

We expect revenue growth to be in the range of 15% to 17%. In addition, we anticipate gross margin to be in the range of 73% - 75%. This includes one-time costs, mainly related to the anticipated BLA approval, impacting gross margin by approximately 1%. Additionally, we expect to be net cash flow positive for the full year.

Conference Call

The Company will host a conference call and webcast for the investment community today at 8:00 a.m. ET. Investors interested in participating in the conference call by phone may do so by dialing toll free at (877) 407-0993 or use the direct dial-in number at (201) 689-8795. Those interested in listening to the conference call live via the Internet may do so by visiting the Investors page of the Company's website at www.axogeninc.com and clicking on the webcast link.

Following the conference call, a replay will be available in the Investors section of the Company's website at www.axogeninc.com under Investors.

About Axogen

Axogen (AXGN) is the leading Company focused specifically on the science, development, and commercialization of technologies for peripheral nerve regeneration and repair. Axogen employees are passionate about helping to restore peripheral nerve function and quality of life to patients with physical damage or transection to peripheral nerves by providing innovative, clinically proven, and economically effective repair solutions for surgeons and health care providers. Peripheral nerves provide the pathways for both motor and sensory signals throughout the body. Every day, people suffer traumatic injuries or undergo surgical procedures that impact the function of their peripheral nerves. Physical damage to a peripheral nerve, or the inability to properly reconnect peripheral nerves, can result in the loss of muscle or organ function, the loss of sensory feeling, or the initiation of pain.

Axogen's platform for peripheral nerve repair features a comprehensive portfolio of products that are used across two primary application categories: scheduled, non-trauma procedures and emergent trauma procedures. Scheduled procedures are generally characterized as those where a patient is seeking relief from conditions caused by a nerve defect or surgical procedure. These procedures include providing sensation for women seeking breast reconstruction following a mastectomy, nerve reconstruction following the surgical removal of painful neuromas, oral and maxillofacial procedures, and nerve decompression. Emergent procedures are generally characterized as procedures resulting from injuries that initially present in an ER. These procedures are typically referred to and completed by a specialist either immediately or within a few days following the initial injury.

Axogen’s product portfolio includes Avance® Nerve Graft, a biologically active off-the-shelf processed human nerve allograft for bridging severed peripheral nerves without the comorbidities associated with a second surgical site; Axoguard Nerve Connector®, a porcine submucosa ECM coaptation aid for tensionless repair of severed peripheral nerves; Axoguard Nerve Protector®, a porcine submucosa ECM product used to wrap and protect damaged peripheral nerves and reinforce the nerve reconstruction while preventing soft tissue attachments; Axoguard HA+ Nerve Protector™, a porcine submucosa ECM base layer coated with a proprietary hyaluronate-alginate gel, a next-generation technology designed to provide short- and long-term protection for peripheral nerve injuries; Avive+ Soft Tissue Matrix™, a multi-layer amniotic membrane allograft used to protect and separate tissues in the surgical bed during the critical phase of tissue repair; and Axoguard Nerve Cap®, a porcine submucosa ECM product used to protect a peripheral nerve end and separate the nerve from the surrounding environment to reduce the development of symptomatic or painful neuroma. The Axogen portfolio of products is available in the United States, Canada, Germany, the United Kingdom, Spain, South Korea, and several other countries.

Cautionary Statements Concerning Forward-Looking Statements

This press release contains “forward-looking” statements as defined in the Private Securities Litigation Reform Act of 1995. These statements are based on management's current expectations or predictions of future conditions, events, or results based on various assumptions and management's estimates of trends and economic factors in the markets in which we are active, as well as our business plans. Words such as “expects,” “anticipates,” “intends,” “plan(s),” “believes,” “seeks,” “estimates,” “projects,” “forecasts,” “continue,” “may,” “should,” “will,” “goals,” and variations of such words and similar expressions are intended to identify such forward-looking statements. Forward-looking statements include, but are not limited to, statements regarding our strategic plan, market development objectives, research and development objectives, and our expectation of BLA approval in September 2025, as well as statements under the subheading " Financial Guidance." Actual results or events could differ materially from those described in any forward-looking statements as a result of various factors, including, without limitation, potential disruptions caused by leadership transitions, global supply chain issues, record inflation, hospital staffing issues, product development, product potential, expected clinical enrollment timing and outcomes, regulatory process and approvals, APC transition timing and expense, financial performance, sales growth, surgeon and product adoption, market awareness of our products, data validation, our visibility at and sponsorship of conferences and educational events, global business disruption caused by Russia’s invasion of Ukraine and related sanctions, geopolitical conflicts in the Middle East, as well as those risk factors described under Part I, Item 1A., “Risk Factors,” of our Annual Report on Form 10-K for the most recently ended fiscal year and Part II, Item 1A., “Risk Factors,” for our Quarterly Report on Form 10-Q for the most recently ended fiscal quarter. Forward-looking statements are not a guarantee of future performance, and actual results may differ materially from those projected. The forward-looking statements are representative only as of the date they are made and, except as required by applicable law, we assume no responsibility to publicly update or revise any forward-looking statements.

About Non-GAAP Financial Measures

To supplement our condensed consolidated financial statements, we use the non-GAAP financial measures of EBITDA, which measures earnings before interest, income taxes, depreciation and amortization, and Adjusted EBITDA which further excludes non-cash stock compensation expense. We also use the non-GAAP financial measures of Adjusted Net Income or Loss and Adjusted Net Income or Loss Per Common Share - basic and diluted which excludes non-cash stock compensation expense from Net Income or Loss and Net Income or Loss Per Common Share - basic and diluted, respectively. These non-GAAP measures are not based on any comprehensive set of accounting rules or principles and should not be considered a substitute for, or superior to, financial measures calculated in accordance with GAAP and may be different from non-GAAP measures used by other companies. In addition, these non-GAAP measures should be read in conjunction with our financial statements prepared in accordance with GAAP. The reconciliations of the non-GAAP measures to the most directly comparable financial measures calculated and presented in accordance with GAAP should be carefully evaluated.

We use these non-GAAP financial measures for financial and operational decision-making and as a means to evaluate period-to-period comparisons. We believe that these non-GAAP financial measures provide meaningful supplemental information regarding our performance and that both management and investors benefit from referring to these non-GAAP financial measures in assessing our performance and when planning, forecasting, and analyzing future periods. We believe these non-GAAP financial measures are useful to investors because (i) they allow for greater transparency with respect to key metrics used by management in its financial and operational decision-making and (ii) they are used by our institutional investors and the analyst community to help them analyze the performance of our business, the Company's cash available for operations, and the Company's ability to meet future capital expenditure and working capital requirements.

Contact:
Axogen, Inc.
InvestorRelations@axogeninc.com

AXOGEN, INC.
CONSOLIDATED BALANCE SHEETS
December 31, 2024 and 2023
(unaudited)
(In thousands, except share and per share amounts)

	2024	2023
Assets		
Current assets:		
Cash and cash equivalents	$ 27,554	$ 31,024
Restricted cash	6,000	6,002
Investments	5,928	—
Accounts receivable, net of allowance for doubtful accounts of $788 and $337, respectively	24,105	25,147
Inventory	33,183	23,020
Prepaid expenses and other	2,447	2,811
Total current assets	99,217	88,004
Property and equipment, net	84,667	88,730
Operating lease right-of-use assets	14,265	15,562
Intangible assets, net	5,579	4,531
Total assets	$ 203,728	$ 196,827
Liabilities and shareholders' equity		
Current liabilities:		
Accounts payable and accrued expenses	$ 28,641	$ 28,883
Current maturities of long-term lease obligations	1,969	1,547
Total current liabilities	30,610	30,430
Long-term debt, net of debt discount and financing fees	47,496	46,603
Long-term lease obligations	19,221	21,142
Debt derivative liabilities	2,400	2,987
Other long-term liabilities	94	—
Total liabilities	99,821	101,162
Commitments and contingencies - see Note 15		
Shareholders' equity:		
Common stock, $0.01 par value per share; 100,000,000 shares authorized; 44,148,836 and 43,124,496 shares issued and outstanding	441	431
Additional paid-in capital	394,726	376,530
Accumulated deficit	(291,260)	(281,296)
Total shareholders' equity	103,907	95,665
Total liabilities and shareholders' equity	$ 203,728	$ 196,827

AXOGEN, INC.
CONSOLIDATED STATEMENTS OF OPERATIONS
Three Months and Years Ended December 31, 2024 and 2023
(unaudited)
(In thousands, except share and per share amounts)

	Three Months Ended		Year Ended	
	December 31, 2024	**December 31, 2023**	**December 31, 2024**	**December 31, 2023**
Revenues	$ 49,405	$ 42,922	$ 187,338	$ 159,012
Cost of goods sold	11,830	10,901	45,361	37,143
Gross profit	37,575	32,021	141,977	121,869
Costs and expenses:				
Sales and marketing	20,051	20,109	78,461	77,580
Research and development	6,731	7,175	27,767	27,339
General and administrative	8,866	7,931	39,036	38,412
Total costs and expenses	35,648	35,215	145,264	143,331
Income (loss) from operations	1,927	(3,194)	(3,287)	(21,462)
Other (expense) income:				
Investment income	325	336	1,141	1,487
Interest expense	(1,801)	(1,843)	(8,206)	(2,835)
Change in fair value of derivatives	45	882	587	1,531
Other expense	(46)	(74)	(199)	(437)
Total other expense, net	(1,477)	(699)	(6,677)	(254)
Net income (loss)	$ 450	$ (3,893)	$ (9,964)	$ (21,716)
Weighted average common shares outstanding — basic	44,876,659	43,101,663	44,257,754	42,878,543
Weighted average common shares outstanding — diluted	48,064,916	43,101,663	44,257,754	42,878,543
Income (loss) per common share — basic and diluted	$ 0.01	$ (0.09)	$ (0.23)	$ (0.51)

AXOGEN INC.
RECONCILIATION OF GAAP FINANCIAL MEASURES TO NON-GAAP FINANCIAL MEASURES
Three Months and Years Ended December 31, 2024 and 2023
(unaudited)
(In thousands, except per share amounts)

	Three Months Ended		Year Ended	
	December 31, 2024	**December 31, 2023**	**December 31, 2024**	**December 31, 2023**
Net income (loss)	$ 450	$ (3,893)	$ (9,964)	$ (21,716)
Depreciation and amortization expense	1,700	1,617	6,734	4,491
Investment income	(325)	(336)	(1,141)	(1,487)
Income tax expense	21	9	97	339
Interest expense	1,801	1,843	8,206	2,835
EBITDA — non GAAP	$ 3,647	$ (760)	$ 3,932	$ (15,538)
Non cash stock-based compensation expense	3,076	1,327	15,906	14,418
Adjusted EBITDA — non GAAP	$ 6,723	$ 567	$ 19,838	$ (1,120)
Net income (loss)	$ 450	$ (3,893)	$ (9,964)	$ (21,716)
Non cash stock-based compensation expense	3,076	1,327	15,906	14,418
Adjusted net income (loss) — non GAAP	$ 3,526	$ (2,566)	$ 5,942	$ (7,298)
Weighted average common shares outstanding — basic	44,876,659	43,101,663	44,257,754	42,878,543
Weighted average common shares outstanding — diluted	48,064,916	43,101,663	44,257,754	42,878,543
Income (loss) per common share — basic	$ 0.01	$ (0.09)	$ (0.23)	$ (0.51)
Non cash stock-based compensation expense	0.07	0.03	0.36	0.34
Adjusted income (loss) per common share — basic - non GAAP	$ 0.08	$ (0.06)	$ 0.13	$ (0.17)
Income (loss) per common share — diluted	$ 0.01	$ (0.09)	$ (0.23)	$ (0.51)
Non cash stock-based compensation expense	0.06	0.03	0.36	0.34
Adjusted income (loss) per common share — diluted - non GAAP	$ 0.07	$ (0.06)	$ 0.13	$ (0.17)

AXOGEN, INC.
CONSOLIDATED STATEMENTS OF SHAREHOLDERS' EQUITY
Three Months and Years Ended December 31, 2024 and 2023
(unaudited)
(In thousands)

	Common Stock		Additional Paid-in Capital	Accumulated Deficit	Total Shareholders' Equity
	Shares	Amount			
Three Months Ended December 31, 2024					
Balance, September 30, 2024	44,002	$ 440	$ 390,677	$ (291,710)	$ 99,407
Stock-based compensation	—	—	3,076	—	3,076
Issuance of restricted and performance stock units	17	—	—	—	—
Exercise of stock options and employee stock purchase plan	130	1	973	—	974
Net income	—	—	—	450	450
Balance, December 31, 2024	44,149	$ 441	$ 394,726	$ (291,260)	$ 103,907
Year Ended December 31, 2024					
Balance, December 31, 2023	43,124	— $ 431	$— $ 376,530	$— $ (281,296)	$— $ 95,665
Stock-based compensation	—	—	15,906	—	15,906
Issuance of restricted and performance stock units	713	7	(7)	—	—
Exercise of stock options and employee stock purchase plan	312	3	2,297	—	2,300
Net loss	—	—	—	(9,964)	(9,964)
Balance, December 31, 2024	44,149	$ 441	$ 394,726	$ (291,260)	$ 103,907
Three Months Ended December 31, 2023					
Balance, September 30, 2023	43,039	$ 430	$ 374,783	$ (277,403)	$ 97,810
Stock-based compensation	—	—	1,327	—	1,327
Issuance of restricted and performance stock units	13	—	—	—	—
Exercise of stock options and employee stock purchase plan	72	1	420	—	421
Net loss	—	—	—	(3,893)	(3,893)
Balance, December 31, 2023	43,124	— $ 431	$— $ 376,530	$— $ (281,296)	$— $ 95,665
Year Ended December 31, 2023					
Balance, December 31, 2022	42,445	$ 424	$ 360,155	$ (259,580)	$ 100,999
Stock-based compensation	—	—	14,418	—	14,418
Issuance of restricted and performance stock units	369	4	(4)	—	—
Exercise of stock options and employee stock purchase plan	310	3	1,961	—	1,964
Net loss	—	—	—	(21,716)	(21,716)
Balance, December 31, 2023	43,124	— $ 431	$— $ 376,530	$— $ (281,296)	$— $ 95,665

AXOGEN, INC.
CONSOLIDATED STATEMENTS OF CASH FLOWS
Years ended December 31, 2024 and 2023
(Unaudited) (In thousands)

	2024	2023
Cash flows from operating activities:		
Net loss	$ (9,964)	$ (21,716)
Adjustments to reconcile net loss to net cash provided by (used in) operating activities:		
Depreciation	6,467	4,218
Amortization of right-of-use assets	1,103	1,062
Amortization of intangible assets	267	273
Amortization of debt discount and deferred financing fees	893	891
Loss on disposal of equipment	—	56
Provision for (recovery of) bad debts	650	(271)
Investment gains	(155)	(666)
Change in fair value of derivatives	(587)	(1,531)
Stock-based compensation	15,906	14,418
Change in operating assets and liabilities:		
Accounts receivable	392	(2,691)
Inventory	(10,163)	(4,115)
Prepaid expenses and other	784	(867)
Accounts payable and accrued expenses	125	6,509
Operating lease obligations	(1,603)	(1,269)
Cash paid for interest portion of finance leases	(4)	(3)
Contract and other liabilities	424	(14)
Net cash provided by (used in) operating activities	4,535	(5,716)
Cash flows from investing activities:		
Purchase of property and equipment	(3,101)	(13,872)
Purchase of investments	(5,773)	(10,203)
Proceeds from sale of investments	—	44,374
Cash payments for intangible assets	(1,423)	(1,046)
Net cash provided by (used in) investing activities	(10,297)	19,253
Cash flows from financing activities:		
Cash paid for debt portion of finance leases	(10)	(10)
Proceeds from exercise of stock options and ESPP stock purchases	2,300	1,964
Net cash provided by financing activities	2,290	1,954
Net increase (decrease) in cash, cash equivalents, and restricted cash	(3,472)	15,491
Cash, cash equivalents, and restricted cash, beginning of period	37,026	21,535
Cash, cash equivalents, and restricted cash, end of period	$ 33,554	$ 37,026

Corporate presentation

February 25, 2025

nasdaq: axgn

axogen®

Safe harbor statement

This presentation contains "forward-looking" statements as defined in the Private Securities Litigation Reform Act of 1995. These statements are based on management's current expectations or predictions of future conditions, events, or results based on various assumptions and management's estimates of trends and economic factors in the markets in which we are active, as well as our business plans. Words such as "expects," "anticipates," "intends," "plans," "believes," "seeks," "estimates," "projects," "forecasts," "continue," "may," "should," "will," "goals," and variations of such words and similar expressions are intended to identify such forward-looking statements. Forward-looking statements include (1) the TAM for the targeted nerve markets, (2) financial guidance, including revenue range and gross margins, (3) growth drivers for the business, (4) expectations regarding the commercial performance of Avive+ Soft Tissue Matrix™, (5) the expectation that the Axogen Processing Center will support our BLA filing, (6) our expectations regarding our potential for BLA approval in September 2025, (7) the expectation that a new (non-biosimilar) competitive processed nerve allograft would need to complete clinical testing and obtain BLA approval prior to clinical release, and that it would likely take 8 years to achieve this, (8) the expectation that Avance® would be designated as the reference product for any biosimilar nerve allograft product and the expectation that approval of such a biosimilar would not occur for at least 12 years from approval of our BLA, and (9) the expectation that RECON℠ study topline results will support our BLA filing.

Actual results or events could differ materially from those described in any forward-looking statements as a result of various factors, including, without limitation, statements related to potential disruptions caused by leadership transitions, global supply chain issues, record inflation, hospital staffing issues, product development, product potential, expected clinical enrollment timing and outcomes, regulatory process and approvals, financial performance, sales growth, surgeon and product adoption, market awareness of our products, data validation, our visibility at and sponsorship of conferences and educational events, global business disruption caused by Russia's invasion of Ukraine and related sanctions, recent geopolitical conflicts in the Middle East, potential disruptions due to management transitions, as well as those risk factors described under Part I, Item 1A., "Risk Factors," of our Annual Report on Form 10-K for the most recently ended fiscal year. Forward-looking statements are not a guarantee of future performance, and actual results may differ materially from those projected. The forward-looking statements are representative only as of the date they are made and, except as required by applicable law, we assume no responsibility to publicly update or revise any forward-looking statements.

The Axogen platform for nerve repair

- Exclusively focused on peripheral nerve repair with a differentiated platform
- 15+ years of demonstrated clinical outcome consistency
- 304 peer-reviewed clinical publications
- Over 100,000 Avance® nerve grafts implanted
- Significant barriers to competitive entry
- Patient activation and surgeon education capabilities

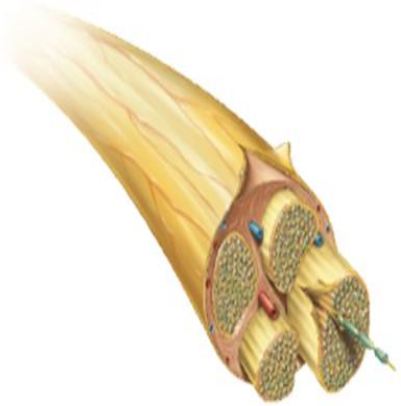
The function of nerves and injury types

Nerves are like wires

- Transfer signals across a network
- If cut, data cannot be transferred
- If crushed, short circuits and data corruption may occur

The peripheral nervous system is a vast network from every organ to and from the brain

- Sensory
- Motor
- Mixed



Nerves can be injured in three ways:

1. **Transection**
   Traumatic nerve injuries e.g., motor vehicle accidents, power tool accidents, battlefield injuries, gunshot wounds, surgical injuries, neuroma-in-continuity

2. **Compression**
   Carpal, cubital, tarsal tunnel revisions, blunt trauma, previous surgeries

3. **Stump Neuroma**
   Amputations, mastectomies, previous surgeries

Comprehensive platform for addressing nerve injuries

avance® nerve graft

Biologically active, processed human nerve allograft developed for bridging nerve discontinuities up to 70 mm

axoguard® nerve connector®

Semi-translucent coaptation aid for nerve transections up to 5 mm

axoguard HA+™ nerve protector

Extracellular matrix base layer with a hyaluronate-alginate gel coating to facilitate enhanced nerve gliding, aid in minimizing soft tissue attachments and remodeling of the base layer to provide long-term protection

axoguard® nerve protector®

Extracellular matrix that remodels to protect injured nerves and reinforce nerve reconstructions

avive+™ soft tissue matrix

Multi-layer amniotic soft tissue barrier for protection during the critical stage of healing

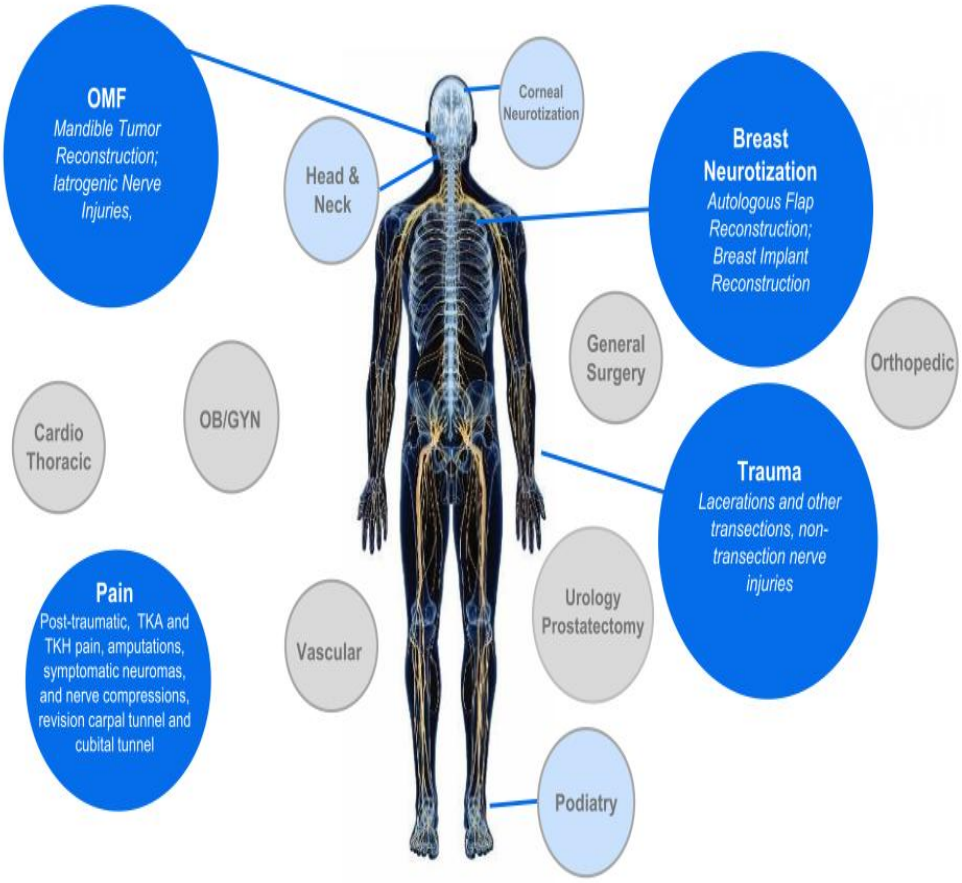
axoguard® nerve cap®

Separates nerve end from surrounding environment to protect from mechanical stimulation and reduce painful neuroma formation

Connection	Protection	Termination

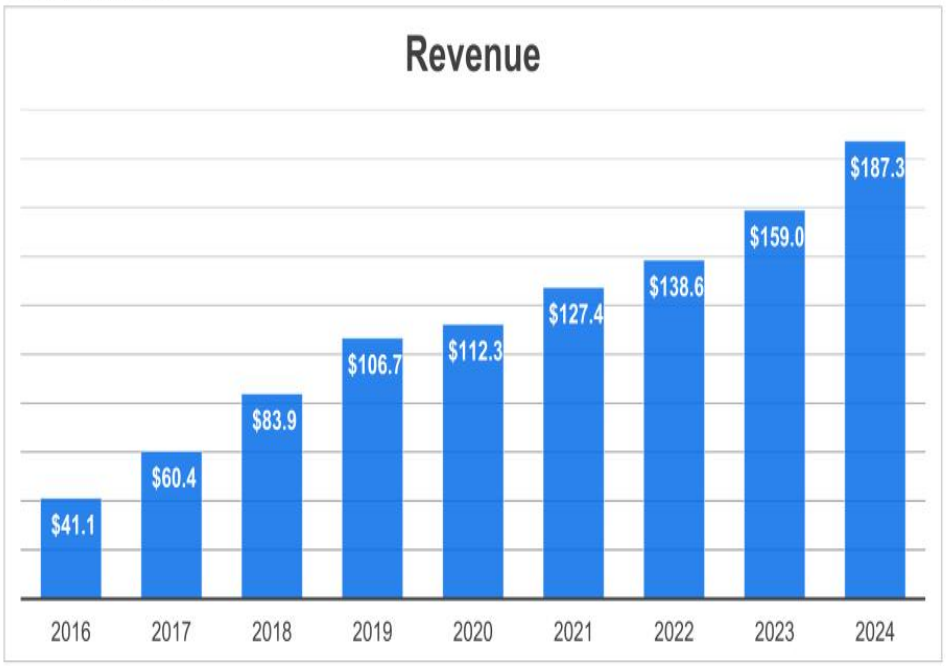
Opportunities in nerve repair

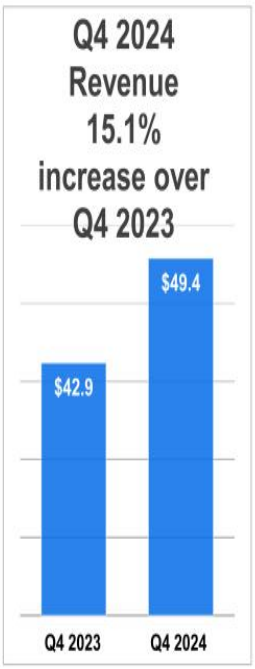
Core business anchored in Trauma and Upper Extremity, and expanded to Breast, OMF and Pain. Further Market Expansion Opportunities in Head & Neck, Corneal Neurotization and Podiatry.



Delivering strong revenue growth and gross margins

U.S. $ in millions





Management expects:

- Full-year 2025 revenue growth to be in the range **of 15% to 17%**.
- Additionally, we anticipate 2025 gross margin for the full year to be in the range of 73% to 75%.
- We expect to be net cashflow positive for the full year 2025.

76.1% gross margin for the quarter ended December 31, 2024

Growth drivers

Clinical Data

- Clinical data published supports increased adoption particularly with middle adopters
  - RECON[SM 19]
  - Meta Analysis of clinical outcomes and Medicare Economic Data[20]
  - Premier Economic Data[21]
  - Cost–effectiveness analysis of Avance[22]

Innovation

- New product launches in nerve protection: Axoguard HA+ Nerve Protector™ launched in Q2 2023, Avive+ Soft Tissue Matrix™ launched in Q2 2024
- Resensation® for breast neurotization expansion into implant-based reconstructions

Sales Rep Productivity driving penetration in high-potential accounts

Patient Activation Programs for breast neurotization, surgical treatment of pain, and OMF

Surgeon Education across nerve repair applications

Axogen Processing Center (APC)

- Fully transferred all Avance processing to APC in December 2023
- Supports BLA requirements for Avance Nerve Graft®
- Provides 3x previous capacity, designed for long-term growth and expansion

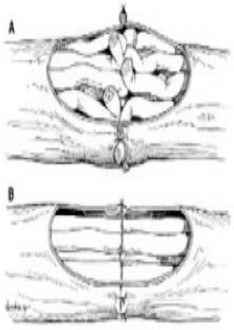
Product Portfolio

Traditional **Transection** repair options are suboptimal

SUTURE

Direct suture repair of no-gap injuries

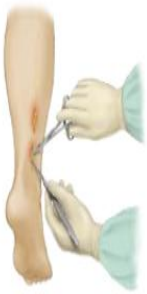
- Common repair method
- May result in tension to the repair leading to ischemia
- Concentrates sutures at the coaptation site



AUTOGRAFT

Traditional method despite several disadvantages

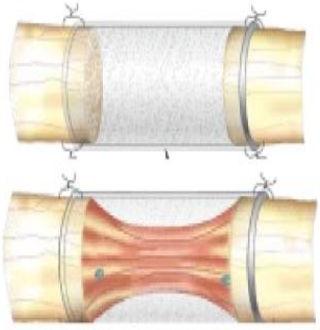
- Secondary surgery
- Loss of function and sensation at harvest site[23]
- High complication rates including wound healing (7%) and chronic pain (23%)[23]
- Limited availability of graft length and diameter



SYNTHETIC CONDUITS

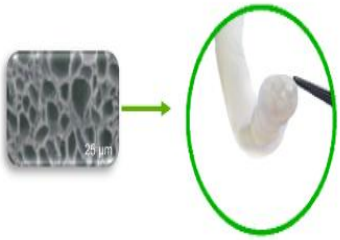
Convenient off the shelf option; limited efficacy & use

- Provides only gross direction for regrowth
- Limited to small gaps
- 34%-57% failure rate >5mm gaps[24, 25]
- Semi-rigid and opaque material limits use and visualization
- Repair reliant on fibrin clot formation



Axogen solutions for **Transection** repair

avance® nerve graft



Processed human nerve allograft for bridging nerve gaps

Clinically studied off-the-shelf alternative

- A biologically active nerve therapy with more than ten years of comprehensive clinical evidence
- 82-84% meaningful recovery in sensory, mixed and motor nerve gaps in multi-center study[26]
- Eliminates need for an additional surgical site and risks of donor nerve harvest[23]
- Reduces OR time[21]

Structural support for regenerating axons

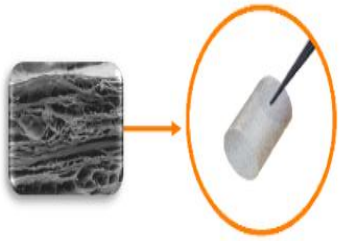
- Cleansed and decellularized extracellular matrix (ECM)
- Offers the benefits of human peripheral nerve micro-architecture and handling

Revascularizes and remodels into patient's own tissue similar to autologous nerve[27]

16 size options in a variety of lengths (up to 70mm) and diameters (up to 5mm)

These highlights do not include all the information needed to use **Avance® Nerve Graft safely** and effectively. See full instructions for use (IFU) for **Avance® Nerve Graft**

axoguard nerve connector®



Minimally processed porcine ECM for connector-assisted coaptation

Alternative to direct suture repair

- Reduces the risk of forced fascicular mismatch[28,29]

Alleviates tension at critical zone of regeneration

- Disperses tension across repair site[30]
- Moves suture inflammation away from coaptation face[31]

Remodels into vascularized patient tissue[32-37]

14 size options in lengths of 10mm and 15mm, and diameters up to 7mm

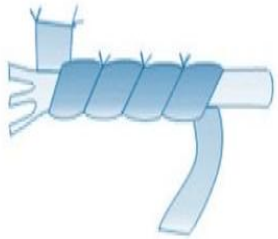
These highlights do not include all the information needed to use **Axoguard Nerve Connector®** safely and effectively. See full instructions for use (IFU) for **Axoguard Nerve Connector®**

Traditional **Compression** repair options are suboptimal

VEIN WRAPPING

Autologous vein

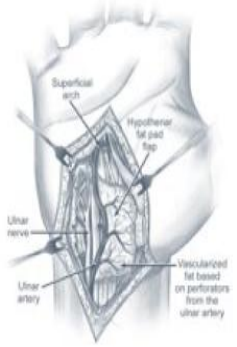
- Barrier to attachment to surrounding tissue
- Requires extra time and skill to perform spiral wrapping technique
- Second surgery site



HYPOTHENAR FAT PAD

Autologous vascularized flap

- Barrier to attachment to surrounding tissue
- Only wraps part of the nerve circumference
- Increases procedure time



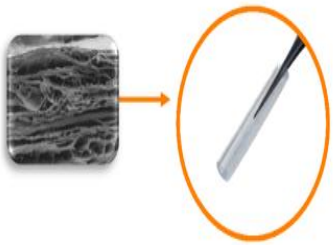
COLLAGEN WRAPS

Off-the-shelf

- Semi-rigid material limits use
- Degrades over time and does not provide a lasting barrier to soft tissue attachment

Axogen solutions for **Compression** repair

axoguard nerve protector®



Minimally processed porcine extracellular matrix for wrapping and protecting injured peripheral nerve

Protects repair site from surrounding tissue

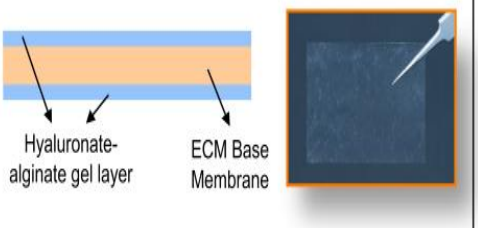
- Processing results in an implant that works with the body's natural healing process[38]
- Minimizes soft tissue attachments[35]

Allows nerve gliding

- Minimizes risk of entrapment[35]
- Creates a barrier between repair and surrounding tissue bed[35]
- ECM revascularizes and remodels into patient's own tissue[32-37]

These highlights do not include all the information needed to use **Axoguard Nerve Protector®** safely and effectively. See full instructions for use (IFU) for **Axoguard Nerve Protector®**

axoguard HA+ nerve protector™



ECM base membrane:

- Processed porcine submucosa extracellular matrix (ECM) base layer
- Vascularizes and remodels to form a new long-term protective tissue layer

Minimally processed porcine extracellular matrix with hyaluronate-alginate gel layer

Lubrication layer:

- Protects nerve in the early critical phase of healing
- Enhances nerve gliding for nerve protection applications where nerve mobility is critical and aids in minimizing soft tissue attachments[32]

Handling characteristics:

- Flat sheet design that easily conforms to tissue
- Coverage of more anatomical locations

Launched August 2023

These highlights do not include all the information needed to use **Axoguard HA+ Nerve Protector™ safely** and effectively. See full instructions for use (IFU) for **Axoguard HA+ Nerve Protector™**

Avive+ Soft Tissue Matrix™

Avive+ Soft Tissue Matrix is a unique, multi-layer amniotic membrane allograft ideal for providing temporary protection for acute injuries.

Resorbable
Avive+ Soft Tissue Matrix is a temporary resorbable soft tissue barrier for the prevention of soft tissue attachment in an acute wound bed. Made from human birth tissue that will resorb after the critical stage of healing.

Ease of use
The unique multi-layer design of amnion and chorion provides structural integrity that makes Avive+ easy to handle and, with the epithelial layer facing out on both sides, it can be applied in either direction intra-operatively.

Inherent properties of amnion
Avive+ leverages the properties of amnion offering a homologous tissue option that has a low immune response and serves as a barrier to separate and reestablish tissue planes.

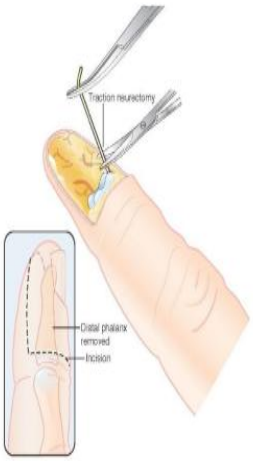
These highlights do not include all the information needed to use the **Avive+ Soft Tissue Matrix** safely and effectively. See Package Insert (PI) for **Avive+ Soft Tissue Matrix**

Traditional **Stump Neuroma** options are suboptimal

TRACTION NEURECTOMY

Nerve placed in traction and cut to allow for retraction

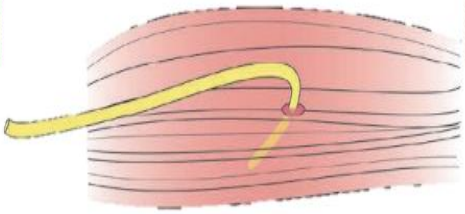
- Simply resecting the nerve results in subsequent neuroma formation and risk of secondary surgery
- Causes traction injury
- High risk of recurrence[39]



BURYING IN MUSCLE/BONE

Traditional method of neurectomy and neuromyodesis

- Simply resecting the nerve results in subsequent neuroma formation and risk of secondary surgery
- Pain due to muscular contraction or localized pressure
- Larger surgical dissection
- Only 33-40% of patients were satisfied with treatment after burial into bone or muscle[40]



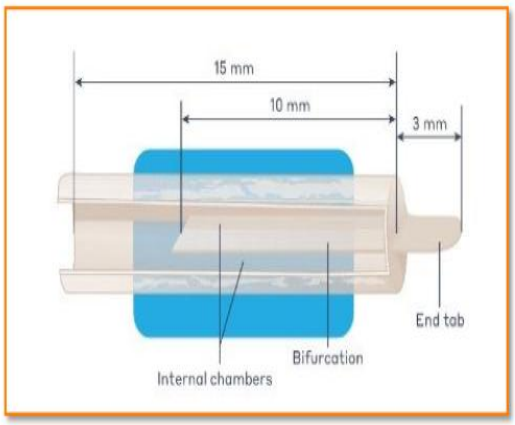
INJECTIONS

Pharmacologic intervention, typically alcohol or steroids

- Chemical injections are only successful 40% of the time[41,42]
- Temporary solution that has a reduced benefit over time
- May cause considerable side effects

Axogen solution for **Stump Neuroma**

axoguard nerve cap®



Large Diameter Nerve Cap launched in February 2024. 3 larger sizes for larger diameter nerves. Expands addressable procedures in upper and lower extremity.

Proprietary small intestine submucosa (SIS) matrix designed to separate the nerve end from the surrounding environment to protect it from mechanical stimulation and reduce painful neuroma formation*.

Protects and isolates

- Reduces the development of symptomatic or painful neuroma formation
- Provides a barrier from neurotrophic factors and mechanical stimulation

SIS Material allows for vascularization and gradual remodeling (as shown in animal studies)[32-37]

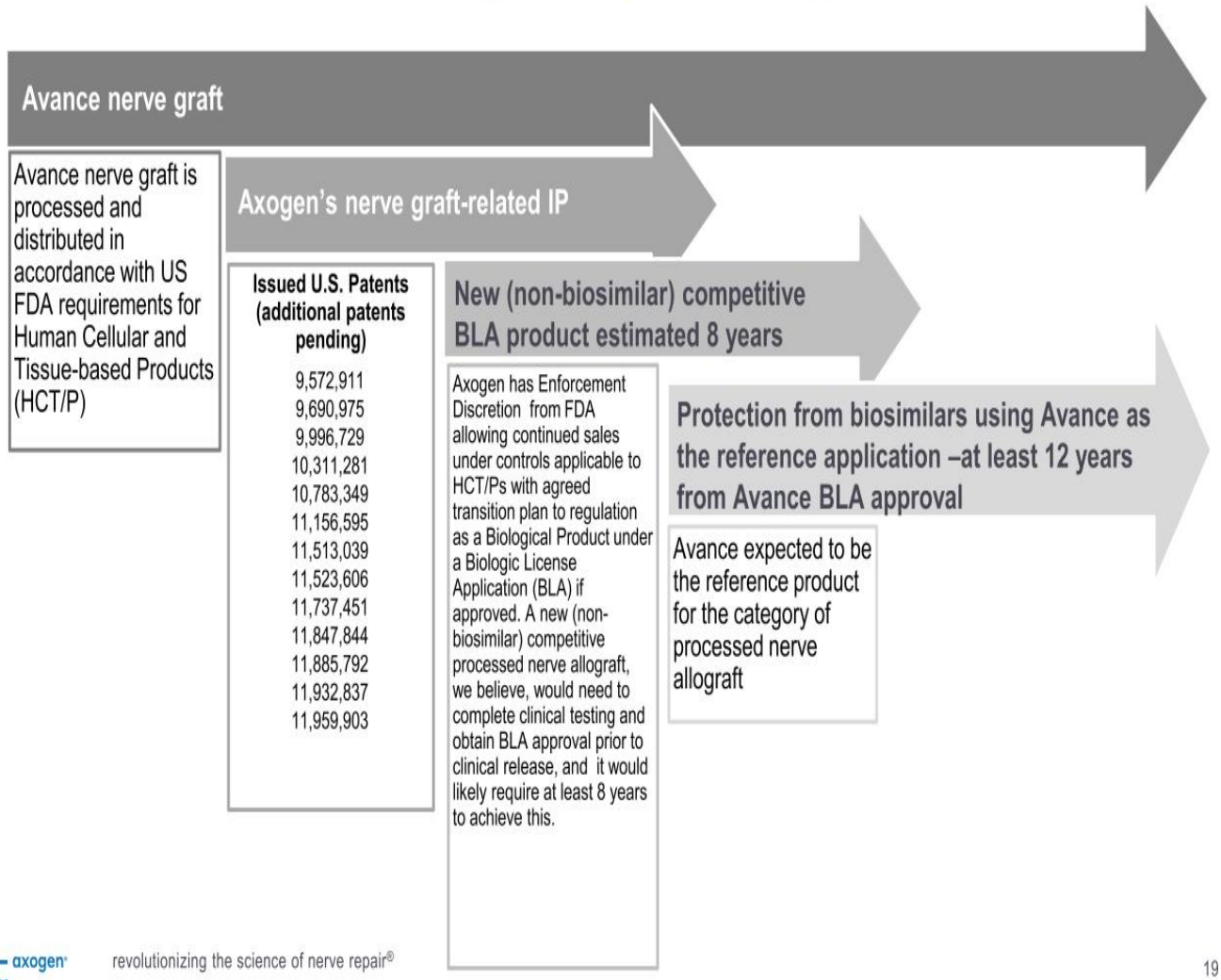
- Material gradually incorporates into patient's own tissue, creating a physical barrier to surrounding soft tissue[43]

Intra-operative versatility

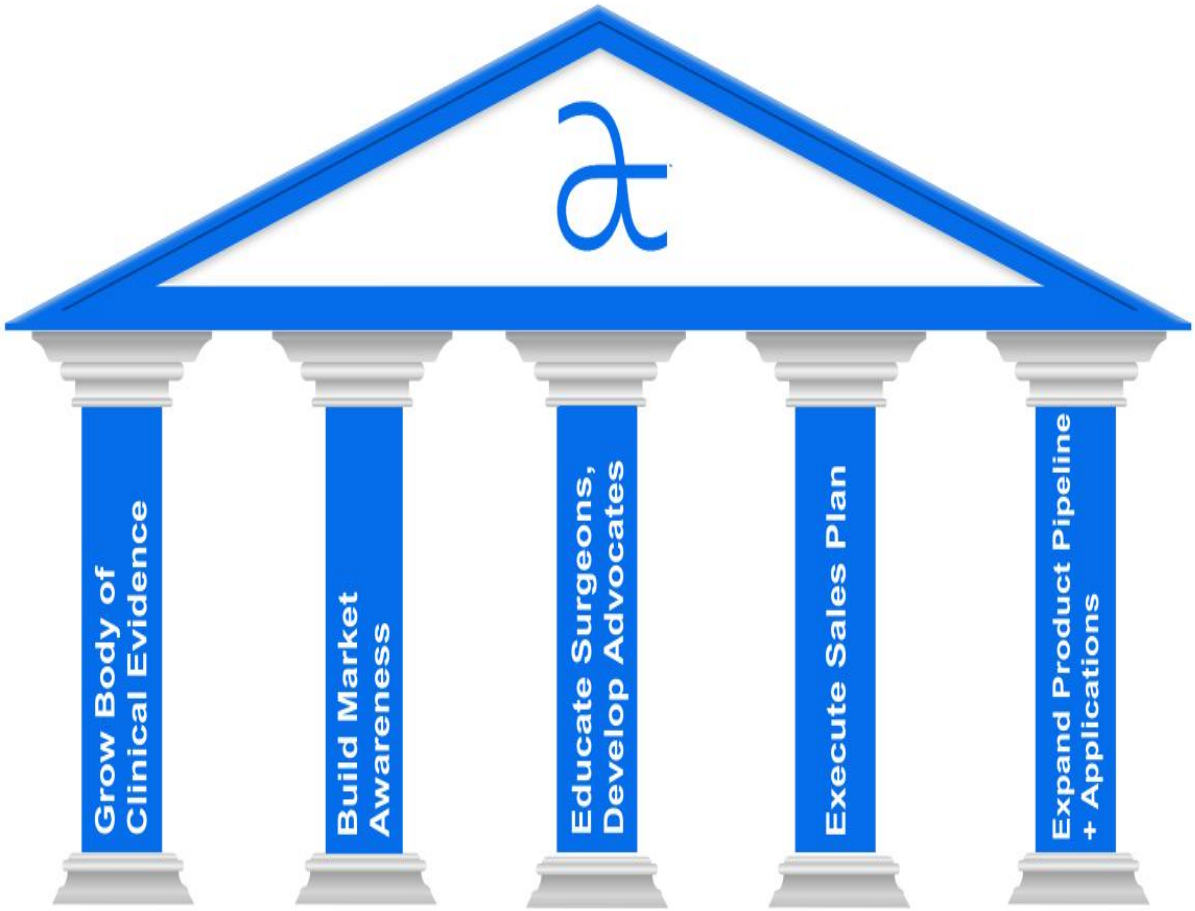
- Ideal for anatomic areas with limited or no musculature
- Alternative to historical techniques such as burying in muscle or bone
- Available in a variety of diameters

*These highlights do not include all the information needed to use **Axoguard Nerve Cap®** safely and effectively. See full instructions for use (IFU) for **Axoguard Nerve Cap®** https://www.axogeninc.com/wp-content/uploads/2019/12/LB-580-R04_NerveCapIFU.pdf

Avance Patents and Regulatory Landscape



Market development strategy



Strong commitment to developing clinical evidence

RANGER® Registry Study: Enrollment Complete
- Multi-center clinical study in PNR with >2,700 enrolled to date
- Overall meaningful recovery rates of 82-84%; comparable to autograft

MATCH® Registry Study: Enrollment Complete
- Avance compared to matched cohort of autograft and synthetic conduits

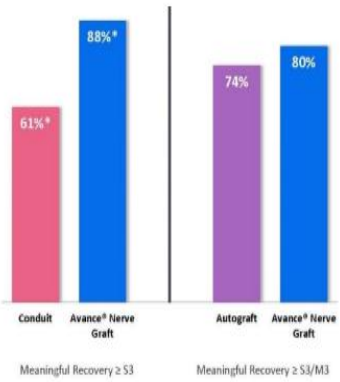
Sensation-NOW® Registry Study: Enrollment Ongoing
- Multi-center clinical study in breast neurotization

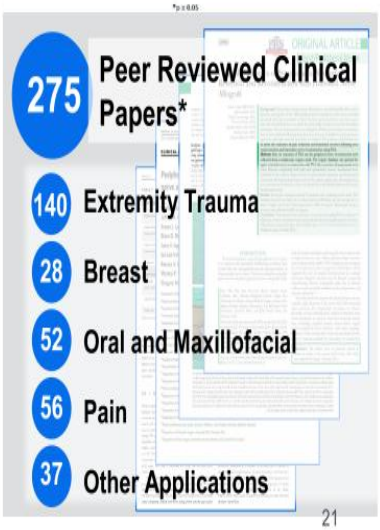
REPOSE®: Top line Data Read Out Complete
- Prospective, randomized, controlled study of Axoguard Nerve Cap® vs neurectomy

REPOSE-XL℠: Pilot Study Enrollment Ongoing
- Pilot study evaluating the feasibility of large-diameter Axoguard Nerve Cap® for protecting and preserving terminated nerve ends after trauma or amputation

COVERED℠: Enrollment Ongoing
- Prospective, multi-center clinical case series evaluating Axoguard HA+ Nerve Protector™ in first revision cubital tunnel decompression

Outcomes from RANGER Registry [44,45]





*Certain publications contain data on multiple applications.

RECON℠: A Multicenter, Prospective, Randomized, Subject & Evaluator Blinded Comparative Study of Nerve Cuffs & Avance Nerve Graft Evaluating Recovery Outcomes for the Repair of Nerve Discontinuities

- Safety & efficacy non-inferiority comparison of Avance vs conduit
- Evaluated upper extremity digital nerve repair for nerve gaps 5-25mm
- 220 subjects from up to 25 U.S. centers stratified into gap lengths with two-thirds in the 5-14mm group and one-third in the 15-25mm group

RECON Study Topline Results

Primary Endpoint Achieved

- This phase three pivotal study met its primary endpoint for the return of sensory function as measured by static two-point discrimination, and the safety profile was consistent with previously published data
- The data will support the company's Biologics License Application (BLA) with a potential for approval in September 2025.

Statistical superiority demonstrated at increasing gap lengths

✓ Avance demonstrated statistical superiority for return of sensory function (measured by static two-point discrimination) as compared to conduits in gaps greater than 12 mm (p-value 0.021).[19]

✓ Avance demonstrated statistical superiority for time to recovery of static two-point discrimination as compared to conduits, returning normal sensation* up to 3 months earlier in gaps greater than 10 mm (p-value 0.037).[32]

The safety profile was consistent with previously published data

✓ Conduit repairs were observed to have an increased likelihood of persistent and unresolved nerve pain with an incidence of 9 (8%) conduit subjects as compared to 2 (2%) Avance subjects.[32]

*Normal Sensation is defined by the Medical Research Council Classification (MRCC) score as S4 or return of static two-point discrimination outcomes of ≤ 6mm.

REPOSE Study Top Line Results

Primary Endpoint Achieved

REPOSE met primary endpoint of non-inferiority between the Month 12 pain visual analog scale scores for neurectomy with Axoguard Nerve Cap vs. standard-of-care neurectomy alone (p-value <0.05).

Statistical superiority demonstrated in Reduction of Total Pain

✓ Axoguard Nerve Cap demonstrated statistical superiority vs. standard-of-care neurectomy in the Reduction of Total Pain reported by participants over the full 12-month course of follow-up (p-value <0.05)

REPOSE is a post-market, randomized, comparative clinical study of standard-of-care neurectomy followed by reconstruction of the nerve end with Axoguard Nerve Cap, evaluating recovery outcomes for the treatment of symptomatic neuroma.

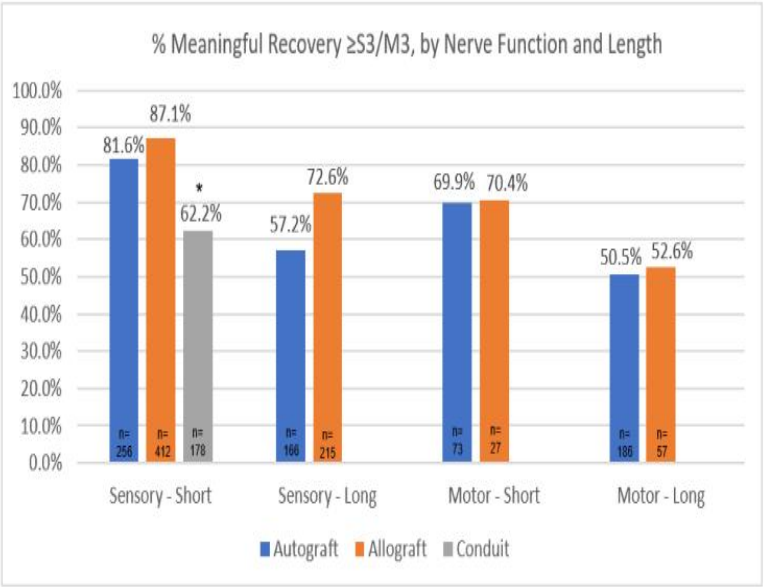
Study Details:

- Multicenter, prospective, randomized, subject blinded trial
- 86 randomized participants
- 12-month follow-up
- Pain, medication, Quality of Life questionnaires, recurrence of neuroma endpoints

Independent Publication of Nerve Meta-Analysis Provides the Strongest Clinical and Economic Evidence To-Date of the Performance of Avance® Nerve Graft Across All Gap Lengths and Nerve Types

"Lans et al., A systematic review and meta-analysis of nerve gap repair: Comparative effectiveness of allografts, autografts, and conduits" – *Journal of Plastic and Reconstructive Surgery*[20]

- Analyzed 35 peer-reviewed studies with 711 allograft, 670 autograft, and 178 conduit repairs, over four decades.
- There were no statistical differences between allograft and autograft outcomes over all gap lengths for both sensory and motor nerve repairs.
- Allograft and autograft repairs delivered significantly better rates of meaningful sensory recovery in short gaps as compared to conduit repairs; 87.1% and 81.6% vs. 62.2%, respectively, $p<0.05$.
- The cost analysis found that allograft does not represent an increased economic burden compared to autograft.



*statistically significant difference

Procedure Costs of Peripheral Nerve Graft Reconstruction

Raizman et al.
PRS Global Open[21]

- Retrospective study of U.S. all-payer data on facility procedure costs from 2018 to 2020. Included over 1,300 nerve repairs.

Conclusions:

- No significant differences in procedure costs for autograft and allograft repair in either inpatient or outpatient setting.
- OR time was *significantly shorter* for allograft repairs, in both outpatient and inpatient settings.

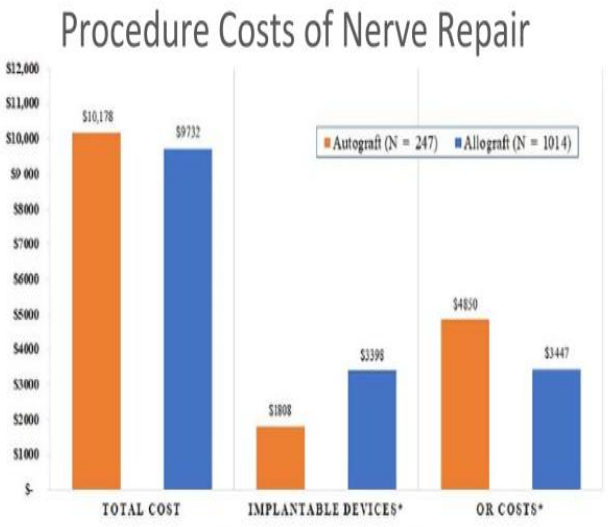


Fig. 2. Outpatient descriptive costs of nerve graft repair type (n = 1261).

Fig. 3. Inpatient descriptive costs of nerve repair graft type (n = 102).

Focus on building awareness among clinicians and patients

Build Market Awareness

- Increasing omnichannel engagement with clinicians and patients
- Continuing clinical conference participation both virtually and in-person as appropriate
- Ongoing patient ambassador program
- Garnering positive media attention
- Growing social media presence

resensation®

rethink pain®

Knowledge is power: continued education and advocacy efforts with patients, clinicians and key legislators elevates the problems associated with numbness.

Emphasis on education

Educate Surgeons, Develop Advocates

- In-person and virtual national education programs
- Customized multimodal learning programs to specific surgeon groups for advanced learning
- Ongoing interactive webinar series covering the principles of nerve repair
- Emphasis on training hand and micro-surgery fellows

masterminds of nerve

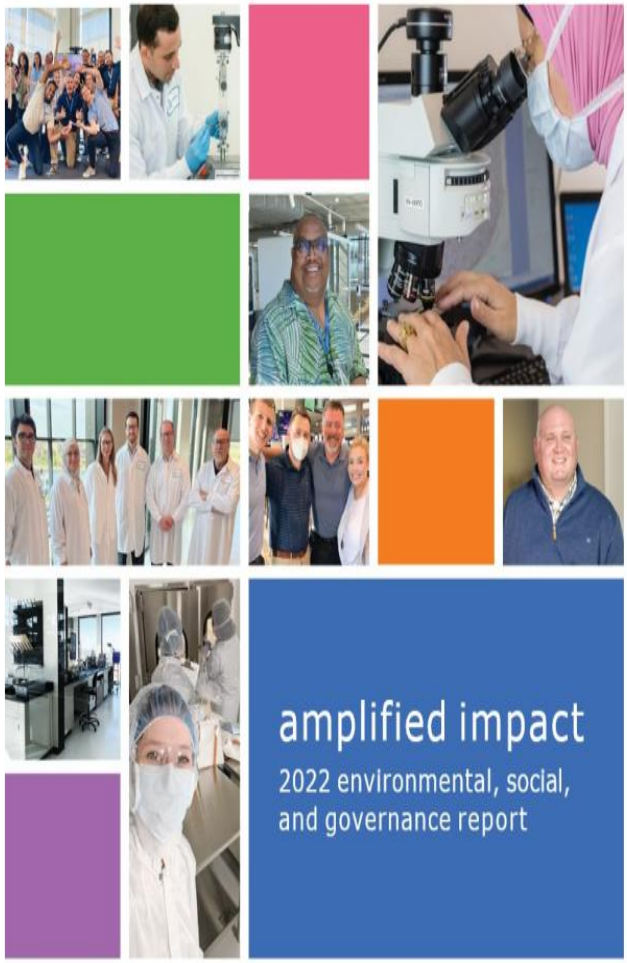
Focused sales execution, increasing market penetration

Sales execution focused on driving results

- Continue driving penetration in High-Potential Accounts

Broad sales reach

- U.S. direct sales team
- Supplemented by independent agencies



Committed to our patients, the communities we serve, and our pursuit of advancing the science of nerve repair in ethical and sustainable ways

People **Sustainability** **Business**

Diversity, Equity, and Inclusion - Being the Company where exceptional people want to work

Cybersecurity – Data Privacy, Training, and Policies

Compliance – Quality Management System, Regulatory, and Good Manufacturing Practices

Governance – Framework for Ethics Codes and Accountability

Environment – Responsible, Sustainable Operations

axogen revolutionizing the science of nerve repair®

FUTURE WE CREATE

Executive team

Michael Dale
Chief Executive Officer & Board Director
Abbot Laboratories
Effective. 8.9.2024

Marc Began
Executive Vice President, General Counsel
Abiomed, Boehringer Ingelheim, Novo Nordisk

Nir Naor
Chief Financial Officer
Arbor Pharmaceuticals, Mölnlycke Healthcare, UCB

Erick DeVinney
Chief Innovation Officer
Angiotech, PRA Intl

Jens Schroeder Kemp
Chief Marketing Officer
Ambu, Pera International

Ivica Ducic, M.D., Ph.D.
Chief Medical Officer
Washington Nerve Institute

Craig Swandal
VP, Operations
Abbot Laboratories

Stacy Arnold
VP, Product Development and Clinical Research
Artivion (CryoLife)

Al Jacks
VP, Quality Assurance
VERO Biotech, Alimera Sciences

Mark Friedamn
VP, Biologics and Policy
Axogen

Doris Quackenbush
VP, Sales
Convatec

Jesse Bishop
VP, Regulatory
Thermo Fisher Scientific

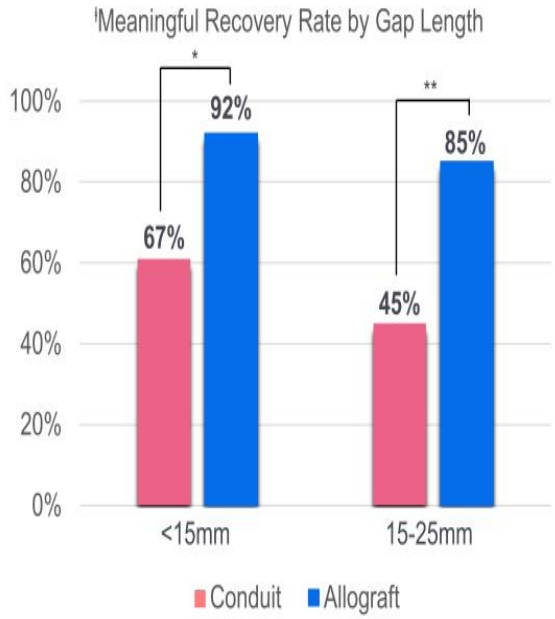
Appendix

- Key clinical data
- CMS outpatient and ASC reimbursement rates
- Cash, debt, and capital structure
- Axogen product portfolio and indications for use

Avance nerve graft repairs found to be significantly better than conduit repairs

"Leversedge et al., A Multicenter Matched Cohort Study of Processed Nerve Allograft and Conduit in Digital Nerve Reconstruction" – *Journal of Hand Surgery, September 2020*[44]

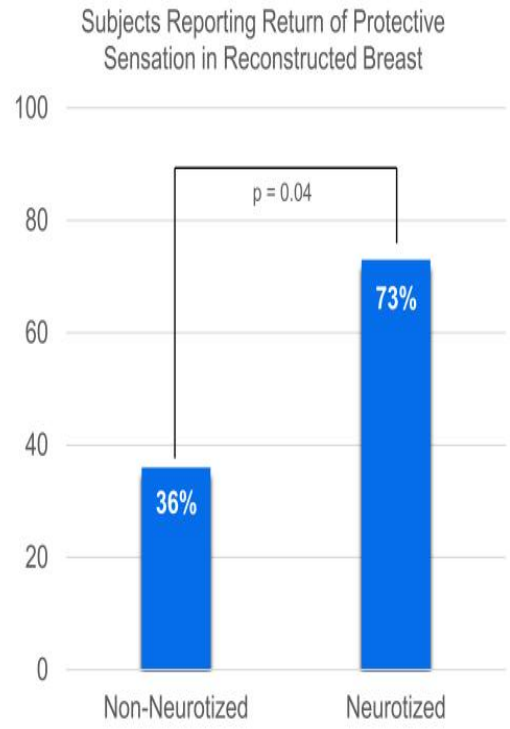
- Peer-reviewed publication from the MATCH cohort of the RANGER Registry
- Includes outcomes from 110 subjects with 162 nerve injuries; 113 were repaired with Avance nerve graft and 49 were repaired with manufactured conduit
- Findings show overall meaningful recovery rate was 88% for Avance nerve graft and 61% for conduit (p=0.001) for gaps up to 25mm
- Average static two-point discrimination improved to 9.7mm for Avance nerve graft as compared to 12.2mm for conduit (p=0.018)
  - Note: lower measurement is reflective of improved discrimination and a better outcome
- As gap length increased, Avance nerve graft outcome rates remained consistent while conduit rates declined significantly



[1]Meaningful Recovery = ≥S3 on the MRCC Scale
*p=0.008, **p=0.001

First publication on breast neurotization outcomes with Avance Nerve Graft demonstrated greater return of protective sensation

"Momeni et al., Flap Neurotization in Breast Reconstruction with Nerve Allografts: 1-year Clinical Outcomes" – *Plastic and Reconstructive Microsurgery Global Open, January 2021*[46]

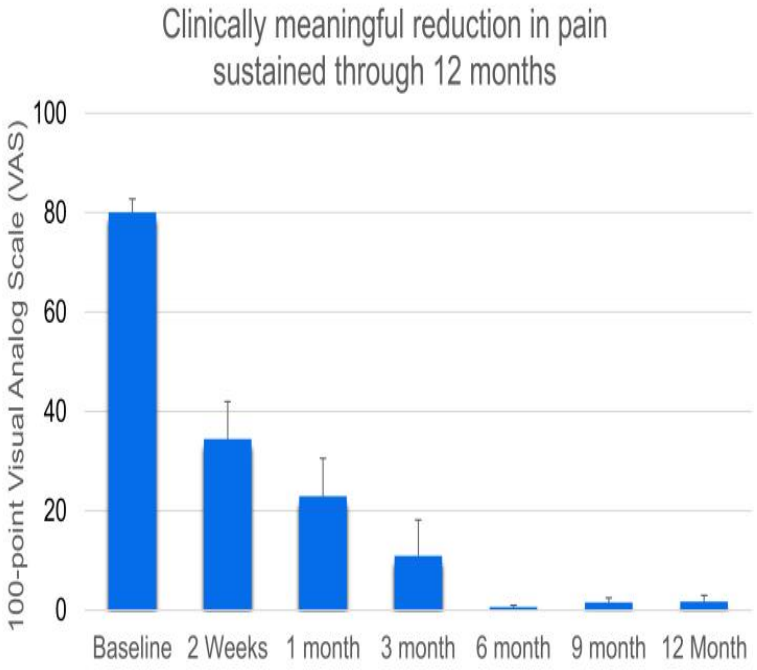


- Early outcomes from a single center study, as part of the Sensation-NOW® registry
- 36 breast reconstructions that included:
  - 22 breast reconstructions with Resensation®
  - 14 standard non-neurotized breast reconstructions
- Return of Protective Sensation (p=0.04)
  - 73% of the Resensation group
  - 36% of the non-neurotized group
- Neurotization with Avance Nerve Graft resulted in greater return of sensation and return of sensation in more of the breast as compared to standard reconstruction without nerve repair.

Axogen sponsored REPOSE℠ pilot study analysis demonstrates clinically significant improvement for subjects with chronic neuropathic pain when using Axoguard Nerve Cap® following neurectomy[47]

15-subject, single arm pilot phase evaluating reduction in pain from baseline following surgical excision of the neuroma and placement of the Axoguard Nerve Cap

- Significant & clinically meaningful reduction in pain
- Significant and clinically meaningful improvements in Fatigue, Physical Function, Sleep Disturbance, Pain Interference, Pain Intensity, and Pain Behavior as measured by the validated PROMIS® measures
- Positive indicators for reduction in pain medication burden, including opioids
- No recurrence of neuroma



Minimal Clinically Important Difference (MCID): 17mm
Δ 3 months: -69 ± 23; $p < 0.0001$
Δ 12 months: -80 ± 13; $p < 0.0001$

2024-25 YOY CMS ***Proposed*** outpatient reimbursement rates - hospital and ASC

Although CMS rates[1] only apply to Medicare cases, which represents a small percentage of traumatic injuries, private payors are often influenced by the analysis and decisions made by CMS

CPT Code	Descriptor	C-APC	Hospital Outpatient (HOPD)			Ambulatory Surgery Center (ASC)		
			2024	Proposed 2025	% Change	2024	Proposed 2025	% Change
64912	Nerve allograft repair[2]	5432	$6,354	**$6,437**	1.30%	$4,579	**$4,644**	1.41%
64910	Conduit or vein allograft repair[2]	5432	$6,354	**$6,437**	1.30%	$4,288	**$4,495**	4.82%
64885	Autograft repair (head and neck ≤4cm)[6]	5432	$6,354	**$6,437**	1.30%	$4,496	**$3,136**	-30.25%
64886	Autograft repair (head and neck >4cm)[3]	5432	$6,354	**$6,437**	1.30%	$3,013	**$3,984**	32.23%
64890	Autograft repair (hand and foot ≤4cm)[6]	5432	$6,354	**$6,437**	1.30%	$4,583	**$3,136**	-31.58%
64891	Autograft repair (hand and foot >4cm)[2]	5432	$6,354	**$6,437**	1.30%	$3,794	**$3,984**	5.01%
64892	Autograft repair (arm and leg ≤4cm)[2]	5432	$6,354	**$6,437**	1.30%	$4,616	**$4,875**	5.62%
64893	Autograft repair (arm and leg >4cm)[6]	5432	$6,354	**$6,437**	1.30%	$4,677	**$3,136**	-32.95%
64897	Autograft repair (arm and leg ≤4cm multiple strands)[6]	5432	$6,354	**$6,437**	1.30%	$4,083	**$3,136**	-23.20%
64895-96,98	Autograft repair (all other nerve type)[5]	5432	$6,354	**$6,437**	1.30%	$3,013	**$3,136**	4.08%
64834-36, 40, 56, 57, 62-64	Direct Repair (other hand / foot, arm/leg, repair / transpose, facial, low back,)[5]	5432	$6,354	**$6,437**	1.30%	$3,013	**$3,136**	4.08%
64865	Direct Repair of facial nerve[2]	5432	$6,354	**$6,437**	1.30%	$3,796	**$3,984**	4.95%
64831, 61	Direct Repair (digital, brachial plexus/arm)[4]	5431	$1,842	**$1,946**	5.66%	$898	**$921**	2.52%
64858	Direct Repair (sciatic)[4]	5431	$1,842	**$1,946**	5.66%	$1,497	**$921**	-38.50%

1. National average payment rates. Commercial payments are traditionally 1.5-2x higher than Medicare.
2. Nerve allograft repair CPT 64912, conduit repair CPT 64910, autograft repairs hand/foot >4cm CPT 64891, arm/leg≤4cm CPT 64892, direct repair of facial nerve CPT 64865 remain in C-APC 5432 all continue to meet ASC device intensive criteria
3. Autograft repair head/neck >4cm CPT 64886 meets ASC device intensive criteria in 2025
4. Direct repair digital CPT codes 64831, brachial plexus/arm 64861, and sciatic 64858 remain in C-APC 5431 and do not meet ASC device intensive criteria and in 2025 direct repair sciatic 64858 lost device intensive status.
5. Autograft repair all other nerve type CPT 64895-96,98 and Direct repair other hand/foot CPT 64834-36, leg CPT 64840, repair/transpose CPT 64856, arm/leg CPT 64857, low back CPT 64862-64 remain in C-APC 5432 and do not meet ASC device intensive criteria
6. Autograft repair head/neck >4cm CPT 64885, head/neck >4cm CPT 64890, arm and leg >4cm, and arm and leg ≤4cm multiple strands CPT 64897 remains in C-APC 5432 and no longer meets ASC device intensive criteria in 2025.

Note: Hospital inpatient rates for nerve repair align to DRGs 040, 041, 042 and range from $11.4k to $24.5k in the 2025 IPPS Final Rule

2024-25 YoY Center for Medicare and Medicaid Services (CMS): ***Proposed*** Physician Fee Schedule (PFS)

CPT Codes to f	Descriptor	Physician Fee Schedule (PFS)		
		2024	2025 Proposed	% Change
64912	Nerve allograft repair	$897	**$880**	**-1.95%**
64910	Conduit or vein allograft repair	$765	**$752**	**-1.65%**
64885 to 64898*	Autograft repair	$1,053 to $1,427	**$1,032 to $1,400**	**-1.9% to -2.00%**
64831 to 64865*	Direct Repair	$701 to $1,548	**$691 to $1,514**	**-1.49% to -2.17%**

*excludes add-on procedure codes

2019-25 CMS ***Proposed*** outpatient reimbursement rates - hospital and ASC

Although CMS rates[1] only apply to Medicare cases, which represents a small percentage of traumatic injuries, private payors are often influenced by the analysis and decisions made by CMS

CPT Code	Descriptor	C-APC	Hospital Outpatient (HOPD)				Ambulatory Surgery Center (ASC)			
			2019	2024	2025 Proposed	6Y % Change	2019	2024	2025 Proposed	6Y % Change
64912	Nerve allograft repair[2]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$4,579	**$4,644**	**141.88%**
64910	Conduit or vein allograft repair[2]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$2,613	$4,288	**$4,495**	**72.02%**
64885	Autograft repair (head and neck ≤4cm)[6]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$4,496	**$3,136**	**63.33%**
64886	Autograft repair (head and neck >4cm)[3]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$3,127	$3,013	**$3,984**	**27.41%**
64890	Autograft repair (hand and foot ≤4cm)[6]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$3,075	$4,583	**$3,136**	**1.98%**
64891	Autograft repair (hand and foot >4cm)[2]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$3,794	**$3,984**	**107.50%**
64892	Autograft repair (arm and leg ≤4cm)[2]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$4,616	**$4,875**	**153.91%**
64893	Autograft repair (arm and leg >4cm)[6]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$4,677	**$3,136**	**63.33%**
64897	Autograft repair (arm and leg ≤4cm multiple strands)[6]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$4,083	**$3,136**	**63.33%**
64895-96,98	Autograft repair (all other nerve type)[5]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$3,013	**$3,136**	**63.33%**
64834-36, 40, 56, 57, 62-64	Direct Repair (other hand / foot, arm/leg, repair / transpose, facial, low back,)[5]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$3,013	**$3,136**	**63.33%**
64865	Direct Repair of facial nerve[2]	5432	$4,566	$6,354	**$6,437**	**40.98%**	$1,920	$3,796	**$3,984**	**107.50%**
64831, 61	Direct Repair (digital, brachial plexus/arm)[4]	5431	$4,566	$1,842	**$1,946**	**-57.38%**	$1,920	$898	**$921**	**-52.03%**
64858	Direct Repair (sciatic)[4]	5431	$4,566	$1,842	**$1,946**	**-57.38%**	$1,920	$1,497	**$921**	**-52.03%**

1. National average payment rates. Commercial payments are traditionally 1.5-2x higher than Medicare.
2. Nerve allograft repair CPT 64912, conduit repair CPT 64910, autograft repairs hand/foot >4cm CPT 64891, arm/leg≤4cm CPT 64892, direct repair of facial nerve CPT 64865 remain in C-APC 5432 all continue to meet ASC device intensive criteria
3. Autograft repair head/neck >4cm CPT 64886 meets ASC device intensive criteria in 2025
4. Direct repair digital CPT codes 64831, brachial plexus/arm 64861, and sciatic 64858 remain in C-APC 5431 and do not meet ASC device intensive criteria and in 2025 direct repair sciatic 64858 lost device intensive status.
5. Autograft repair all other nerve type CPT 64895-96,98 and Direct repair other hand/foot CPT 64834-36, leg CPT 64840, repair/transpose CPT 64856, arm/leg CPT 64857, low back CPT 64862-64 remain in C-APC 5432 and do not meet ASC device intensive criteria
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Note: Hospital inpatient rates for nerve repair align to DRGs 040, 041, 042 and range from $11.4k to $24.5k in the 2025 IPPS Final Rule

2019-25 Center for Medicare and Medicaid Services (CMS): ***Proposed*** Physician Fee Schedule (PFS)

CPT Codes3	Descriptor	Physician Fee Schedule (PFS)			
		2019	2024	2025 Proposed	6Y % Change
64912	Nerve allograft repair	$804	$897	**$880**	9.40%
64910	Conduit or vein allograft repair	$825	$765	**$752**	-8.80%
64885 to 64898*	Autograft repair	$1,096 to $1,495	$1,053 to $1,427	**$1,032 to $1,400**	-5.84% to -6.36%
64831 to 64861*	Direct Repair	$713 to $1,604	$701 to $1,548	**$691 to $1,514**	-3.15% to -5.58%

*excludes add-on procedure codes

Balance sheet and capital structure

Balance Sheet Highlights	December 31, 2024
Cash	$39.5 million*
Total Long-term Debt	$50.0 million**

Capital Structure (shares)	December 31, 2024
Common Stock	44,148,836
Common Stock Options, RSUs, PSUs	9,247,567
Common Stock and Common Stock Equivalents	53,396,403

** Includes Cash, Cash Equivalents, Restricted Cash, and Investments*
*** Total long-term debt includes debt proceeds under the terms of the agreement with Oberland Capital does not include unamortized debt discount and deferred financing fees.*

Axogen comprehensive portfolio of products

Avance® Nerve Graft

- **Regulatory Classification:** Avance Nerve Graft is processed and distributed in accordance with US Food and Drug (FDA) requirements for Human Cellular and Tissue-based Products (HCT/P) under 21 CFR Part 1271 regulations, US State regulations, and applicable international regulations. Axogen Corporation is accredited by the American Association of Tissue Banks (AATB). Additionally, international regulations are followed as appropriate.
- **Indication for Use:** Avance Nerve Graft is processed nerve allograft (human) intended for the surgical repair of peripheral nerve discontinuities to support regeneration across the defect.
- **Contraindications:** Avance Nerve Graft is contraindicated for use in any patient in whom soft tissue implants are contraindicated. This includes any pathology that would limit the blood supply and compromise healing or evidence of a current infection.

Axoguard Nerve Connector®

- **Regulatory Classifications:** Class II Medical Devices - 510(k) cleared, Class III Medical Devices, CE Marked (EU), Class 4 (CA)
- **Indications for Use (US):** The Axoguard Nerve Connector is indicated for the repair of peripheral nerve discontinuities where gap closure can be achieved by flexion of the extremity. The Axoguard Nerve Connector is supplied sterile and is intended for single use.
- This product is intended for use by trained medical professionals.
- **Indications for Use (EU and UK):** The Axoguard Nerve Connector is indicated for the repair of peripheral nerve discontinuities with gaps up to 5 mm. The Axoguard Nerve Connector is supplied sterile and is intended for single use.
- This product is intended for use by trained medical professionals.
- **Contraindications:** This device is derived from a porcine source and should not be used for patients with known sensitivity to porcine material. This device is not intended for use in vascular applications.

Axoguard Nerve Protector®

- **Regulatory Classifications:** Class II Medical Devices - 510(k) cleared, Class III Medical Device, CE Marked (EU), Class 4 (CA)
- **Indication for Use:** Axoguard Nerve Protector is indicated for the repair of peripheral nerve injuries in which there is no gap. The Axoguard Nerve Connector is supplied sterile and is intended for single use.
- This product is intended for use by trained medical professionals.
- **Contraindications:** This device is derived from a porcine source and should not be used for patients with known sensitivity to porcine material. This device is not intended for use in vascular applications.

Axogen comprehensive portfolio of products (Cont'd)

Axoguard Nerve Cap®

- **Regulatory Classification:** Class II Medical Device – 510(k) cleared
- **Indications for Use**: Axoguard Nerve Cap is indicated to protect a peripheral nerve end and to separate the nerve from the surrounding environment to reduce the development of symptomatic or painful neuroma.
- This product is intended for use by trained medical professionals.
- **Contraindications:** Axoguard Nerve Cap is derived from a porcine source and should not be used for patients with known sensitivity to porcine derived materials. Axoguard Nerve Cap is contraindicated for use in any patient for whom soft tissue implants are contraindicated; this includes any pathology that would limit the blood supply and compromise healing, or evidence of a current infection. Axoguard Nerve Cap should not be implanted directly under the skin. This device is not intended for use in vascular applications.

• Axoguard HA+ Nerve Protector™

- **Regulatory Classifications:** Class II Medical Devices - 510(k) cleared (K223640)
- **Indication for Use:** Axoguard HA+ Nerve Protector is indicated for the management of peripheral nerve injuries where there is no gap.
- This product is intended for use by trained medical professionals.
- **Contraindications:** Axoguard HA+ Nerve Protector base membrane is derived from a porcine source and the lubricant coating is composed of sodium hyaluronate and sodium alginate. The Axoguard HA+ Nerve Protector should not be used for patients with known sensitivity to porcine, alginate, or hyaluronate materials. This device is not intended for use in vascular applications.

• Axoguard HA+ Nerve Protector™

- **Regulatory Classifications:** Class II Medical Devices - 510(k) cleared (K231708)
- **Indication for Use:** Axoguard HA+ Nerve Protector is indicated for the management of peripheral nerve injuries where there is no gap, or following closure of the gap.
- This product is intended for use by trained medical professionals.
- **Contraindications:** Axoguard HA+ Nerve Protector base membrane is derived from a porcine source and the lubricant coating is composed of sodium hyaluronate and sodium alginate. The Axoguard HA+ Nerve Protector should not be used for patients with known sensitivity to porcine, alginate, or hyaluronate materials. This device is not intended for use in vascular applications.

Axogen comprehensive portfolio of products (Cont'd)

Avive+ Soft Tissue Matrix™

- **Regulatory Classification:** Avive+ Soft Tissue Matrix is processed and distributed in accordance with US Food and Drug (FDA) requirements for Human Cellular and Tissue-based Products (HCT/P) under 21 CFR Part 1271 regulations, and US State regulations. Axogen Corporation is accredited by the American Association of Tissue Banks (AATB).
- **Intended Use**: Avive+ Soft Tissue Matrix is processed amniotic membrane intended for use as a soft tissue barrier.
- This product is intended for use by trained medical professionals.
- **Contraindications:** Avive+ Soft Tissue Matrix is contraindicated for use in any patient in whom soft tissue implants are contraindicated. This includes any pathology that would limit the blood supply and compromise healing or evidence of a current infection.

Footnotes

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Footnotes

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nasdaq: axgn