Nox Connect

Enabling connected, scalable sleep diagnostics with greater clinical and operational impact

May, 2026

LBL-0682 REV01

Intended Use (Slides no. 2-34)

The following slides (slides number 2-34) are intended to support Nox Distributor Partners with customer-facing discussions around the value and positioning of Nox Connect. It outlines the market opportunity and challenges shaping sleep diagnostics today, and how Nox Connect addresses these needs through connected workflows, intelligent insights, and scalable care delivery.

The presentation is designed to help guide conversations with healthcare providers by clearly articulating the clinical, operational, and business value of the platform, while supporting consistent messaging across markets.

Executive Summary

Nox Connect offers a connected approach to sleep diagnostics, addressing market needs and delivering meaningful impact for patients and providers

The Need for Connected Sleep Diagnostics

Healthcare providers face limited capacity and fragmented workflows, impacting efficiency and care quality

The market need for Nox Connect:

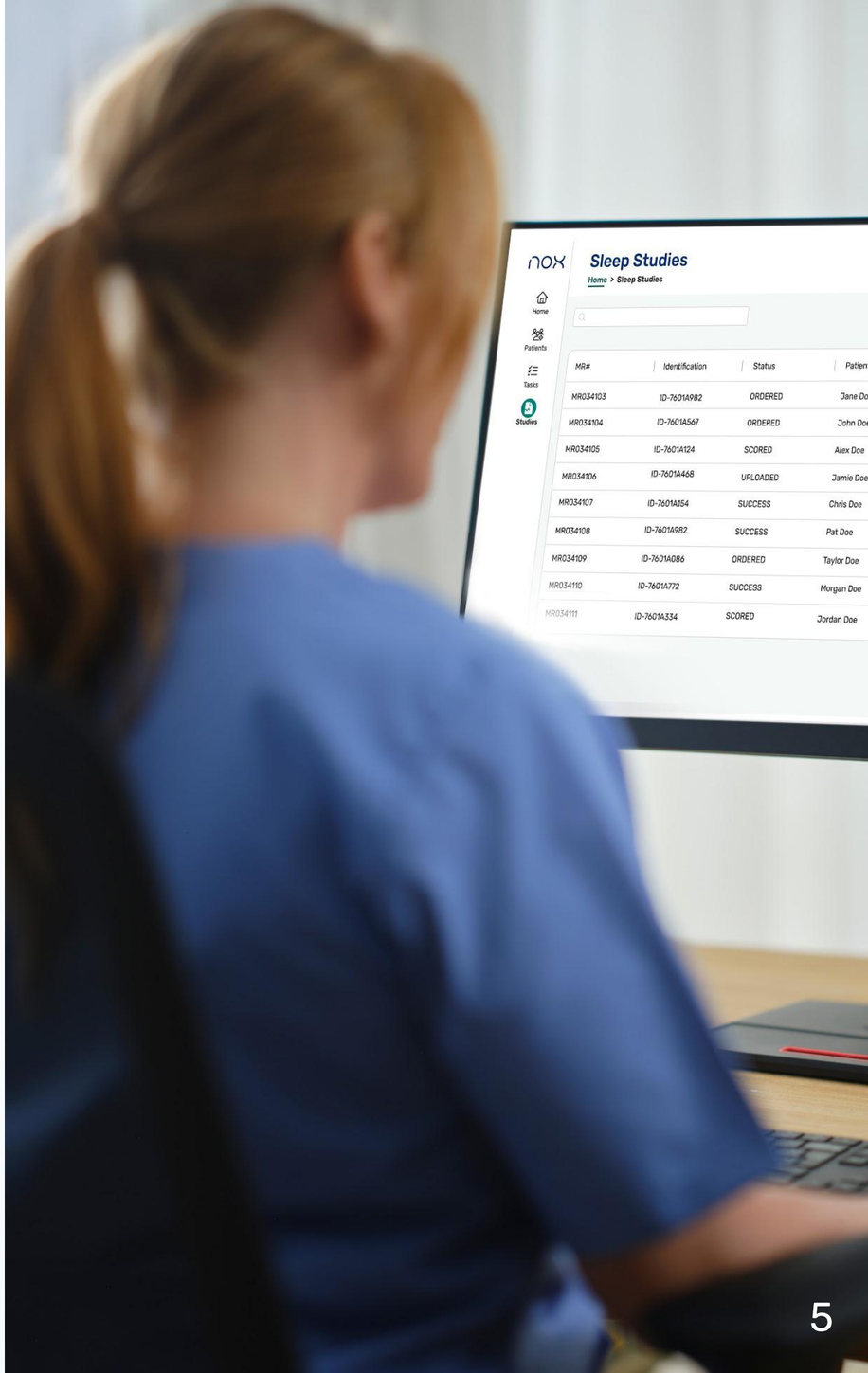
- Capacity constraints in sleep labs driving the need for workflow efficiency
- Underdiagnosis in certain populations drives demand for equitable diagnostics
- Fragmented workflows across devices, software, and logistics
- Dependence on local infrastructure with high IT overhead and limited scalability

Introducing the Nox Connect Cloud Platform

Growing demand and complexity require connected tools for efficient workflows and confident clinical decisions

How Nox Connect addresses this shift:

- Integrates devices, data management, and clinical workflows into a single platform
- Simplifies scoring, reviewing and storage of sleep studies across home and lab settings
- Provides access to advanced AI analyses that support diagnostic confidence
- Enables remote access and collaboration across sites with industry-leading security standards



1. The Market Need

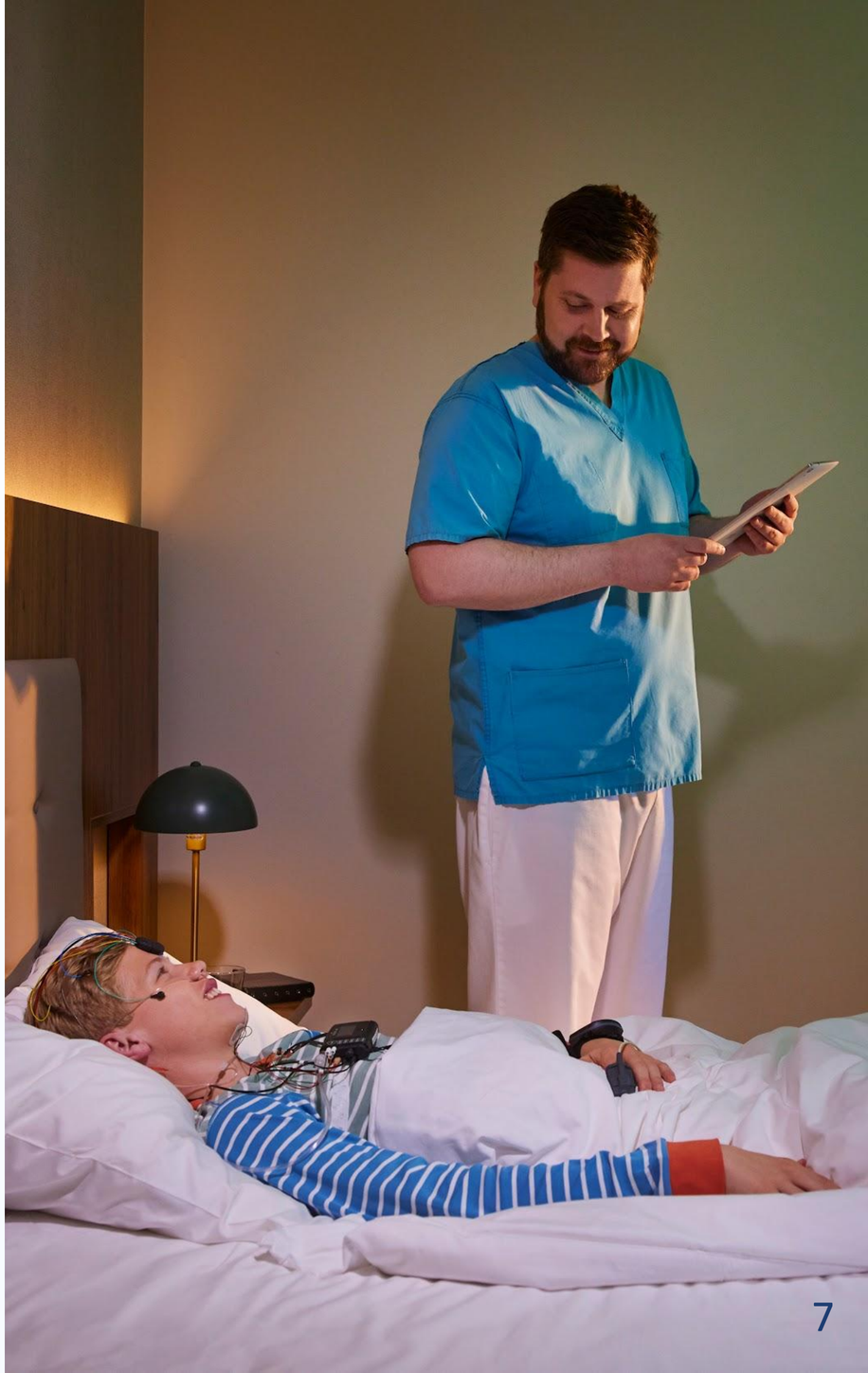
Industry trends driving the need for connected platforms in sleep diagnostics

Demand for Sleep Diagnostics is Outpacing Capacity

Growing patient volumes are straining sleep lab infrastructure and workflows

- Capacity limitations are restricting the ability to meet rising demand for sleep diagnostics
- Fragmented, manual workflows limit throughput and efficiency
- Limited staff resources further constrain the ability to scale testing and manage growing volumes

>> **Connected diagnostics enable providers to scale capacity, streamline workflows, and meet rising demand without compromising care quality**



Fragmented Workflows Create Operational Inefficiencies

Disconnected systems across devices, software, and logistics slow down care delivery

- Disconnected systems across devices, software, and data management create workflow inefficiencies
- Limited interoperability slows down study processing and clinical decision-making
- Manual data handling increases administrative burden and risk of errors
- Lack of integration reduces visibility across the patient pathway

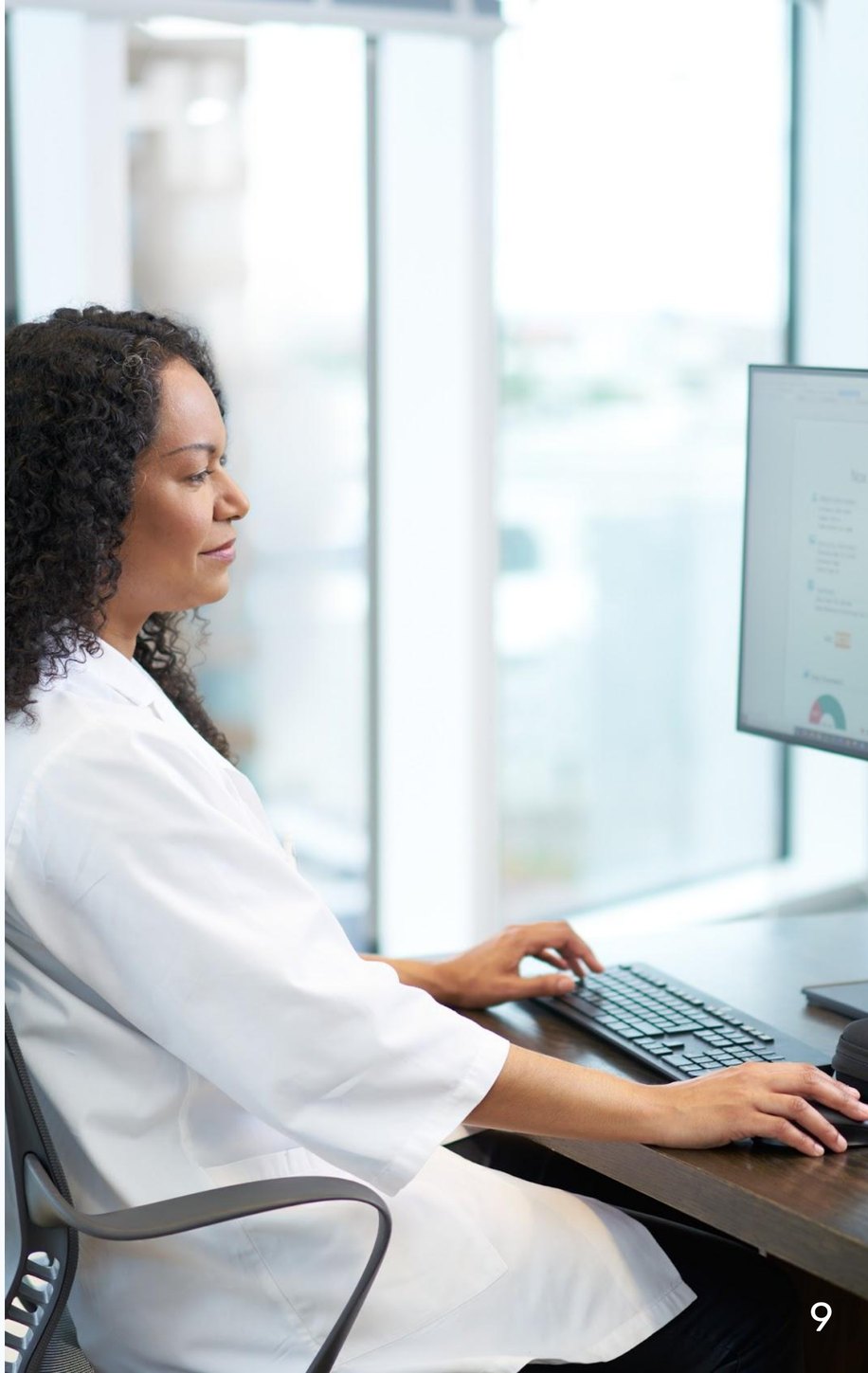
>> Connected diagnostics unify workflows, reduce complexity, and enable faster, more efficient care delivery

Underdiagnosis and Inconclusive Tests Impact Patient Outcomes

Incomplete sleep diagnostics lead to missed or delayed treatment

- Traditional home sleep testing methods can result in false negatives, missing clinically significant OSA
- Underdiagnosis remains high in certain populations, including women, younger patients, non-obese, and patients with comorbidities
- Inaccurate or incomplete tests often lead to retesting, increasing treatment delays and resource use

>> **More accurate, equitable, and conclusive diagnostics are essential to reduce underdiagnosis, minimize retesting, and enable confident clinical decision-making**



Addressing OSA Underdiagnosis in Traditional Home Sleep Testing

Misclassification as negative by traditional HSAT compared to PSG

- Traditional home sleep testing (HSAT) can significantly underestimate OSA severity, leading to missed or underdiagnosed cases
- This analysis shows how 5,570 real-world PSG studies would be scored using traditional HSAT criteria (without sleep staging or arousal scoring)[1]
- The highlighted red area represents patients misclassified as negative or mild OSA by HSAT, despite having moderate or severe OSA on PSG

>> **Patients with moderate to severe OSA may go untreated due to false negative HSAT results, underscoring the need for more accurate sleep diagnostics**

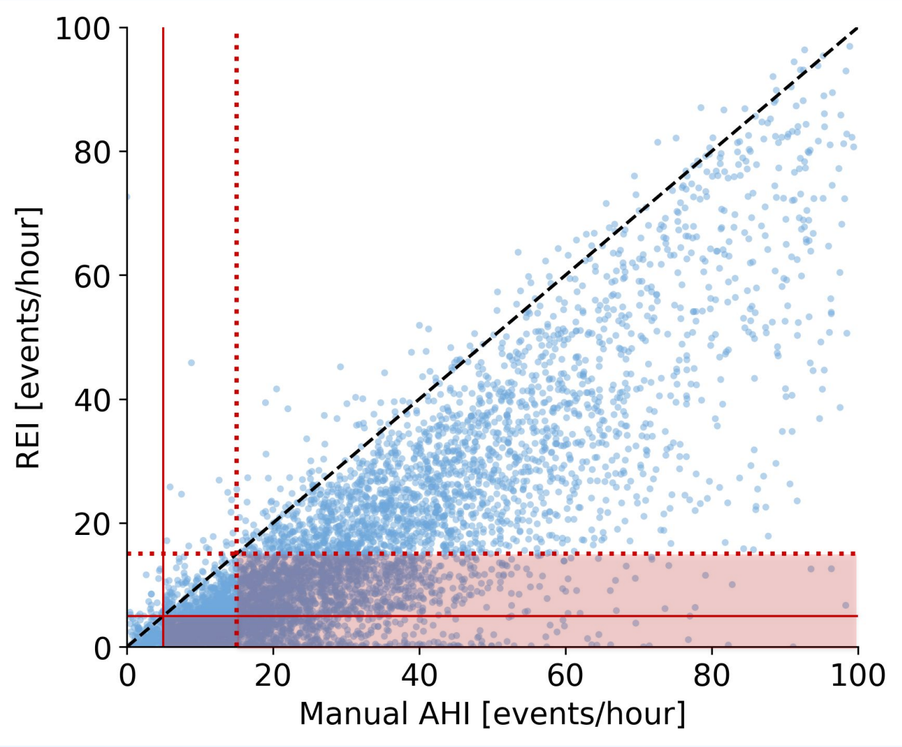


Image: The red lines indicate AHI thresholds of 5 (solid line) and 15 (dotted line)

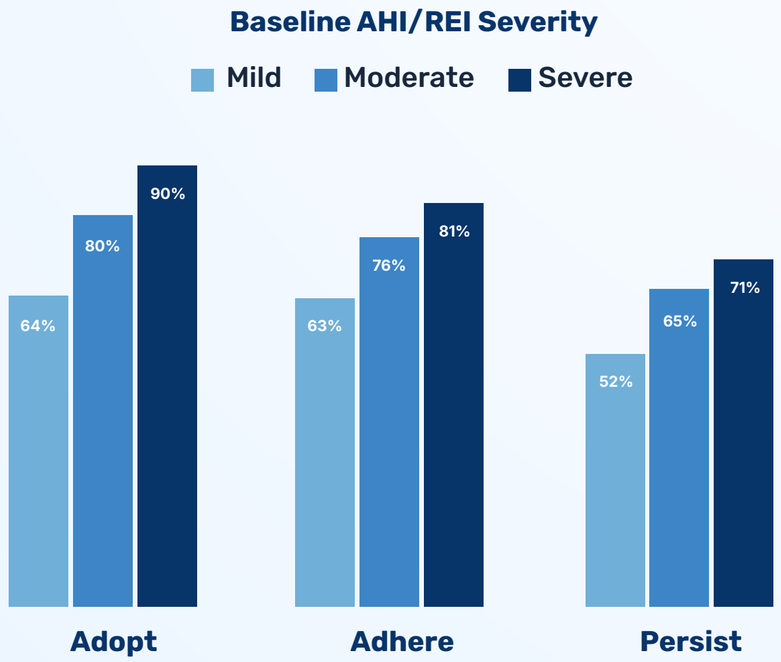
1. Accuracy: 90.6% (AHI ≥ 5) and 81.7% (AHI ≥ 15). Performance based on clinical validation studies included in the clinical evaluation supporting CE marking under EU MDR (2017/745); data also submitted in FDA 510(k) K252330. The graph shows results from 5570 studies, excluding 201 studies with extreme AHI values of >100 for interpretability

The Right Diagnosis Drives Long-Term Therapy Success

Accurate OSA severity classification impacts PAP adoption, 1-year adherence, and 2-year persistence

- Patients with more severe OSA are significantly more likely to engage with therapy, with adoption rising by up to 26 percentage points and adherence by up to 18 percentage points from mild to severe
- Misclassification can lead to undertreatment and lower adoption and adherence[1-3]
- Accurate diagnosis helps ensure the right patients start and stay on therapy

>> **Accurate and conclusive diagnosis is critical to help ensure the right patients start therapy and remain adherent long term**



n = 2,784

1 year adherence:
% of patients using PAP one year after adoption out of the patients who initially started PAP.

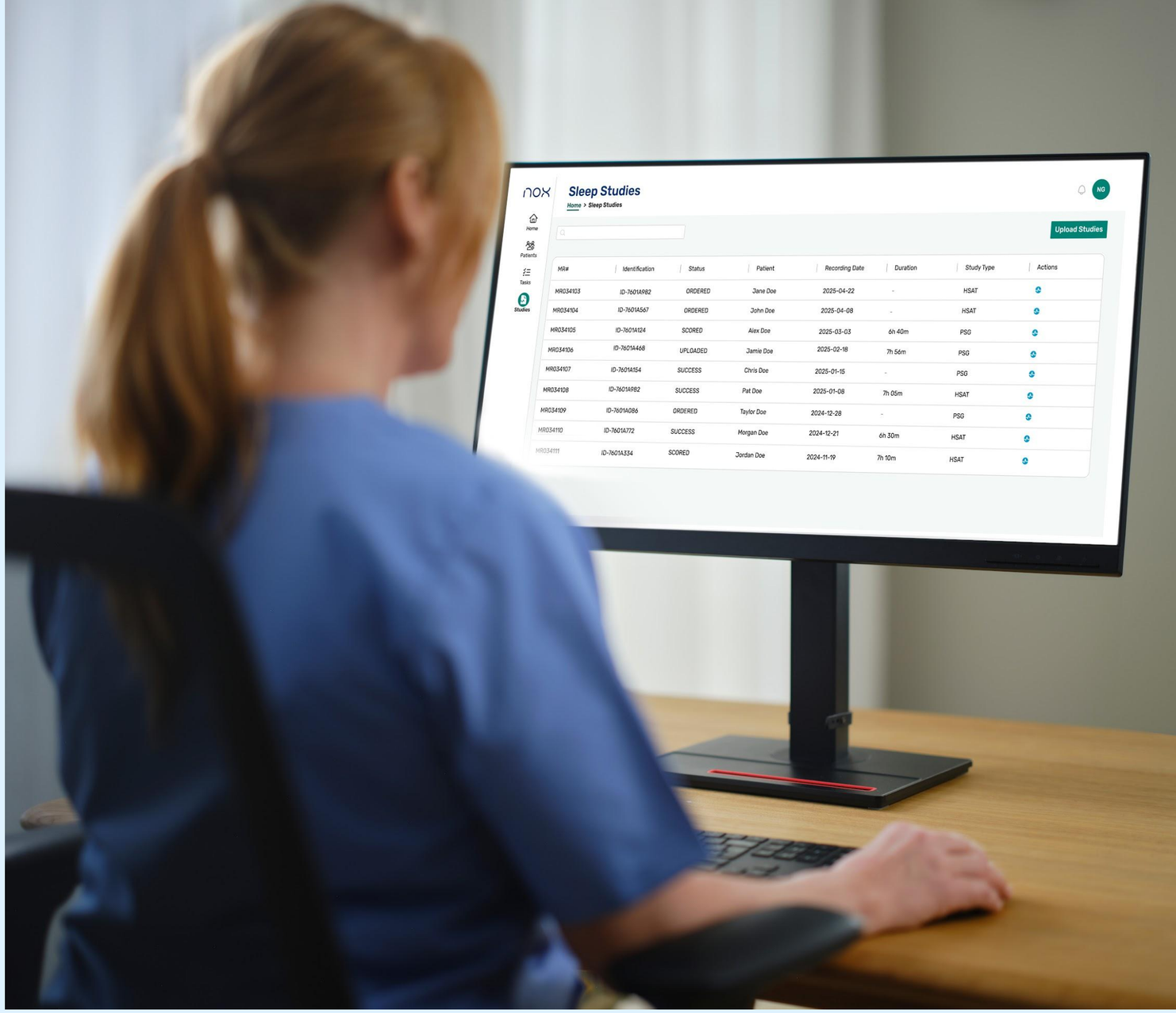
2 year persistence:
% of patients using PAP two years after adoption out of the patients who initially started PAP.

1 Bianchi MT et al. J Clin Sleep Med. 2017 Apr 15;13(4):551-555. doi: 10.5664/jcsm.6540.
2 Kapur VK et al. J Clin Sleep Med. 2017 Mar 15;13(3):479-504. doi: 10.5664/jcsm.6506.
3 Thornton CS et al. JAMA Netw Open. 2020;3(4):e203088. doi:10.1001/jamanetworkopen.2020.3088

The data presented originate from an unpublished cohort of 2,784 patients evaluated between 2016 and 2020. This was a non-regulated dataset in which treatment was not mandatory. Findings reflect internal data on file from the SleepCharge program by Nox Health.

2. The Solution

Nox Connect offers a unified cloud platform connecting devices, data, and clinical workflows

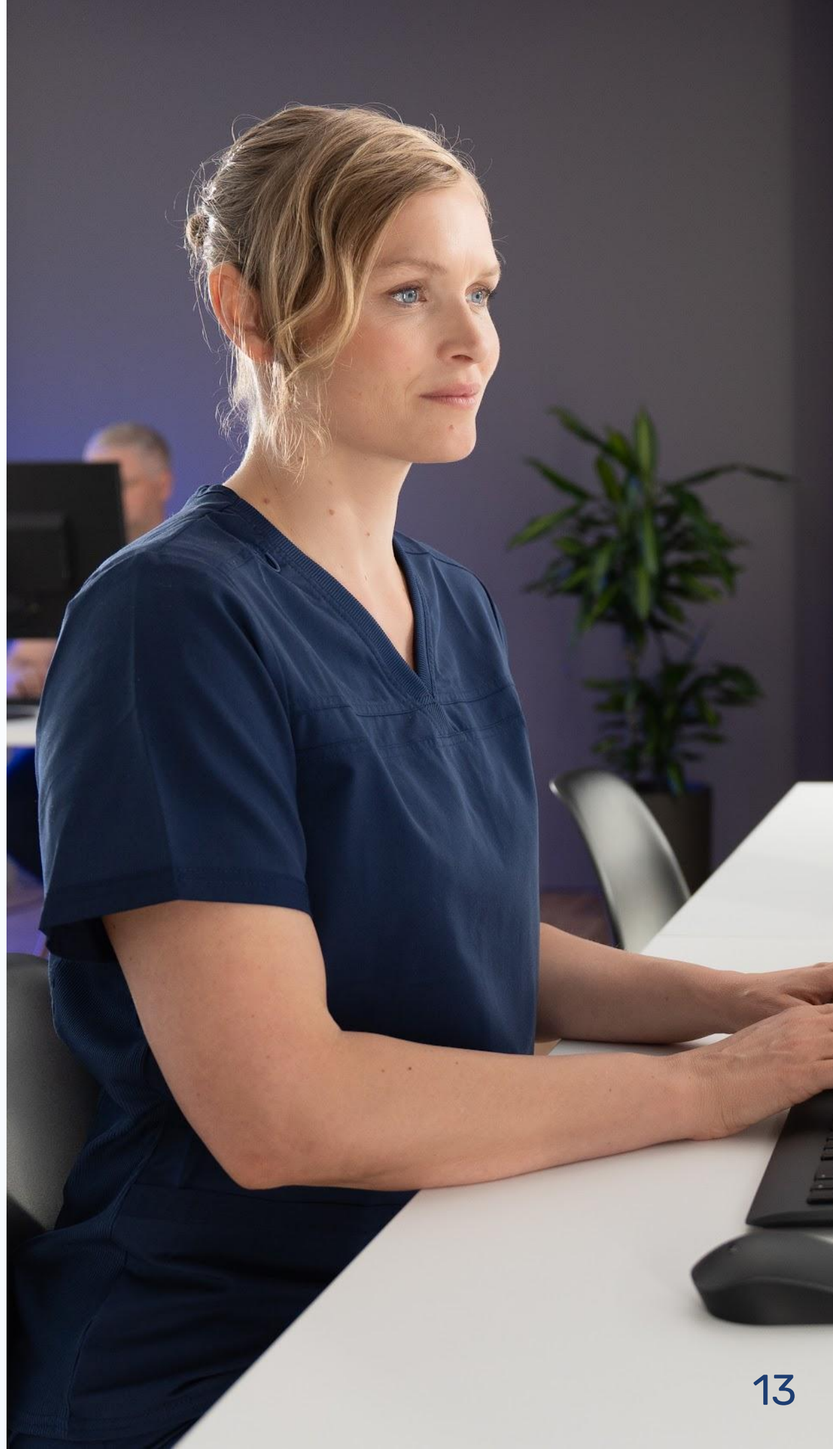


A Unified Platform for Sleep Diagnostics

Connecting people, data, and clinical workflows

Nox Connect’s Platform Capabilities:

- Connected teams and workflows for operational efficiency
- Centralized data management with industry-leading security standards
- Remote access to patient data, recordings, and tasks enables efficient workflows
- Web-based scoring and interpretation enable real-time access and collaboration[1]
- Access to AI-assisted scoring and insights that aid in the diagnosis of sleep disorders[1]
- Cloud infrastructure that simplifies scaling and reduces IT friction



1 AI-assisted scoring is performed by DeepRESP and Web-based scoring and interpretation are through Noxturnal Web.

nox CONNECT

A cloud-based platform that enables secure data storage, sharing, collaboration, and interpretation while providing access to medical software for sleep scoring and AI analysis

Noxturnal Web (SaMD)

DeepResp AI (SaMD)

1

Create a patient profile with customizable identifiers that follow the patient throughout the entire testing process

noxturnal **(SaMD)**

2

Create a sleep study and configure the device through a native integration with Noxturnal

3

Upload the study to a secure centralized cloud storage

4

Assign a scoring team, allocate tasks and customize roles—with real-time collaboration for scorers

4

Remote access to authorized users for flexibility in staffing

5

Access DeepResp, a suite of AI scoring tools and parameters, including Nox BodySleep™ (v.2) that scores arousals and sleep stages from a home sleep study

6

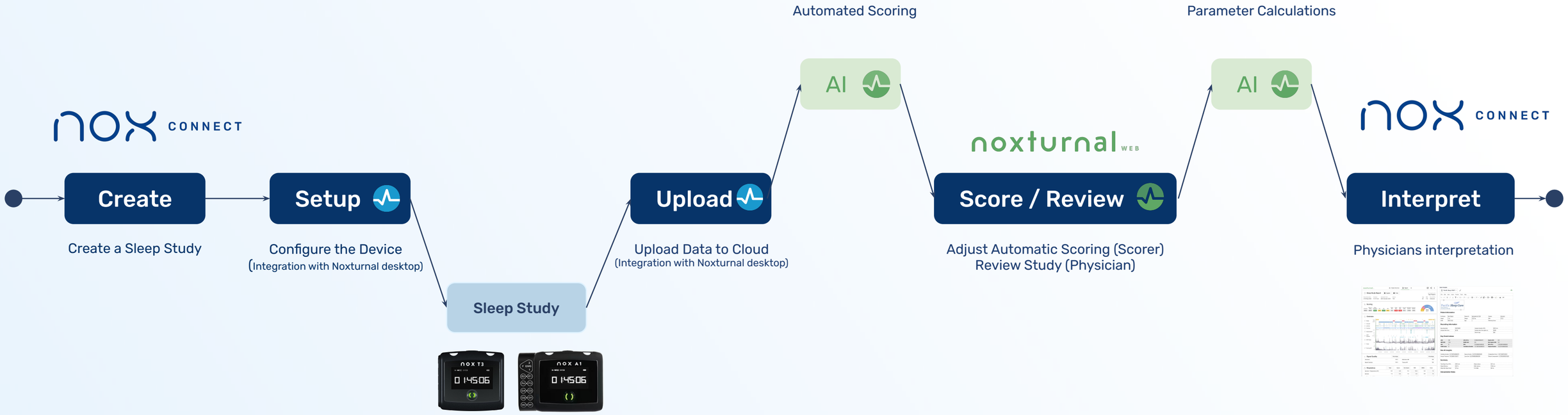
Access Noxturnal Web and stay in full control —edit, score or delete DeepResp-scored events, or score the study manually

7

Physicians access an interpretation dashboard to review the full study, build customizable report, and authenticate the study with an electronic signature

Platform | OSA Diagnostic Pathway

A cloud-based workflow with integration across medical software and native connectivity to the desktop version of Noxturnal for device configuration and data transfer

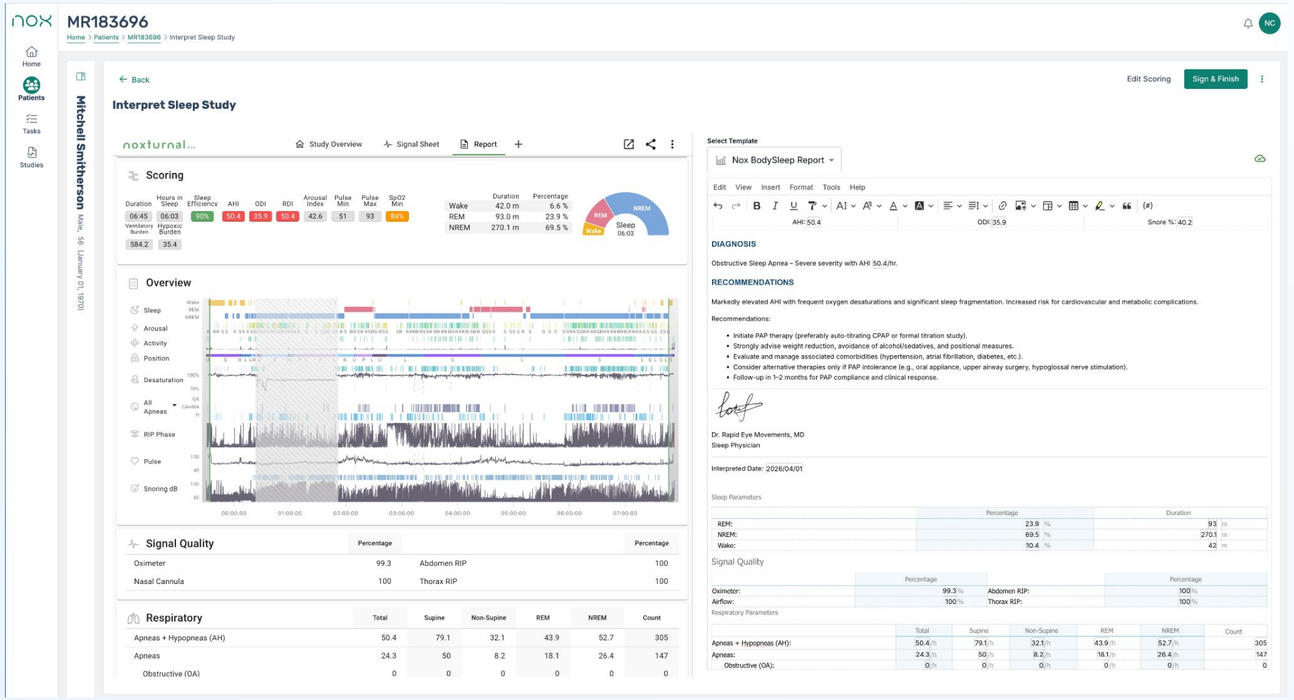


Platform | Physician Interpretation Dashboard

A unified workspace for reviewing data, AI insights, and generating clinical reports

Nox Connect’s Interpretation Dashboard:

- Study data and reports in one streamlined view, eliminating the need to navigate between tabs, documents, and files
- Standard and customer-specific report formats to match clinical workflows
- Derived physiological metrics such as hypoxic and ventilatory burden as reportable parameters
- Structured content and snippets to support efficient, consistent clinical reporting, including automated report generation and physician signature integration



Nox AI | Unlock Advanced AI

Through Nox Connect, healthcare providers access novel artificial intelligence designed to support clinical decisions

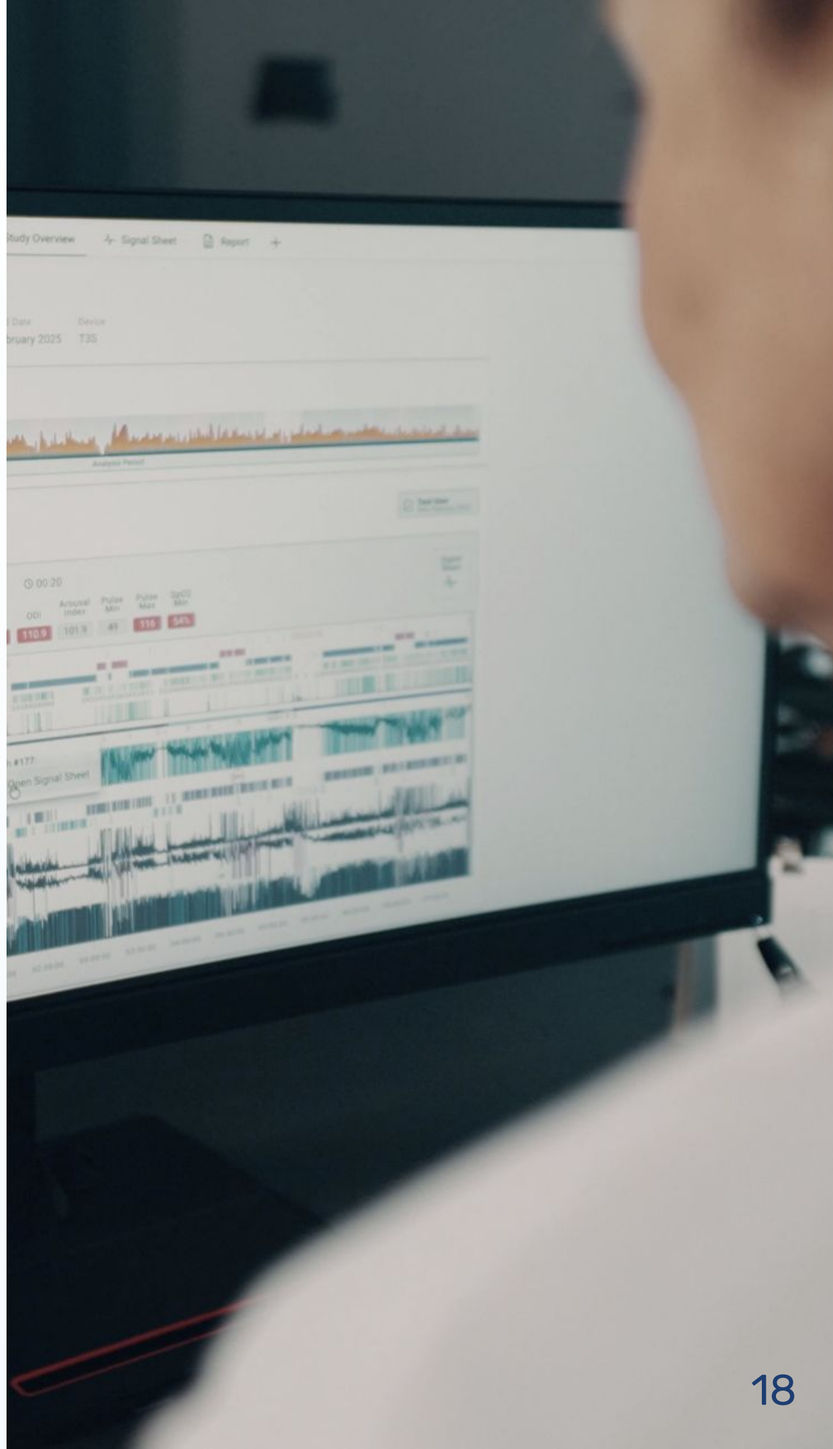
- Accessible within Nox Connect and integrated with clinical workflow for efficient review and interpretation
- Allows healthcare providers to go beyond traditional metrics with deeper insights into patient physiology and sleep-disordered breathing
- Designed to address known limitations of HSAT and support more consistent, informed clinical decisions

Nox AI | Introducing DeepResp

Artificial Intelligence that drives clinical confidence

What DeepResp is and what it enables:

- A suite of CE-marked and FDA-cleared[1] AI tools using validated analysis, including Nox BodySleep™ (v.2), to generate clinical insights, complemented by advanced research metrics such as OSA Endotyping, Hypoxic Burden, and Ventilatory Burden[2]
- Uses deep learning to analyze RIP signals and automatically score sleep states (NREM, REM, Wake) and arousals from home sleep tests - No EEG required
- DeepResp v.2 refers to the latest version of the DeepResp algorithm, with enhancements and performance improvements over earlier versions



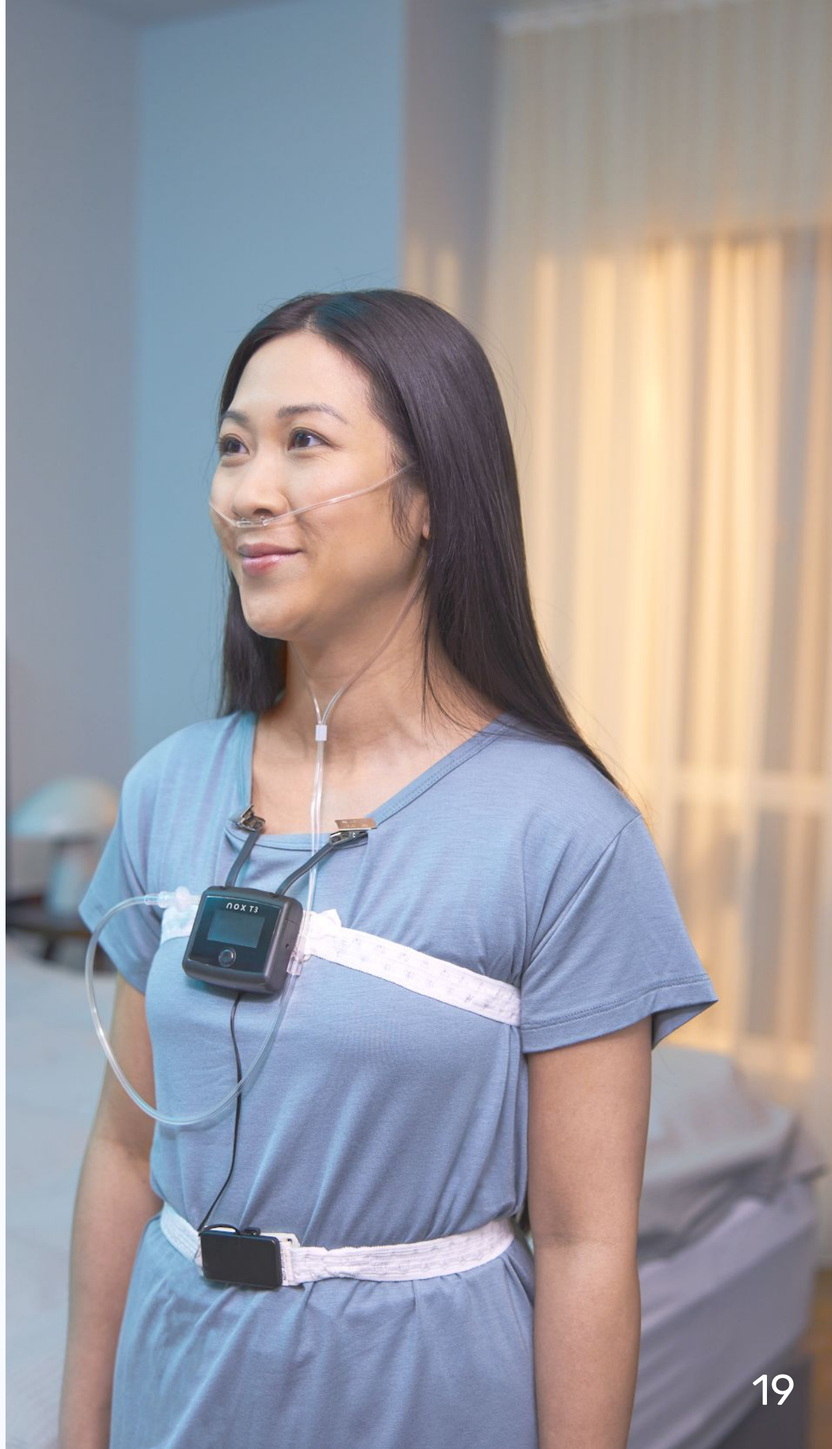
1 US Food and Drug Administration 510(k) summary: K252330 [DeepRESP 2.0]
2 The research AI tools are not intended for clinical decision-making and are not supported by clinical claims. They are provided for informational purposes only.

Nox AI | Clinical Performance of DeepResp

Improving scoring accuracy and addressing gaps in traditional HSAT

- Supports fewer inconclusive HSAT results by providing an AHI that closely aligns with PSG[1] for reducing false-negative results and more accurate severity classification
- Helps address a limitation of HSAT where arousal-related hypopneas otherwise go unrecognized, especially relevant for diverse populations, including women, younger, and non-obese patients[2]
- Enables a reduction in retesting and delays, helping eligible patients start appropriate treatment[3]
- Identifies and scores sleep stages, respiratory events and arousals in HSAT. Clinicians retain full scoring control and may review confidence levels and adjust events prior to diagnosis.

>> DeepResp supports more accurate, equitable, and conclusive diagnostics that reduce underdiagnosis, minimize retesting, and enable confident clinical decision-making



1. Accuracy: 90.6% (AHI ≥ 5) and 81.7% (AHI ≥ 15). Performance based on clinical validation studies included in the clinical evaluation supporting CE marking under EU MDR (2017/745); data also submitted in FDA 510(k) K252330.
2. Berry RB, Abreu AR, Krishnan V, Quan SF, Strollo PJ Jr, Malhotra RK. A transition to the American Academy of Sleep Medicine–recommended hypopnea definition in adults: initiatives of the Hypopnea Scoring Rule Task Force. J Clin Sleep Med. 2022;18(5):1419–1425.
3 Thornton CS et al. JAMA Netw Open. 2020;3(4):e203088. doi:10.1001/jamanetworkopen.2020.3088

Nox AI | Clinically Validated Accuracy Across OSA Severity

DeepResp HSAT performance validated across ~5,800 recordings

AHI/REI ≥ 5 (Mild to severe OSA)	With cannula	Without cannula	With cannula
	DeepResp (v.2) AHI		Noxturnal REI (3,488 recordings)
PPA Sensitivity (True Positive Rate)	91%	93.7%	82.4%
NPA Specificity (True Negative Rate)	78%	63.5%	56.6%

AHI/REI ≥ 15 (Moderate to Severe OSA)	With cannula	Without cannula	With cannula
	DeepResp (v.2)		Noxturnal REI (3,488 recordings)
PPA Sensitivity (True Positive Rate)	71.8%	81%	60.4%
NPA Specificity (True Negative Rate)	93.9%	91.1%	89.3%

DeepResp v.2 (version 2 K252330) denotes the updated version of the DeepResp SaMD, including modifications and performance improvements relative to earlier versions.

- High true positive detection across OSA severity (91–93.7% sensitivity for mild; 71.8–81% for moderate–severe) while maintaining strong specificity (up to 91.1%), helping rule out non-OSA cases and reduce unnecessary follow-up
- Arousal scoring shows 64% positive, 90.5% negative, and 83.1% overall percentage agreement, with an Arousal Index ICC of 0.74-0.76 comparable to expert scoring. DeepResp reflects the known variability of arousal scoring, even among trained professionals[1–4].

>> **DeepResp is a clinically validated tool that supports confident, accurate decision-making. It improves true case detection, reducing the risk of underdiagnosis without increasing the risk of overdiagnosis, and delivers reliable results that support consistent patient care**

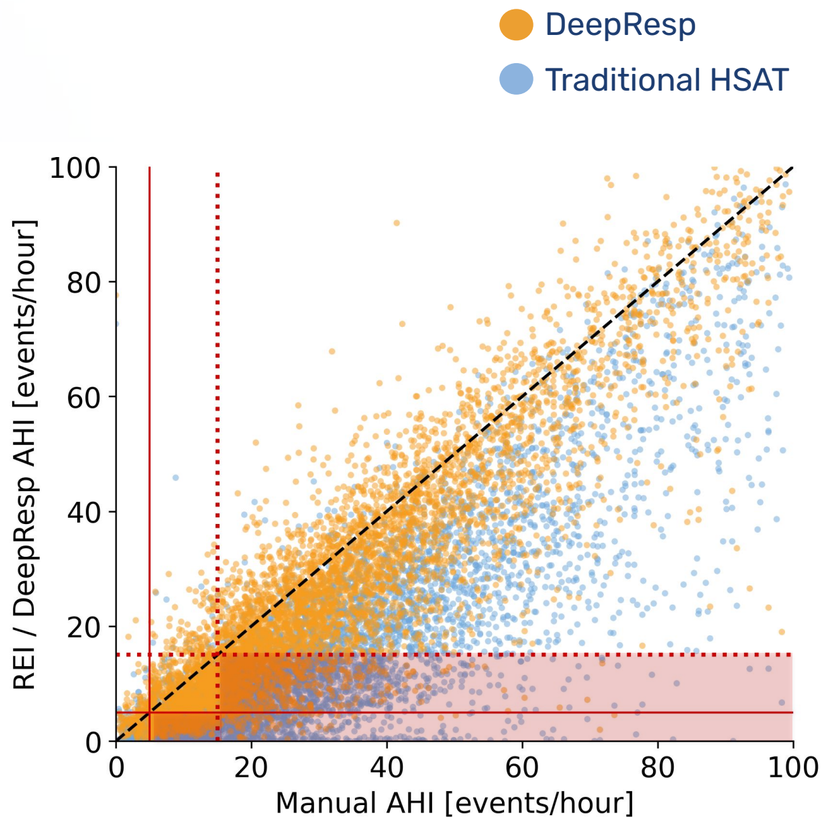
1. Pitkänen H et al. *J Sleep Res*. 2024.
2. Magalang UJ et al. *Sleep*. 2013.
3. Alvarez-Estevez D et al. *Sleep Med*. 2019.
4. Brink-Kjaer A et al. *Clin Neurophysiol*. 2020.

Nox AI | DeepResp Helps Close the Diagnostic Gap in Home Sleep Testing

Close agreement with PSG enables more accurate OSA diagnosis

- This analysis compares how 5,571 real-world PSG studies are classified using traditional HSAT (blue) versus DeepResp (yellow)[1]
- The highlighted red area shows where DeepResp reduces HSAT misclassification of moderate-to-severe OSA as negative or mild

>> DeepResp helps close the HSAT diagnostic gap by delivering an AHI closely aligned with PSG[1], results, ensuring patients with clinically significant OSA are correctly identified



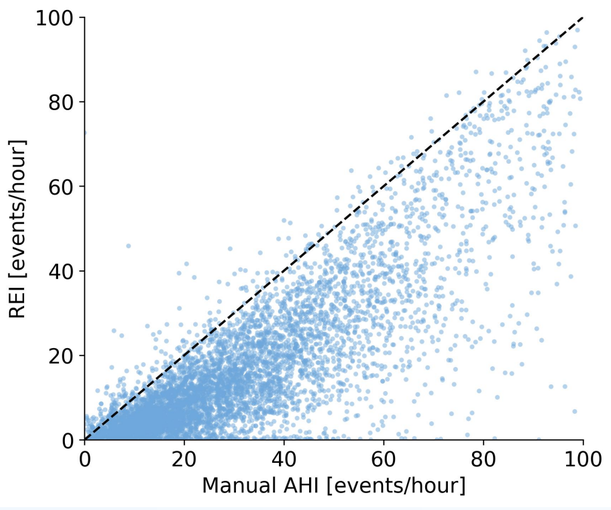
1. Accuracy: 90.6% (AHI ≥ 5) and 81.7% (AHI ≥ 15). Performance based on clinical validation studies used in the clinical evaluation supporting CE marking under EU MDR (2017/745); data also submitted in FDA 510(k) K252330. The graph shows results from 5571 studies, excluding 201 studies with extreme AHI values of >100 for interpretability

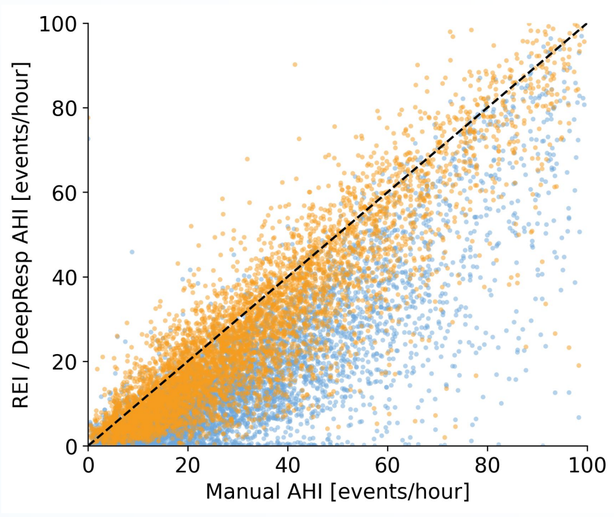
Image: The red lines represent AHI = 5 (solid line) and AHI = 15 (dotted line)

Nox AI | DeepResp Helps Close the Diagnostic Gap in Home Sleep Testing

Close agreement with PSG enables more accurate OSA diagnosis

- In a cohort of 5,771 real-world patients[1], traditional HSAT correctly identified OSA severity (mild to severe) in 77% of cases, **missing nearly 1 in 4 patients**
- DeepResp improves diagnostic **alignment with PSG to 92%,** significantly reducing missed or underestimated cases - a **15% improvement**
- In a cohort of 5,771, this translates to 827 additional patients correctly classified using DeepResp compared to traditional HSAT





1. Performance based on a secondary analysis of data used in the clinical evaluation supporting CE marking under EU MDR (2017/745); data also submitted in FDA 510(k) K252330. The graph shows results from 5771 studies, excluding 201 studies with extreme AHI values of >100 for interpretability

Nox AI | Reclassification That Changes Who Gets Treated

DeepResp reveals patients previously classified as normal or mild who meet criteria for treatment

Initial REI Classification	Number of Patients Reclassified to AHI ≥ 15 with DeepResp	% of Total Dataset (n=3,094)
REI Normal (REI 0-5)	27 patients	0.87%
REI Mild (REI 5-14)	700 patients	22.6%

- In an analysis of 3,094 real-world patient studies, the impact of DeepResp scoring on OSA severity classification was assessed relative to traditional HSAT metrics

>> **DeepResp identifies nearly 1 in 4 patients (727 patients; 23.5% of the dataset[1]) as having clinically significant OSA (AHI ≥15) who would likely be missed with traditional HSAT, enabling more appropriate treatment decisions**

1 Based on internal data using DeepResp 1.1 (K241960) within SleepCharge and FusionSleep by Nox Health

Nox AI | Reclassification That Changes Care for Women

DeepResp identifies accurate severity levels in women who may have traditionally been underserved in diagnosis and treatment

Initial REI Classification	Number of Patients Reclassified to AHI ≥ 15 with DeepResp	% of Total Dataset (n=1,094)
REI Normal (REI 0-5)	14 women	1.22%
REI Mild (REI 5-14)	269 women	23.5%

- OSA in women is frequently underdiagnosed and underrecognized, often presenting with subtler or atypical symptoms that are less reliably captured by traditional HSAT metrics
- Using real-world data, including 1,094 women, DeepResp reveals a meaningful shift in detection for female patients

>> **DeepResp helps uncover clinically significant OSA in women. Nearly 1 in 4 women (283 patients; 24.7%[1]) were reclassified from mild to moderate OSA (AHI ≥15) who may otherwise have remained undiagnosed or untreated**

1 Based on internal data using DeepResp 1.1 (K241960) within SleepCharge and FusionSleep by Nox Health

Nox AI | Reclassification That Reveals the Full Clinical Picture

DeepResp shifts patients into clinically meaningful categories

		DeepResp (v.1) AHI				
		0-5	**5-10**	**10-15**	**≥ 15**	**Total**
HSAT REI	**0-5**	**36**	201	87	27	**351**
	5-10	1	**103**	236	259	**599**
	10-15	0	1	**50**	441	**492**
	≥ 15	0	1	4	**1647**	**1652**
	Total	**37**	**306**	**377**	**2374**	**3094**

DeepResp v.1.1 (version 1) denotes the updated version of the DeepResp MSaaD, including modifications and performance improvements relative to earlier versions.

- In an analysis of 3,094 patient studies, DeepResp systematically reclassified OSA severity compared to traditional HSAT[1]
- 727 patients (23.5%) were reclassified into the clinically actionable ≥15 AHI range; these patients may have been left undiagnosed or untreated based on HSAT alone
- 323 patients (10.44%) were reclassified into the 10–15 range, indicating a broader upward correction in disease severity
- Nearly 90% of patients (315 patients; 89,7%) with inconclusive HSAT results are reclassified to AHI ≥5, transforming inconclusive results into clinically meaningful diagnoses

>> **DeepResp does not just refine scoring—it may uncover more severe and actionable disease, reducing missed diagnoses,-supporting conclusive results, and thereby helping more people receive proper treatment recommendations**

1 Based on internal data using DeepResp 1.1 (K241960) within SleepCharge and FusionSleep by Nox Health

3. The Impact

Nox Connect can help improve patient outcomes through more accurate diagnoses while streamlining workflows for providers

Operational Impact That Can Support Business Performance

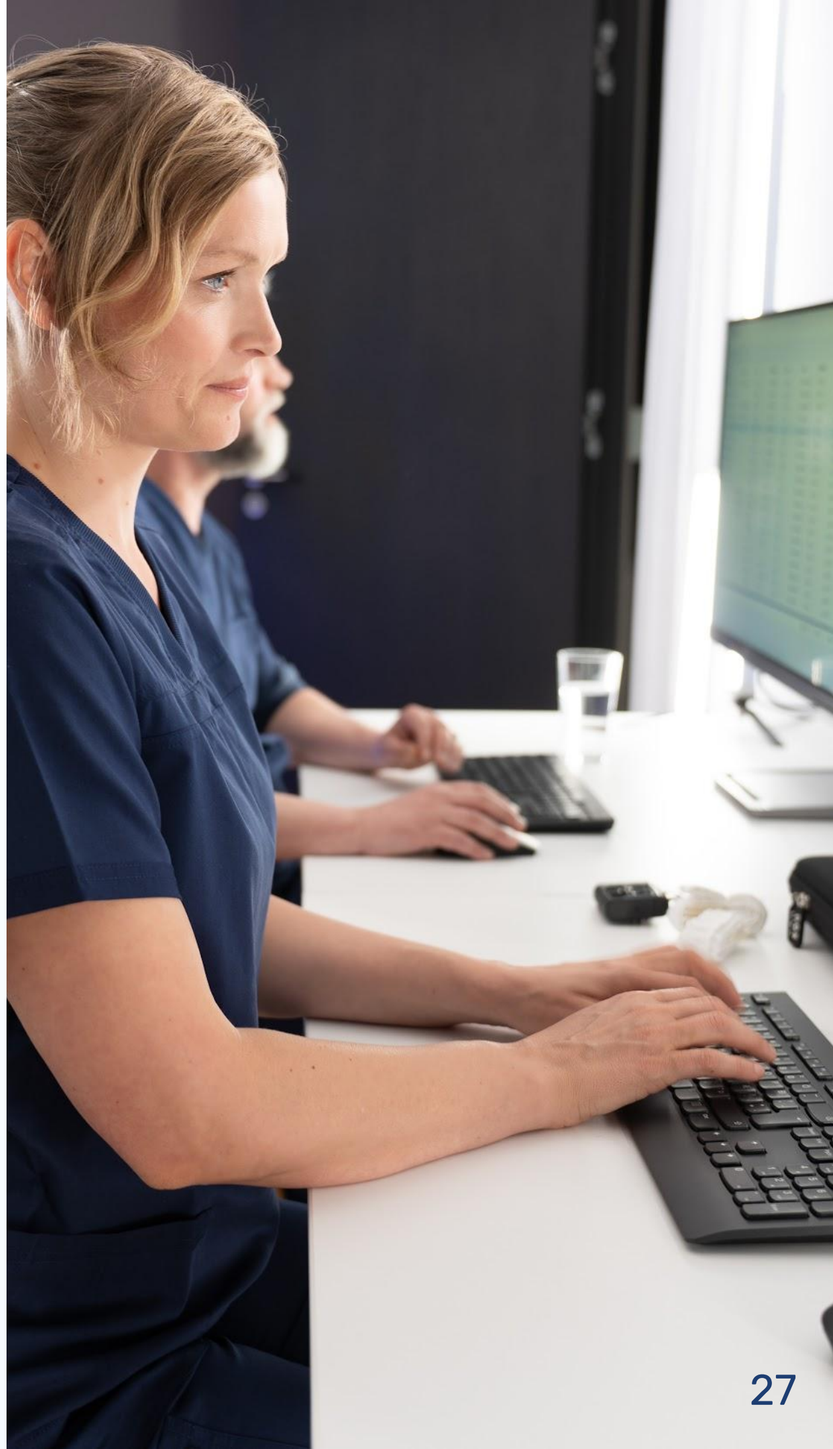
Streamlining workflows and scaling diagnostics to improve efficiency across sleep operations

Nox Connect is designed to support:

Operational Efficiency → Reduced scoring time with access to reliable automated analysis, increased throughput, fewer repeat studies, and lower IT complexity and infrastructure costs

Connected Operations → Secure, multi-site access and collaboration across sleep technologists, physicians, administrative, and referring providers within a unified platform

Visibility and Control → Real-time insights into testing volume and performance while ensuring data security and compliance (GDPR) through a centralized system



Clinical Impact that Supports Better Patient Outcomes

Improving diagnostic confidence to support treatment decisions and long-term patient outcomes

DeepResp is designed to support:

Reduced Inconclusive Results & False Negatives → Ability to score sleep stages and arousals, in addition to respiratory events, provides an AHI from HSAT closely aligned with a PSG study, significantly reducing inconclusive or false-negative HSAT

Expanded Identification of Treatment-Eligible Patients → DeepResp identifies as many as nearly 1 in 4 patients with clinically significant OSA who would likely be missed by traditional HSAT[1]

Improved Treatment Initiation Rate → Accurate diagnosis reduces false negatives and reduces patient drop-offs at diagnosis, helping more eligible patients start therapy[2,3]

1. Based on internal data using DeepResp 1.1 (K241960) within SleepCharge and FusionSleep by Nox Health

2. As a result of scoring sleep stages and arousals, in addition to respiratory events, DeepRESP provides an AHI from HSAT comparable to a PSG study. DeepRESP therefore significantly reduces inconclusive or false-negative home sleep studies.

3 Thornton CS et al. JAMA Netw Open. 2020;3(4):e203088. doi:10.1001/jamanetworkopen.2020.3088

Appendix

Assets highlighting Nox Connect’s workflows and value benefits

Nox Connect Workflow Overview

*Nox Medical devices are CE marked in accordance with applicable European Union legislation.

Nox Connect Commercial (US Market)

References

Alvarez-Estevez D et al. Sleep Med. 2019.

Berry RB, Abreu AR, Krishnan V, Quan SF, Strollo PJ Jr, Malhotra RK. A transition to the American Academy of Sleep Medicine–recommended hypopnea definition in adults: initiatives of the Hypopnea Scoring Rule Task Force. J Clin Sleep Med. 2022;18(5):1419–1425.

Bianchi MT, Goparaju B. Potential Underestimation of Sleep Apnea Severity by At-Home Kits: Rescoring In-Laboratory Polysomnography Without Sleep Staging. J Clin Sleep Med. 2017 Apr 15;13(4):551-555. doi: 10.5664/jcsm.6540. https://link.springer.com/article/10.5664/jcsm.6540

Brink-Kjaer A et al. Clin Neurophysiol. 2020.

Clinical Evaluation Data supporting CE marking under EU MDR (2017/745) and FDA 510(k) K252330.

Internal Data using DeepResp 1.1 (K241960) within SleepCharge and FusionSleep by Nox Health

Kapur VK, Auckley DH, Chowdhuri S, Kuhlmann DC, Mehra R, Ramar K, Harrod CG. Clinical Practice Guideline for Diagnostic Testing for Adult Obstructive Sleep Apnea: An American Academy of Sleep Medicine Clinical Practice Guideline. J Clin Sleep Med. 2017 Mar 15;13(3):479-504. doi: 10.5664/jcsm.6506. PMID: 28162150; PMCID: PMC5337595. https://link.springer.com/article/10.5664/jcsm.6506

Magalang UJ et al. Sleep. 2013

Pitkänen H et al. J Sleep Res. 2024.

Thornton CS, Tsai WH, Santana MJ, et al. Effects of Wait Times on Treatment Adherence and Clinical Outcomes in Patients With Severe Sleep-Disordered Breathing: A Secondary Analysis of a Noninferiority Randomized Clinical Trial. JAMA Netw Open. 2020;3(4):e203088. doi:10.1001/jamanetworkopen.2020.3088 https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2764596

Compliance and Regulatory

Intended use
DeepRESP is intended as an aid in diagnosis of sleep disorders. Its main purpose is to retrieve and automatically analyse/score sleep study data recorded by Nox Medical devices. The results of the analyzed data are transferred to another software for display, manual verification and scoring, and reporting.

Indications for Use
DeepRESP allows for automatic analysis/scoring of physiological signals recorded during sleep studies, which can aid healthcare professionals in the diagnosis of sleep disorders. All outputs generated by DeepRESP are subject to verification and interpretation by qualified healthcare professionals.

Compliance
Configurable retention aligned with HIPAA, GDPR, and local healthcare regulations. Data is retained in accordance with region-specific laws and regulations.

Regulatory Information
Nox Connect Platform is a non-medical device software-as-service (SaaS) application. It serves as an interface and may enable access to regulated software-as-a-medical device (SaaMD) applications, such as Nox AI Scoring and Insights (DeepRESP K241960), and Noxturnal Web, which are subject to applicable regulatory approvals in certain jurisdictions.

nox MEDICAL

Intended Use (Slides no. 35-39)

The following slides (slides number 36-39) are intended for Nox distributor partner alignment and business planning discussions. They outline potential value drivers, commercial opportunities, and partnership responsibilities related to the Nox Connect platform.

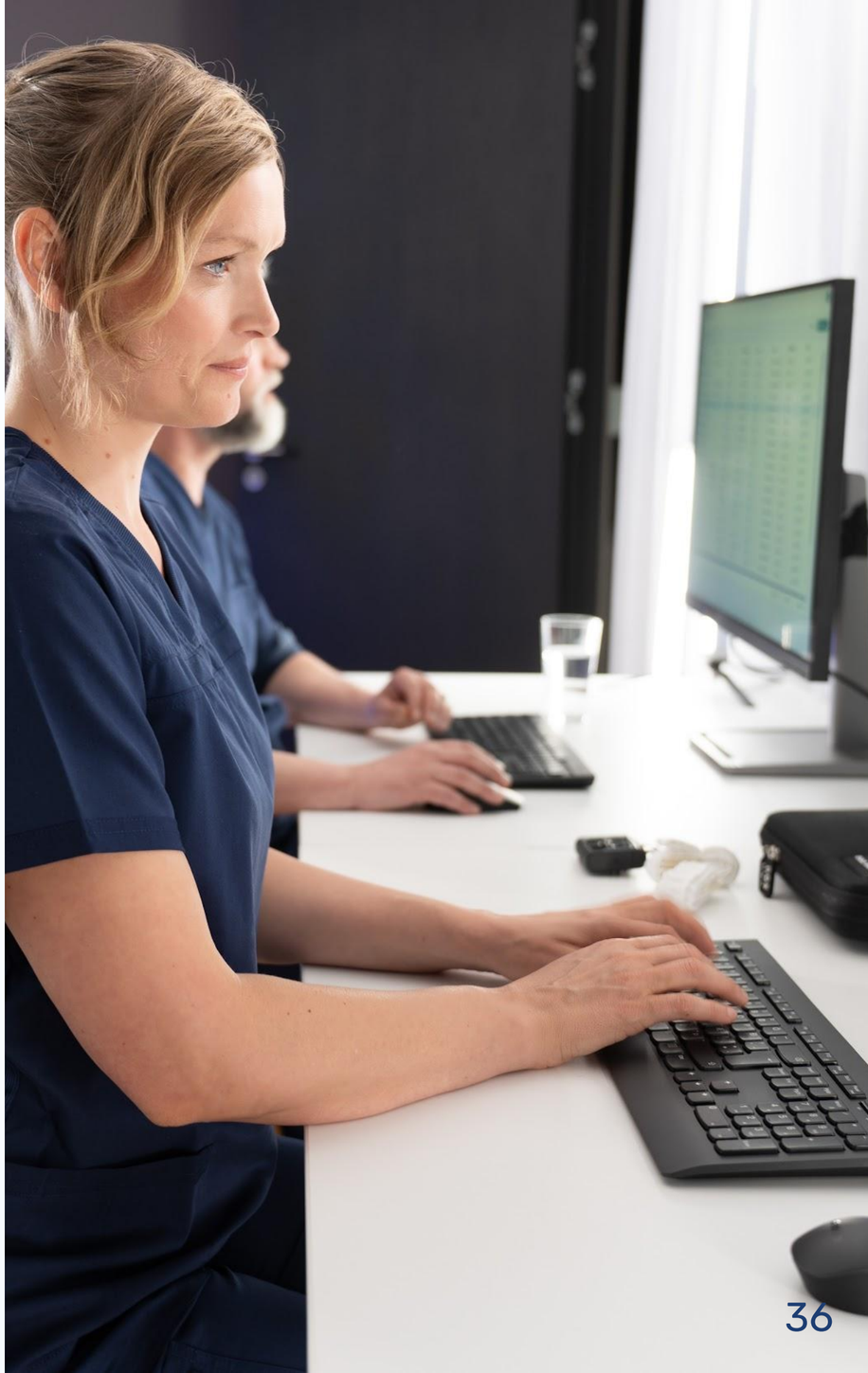
These slides are not designed for direct customer presentation in their current form, but rather to support internal strategy discussions, market planning, and alignment on how Nox Connect can be positioned and supported within each distributor market.

Unlocking New Growth with Connected Sleep Diagnostics

Nox Connect enables partners to transition to connected solutions, capturing more value across the care pathway

Opportunities for Nox distribution partners:

- Meet rising need for sleep diagnostics with scalable, connected offering
- Build recurring revenue streams to support ongoing customer engagement
- Support customers' operational challenges with improved efficiency and scalability
- Support customers in achieving conclusive results across diverse populations
- Expand beyond hardware, delivering a complete solution
- Offer an integrated, future-ready solution aligned with evolving care models

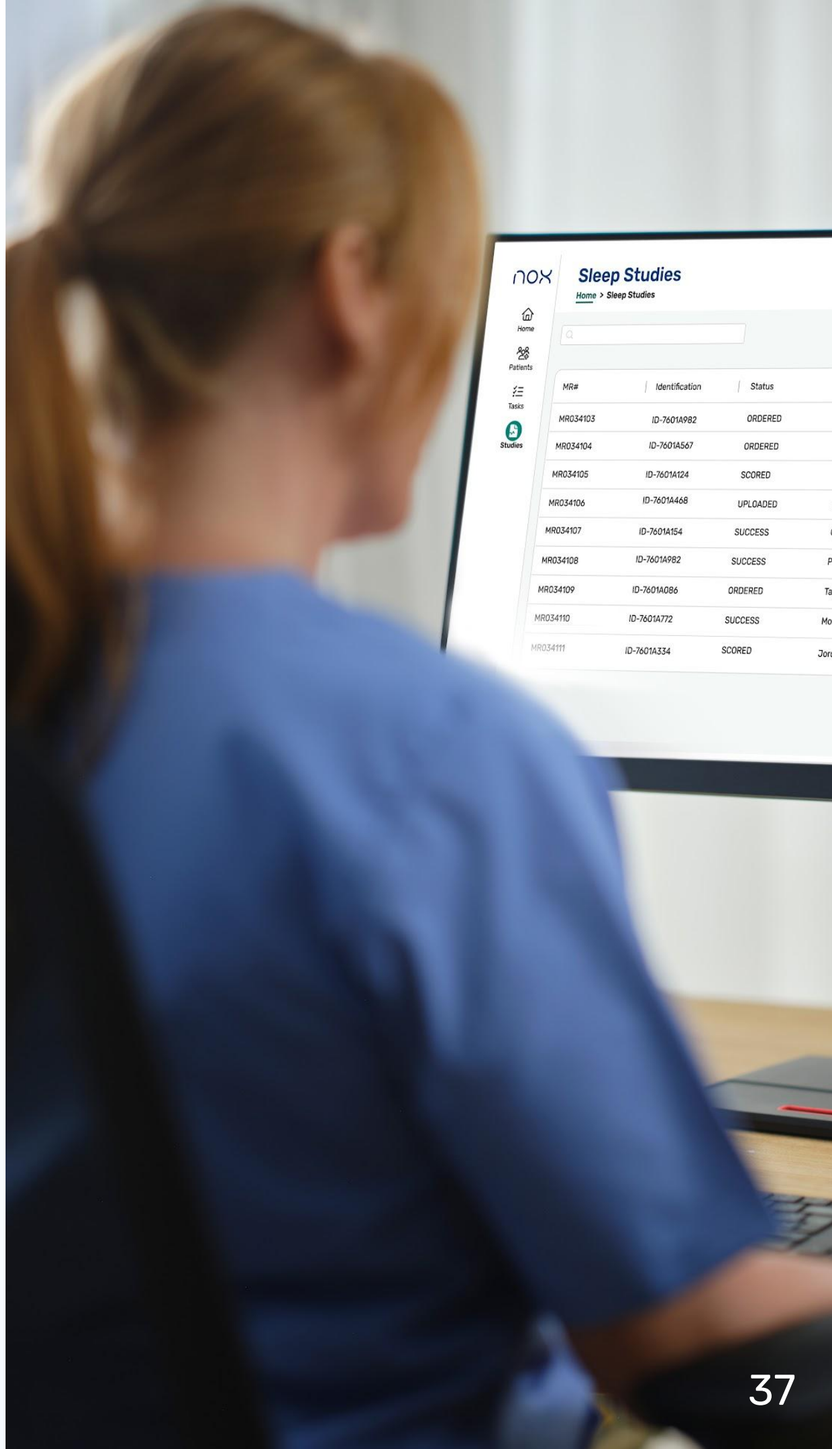


Growth Impact for Nox Distribution Partners

Expanding beyond devices to deliver recurring revenue and service-based offerings

Nox Connect is designed to support:

Operational Visibility and Control	Allows oversight of testing volumes and controlled access within MDaaS to support scalable and managed growth
Recurring Revenue Streams	Enables per-test and subscription-based models
Commercial Expansion Opportunities	Provides a foundation to offer sleep diagnostics as a service, MDaaS. Also creates an opportunity to bundle consumables and align with PAP pathways



Platform | Implementation and Operations

Defined responsibilities and visibility across Nox, partners, and customers

Activity	Nox Medical	Nox Partner	Customer (sleep health care business that has licensed Nox Connect)
Customer Implementation Phase			
Tenant Creation	✔*		
System Setup and Configuration	✔*		
User Access Creation			✔
Training	✔ (to partner)	✔ (to customer)	
Operational Phase			
Test Volume Overview	✔	✔	✔
Patient Data Access	✔ (SL2 / SL3)		✔
Tenant Management	✔ (infrastructure)	✔ (guidance)	
Billing	✔ (to partner)	✔ (to customer)	
Customer Service Delivery	✔ (SL2 / SL3)	✔ (SL1)	

- Nox leads platform setup and infrastructure, while partners drive training
- All stakeholders have visibility into test volumes
- Partners own customer-facing service and billing, while Nox provides licensing framework and core system management

*Evolving toward partner enablement

Medical Device as a Service (MDaaS) Opportunity

Deliver home sleep testing or polysomnography through a flexible, usage-based model with cloud integration

Key Benefits for End-Customers:

- **Complete solution from one partner:** Hardware, AI-supported scoring, and cloud platform
- **Pay-per-study model:** Costs aligned with volume for predictable and manageable operations
- **Scalable and adaptable:** Easily adjust capacity and evolve workflows as needs change

Opportunity for Nox Distribution Partners:

- **Foundation for service-based revenue:** Supports recurring revenue streams
- **Controlled and scalable growth:** Visibility into testing volumes to support structured expansion
- **Expanded opportunities:** Opportunity to bundle consumables and align with PAP pathways

>> **MDaaS enables healthcare providers to adopt advanced diagnostics without upfront burden, supporting greater flexibility in patient care**