24 NOVEMBER 2026

UNAUDITED FINANCIAL RESULTS FOR THE HALF YEAR TO 30 SEPTEMBER 2026

FOUNDATIONS FOR A RETURN TO GROWTH IN PLACE

DUNEDIN, New Zealand – Cancer diagnostics company Pacific Edge (NZX, ASX: PEB) today reports its results for the six months to 30 September 2026 (1H 27), showing a period of continued cost discipline and execution of strategic milestones, including confirmation that Medicare will resume coverage of Cxbladder Triage and Triage Plus.

With Medicare coverage effective from 20 December 2026 and higher Medicare prices expected from 1 January 2027, Pacific Edge enters the second half of FY 27 with the reimbursement foundations for a return to growth in place and is now focused on disciplined execution.

1H 27 FINANCIAL PERFORMANCE

(ALL FIGURES NZ$ UNLESS STATED)

- Operating revenue of $5.9 million decreased 1.4% from $5.9 million in 1H 26. Total revenue of $7.0 million (1H 26: $7.1 million) supported by growth in APAC
- Total laboratory throughput[2] (TLT) of 10,378 tests, down 21.2% on 1H 26 on fewer commercial tests (down 17.8% to 8,528) and clinical study samples (down 34.4%)
- Triage Plus reached 10.8% of US tests in September, up from 0.8% in Q1 27
- Operating expenses of $21.7 million, down 17.3% on 1H 26 ($26.2 million)
- Net loss after tax of $14.7 million, lower than the $19.1 million in 1H 26
- Net operating cash outflow of $12.3 million (1H 26: $19.0 million)
- Average monthly cash burn of $2.2 million, held below the company's targeted $2.5 million
- Cash, cash equivalents and short-term deposits of $29.4 million at 30 September 2026 (31 March 2026: $7.8 million) following the $36.1 million June 2026 capital raise

1H 27 STRATEGIC HIGHLIGHTS

- **Medicare Coverage:** Triage and Triage Plus covered by Local Coverage Determination (LCD) *'Urine-based Biomarkers in Patients with Microhematuria'* (L40378) with effect from December 20, 2026
- **Medicare Pricing:** Triage Plus priced at US$1,328 per test (75% above the US$760 legacy price), and Triage and Monitor re-priced under Protecting Access to Medicare Act (PAMA) at US$1,057 and US$1,026 from 1 January 2027
- **Commercial Payers:** In-network contracts established with BCBS North Carolina and South Carolina; additional favorable medical policies established from Geisinger, Sentara, BCBS Hawaii and MVP Healthcare
- **Asia Pacific Expansion:** Clinical pathways for Triage Plus at Singapore General Hospital and Townsville University Hospital
- **Clinical Evidence:** DRIVE[i] and AUSSIE[ii] studies published, strengthening Pacific Edge's evidence advantage and moat

Chairman Simon Flood said: "It was gratifying to see after years of investment in research and development that Pacific Edge has secured a final LCD from Medicare. It's a fantastic result

for our Team, the clinicians who played a vital role in supporting our progress, and for our patients who will benefit from the ease and convenience that our products bring to their care. Pacific Edge's Triage and Triage Plus are the only tests covered by the LCD, which gives the company a clinically validated commercial advantage over its competitors on which we will be building. Our management team has continued operate with a close attention to the cost base, with the company's cash burn showing a material improvement in the period under review. With a stronger balance sheet following our $36.1 million June 2026 capital raising, we are now well positioned to capitalize on the commercial opportunities in front of us."

Chief Executive Dr Peter Meintjes said: "The company has been actively preparing for Medicare coverage since the announcement of the draft LCD, in particular, focusing our sales team on the predominantly female intermediate risk microhematuria patients and transitioning customers to Triage Plus, both of which are tracking nicely.

"In parallel, we've been improving our digital systems and billing processes to turn coverage policy into reimbursement dollars from day one of effective coverage. We expect Q4 FY27 will look materially different for Pacific Edge in the US with more tailwinds than headwinds, and we are focused on delivering multiple successive quarters of consistent growth in the hematuria market."

FINANCIAL PERFORMANCE

Disciplined cost management and a conservative approach to capital remained central to the half, with operating expenses falling to $21.7 million (1H 26: $26.2 million) and average monthly cash burn of $2.2 million (1H 26: $3.3 million).

Operating revenue of $5.9 million was 1.4% down from 1H 26 ($5.9 million). Higher APAC volumes and pricing and a growing contribution from Triage Plus offset a 26% fall in US commercial volumes to 6,168 tests, as payers awaited a final Medicare decision and clinicians transitioned to ordering for intermediate-risk patients and the company operated with a reduced front line sales force.

Costs fell as Pacific Edge limited backfilling of US sales territories ahead of the final LCD, as the company balanced cash preservation while maintaining a commercial presence. The net loss after tax narrowed to $14.7 million (1H 26: $19.1 million).

Supported by the $36.1 million capital raise completed in June 2026, Pacific Edge ended the period with cash, cash equivalents and short-term deposits of $29.4 million.

STRATEGIC ACHIEVEMENTS AND PRIORITIES

Medicare coverage from 20 December 2026, in-network contracts with the Blue Cross Blue Shield plans in North Carolina and South Carolina from 1 November 2026, and the first facility-level Veterans Association (VA) blanket purchase agreement, secured in Q2 27, give Pacific Edge a clear path to reimbursement across roughly 78 million contracted lives, over a quarter of US covered lives. Other healthcare payers including Geisinger, Sentara, BCBS Hawaii and MVP Healthcare have also adopted favorable medical policy but are yet to contract with us.

Medicare pricing is also improving. Triage and Monitor have been re-priced under PAMA at US$1,057 and US$1,026 per test respectively from 1 January 2027, up from US$760, and Triage Plus is priced at US$1,328 per test.

Our task now is to convert this market into test orders. We are concentrating our commercial effort where coverage, clinical evidence and pricing align — intermediate-risk microhematuria patients in the US, reached mainly through integrated delivery networks (IDNs), female-specific call points and Advanced Practice Provider call points.

We expect adoption to be supported by recently published studies. DRIVE demonstrated the clinical validity of Triage Plus across US Veterans Administration sites, and AUSSIE reproduced that performance in an Australian population, showing consistent results across populations and health systems.

When completed, the Triage Plus Comparison Study at Kaiser Permanente, microDRIVE and microhematuria & gross hematuria Pooled Analyses, are expected to further enhance our evidence. Together, these studies will help expand the indications and eligible patient population ahead of the American Urological Association's next literature review of its microhematuria guideline in 2027[iii].

Surveillance Plus is the next opportunity. The LOBSTER validation study for the test has completed enrolment, with database lock targeted for May 2027, and planning for the OCTOPUS clinical utility study is under way.

OUTLOOK

Dr Meintjes said with a large contracted market in the US, Pacific Edge is now focused firmly on driving test adoption and revenue growth in the US and building commercial momentum in the Asia Pacific.

"With Medicare coverage secured for Triage and Triage Plus, stronger pricing and growing payer policy, we are confident in our ability to execute. We will continue to invest selectively to convert these strategic milestones into testing volume and revenue.

"Higher prices will materially improve the unit economics of our sales force. We expect Medicare Advantage plans to reimburse in-line with Medicare policy and will use coverage to drive further commercial payer policy and contracts.

"A pipeline of further evidence, including the microDRIVE publication, a pooled Triage Plus analysis and a second STRATA publication[iv], together with the planned coding submission for Cxbladder Surveillance Plus will add momentum.

"With these foundations in place, Pacific Edge is confident of driving towards its goal of breakeven, which management estimates at around 55,000 tests a year across all products as we drive our blended average selling price across all geographies above NZ$1,450 per test."

CONFERENCE CALL

Pacific Edge is today holding an Investor and Analyst conference call at 11.00am (NZST).

This briefing is being held webcast by the following link: www.virtualmeeting.co.nz/pebir26 or by phone on the following toll-free numbers:

- New Zealand – 0800 450 012
- Australia – 1800 571 226
- USA & Canada – 800 715 9871
- Conference ID: 2639914

Questions can be submitted online in writing via the Webcast platform or verbally via the audio call system when prompted.

Released for and on behalf of Pacific Edge by Grant Gibson Chief Financial Officer

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OVERVIEW

Pacific Edge: www.pacificedgedx.com

Pacific Edge Limited (NZX/ ASX: PEB) is a global cancer diagnostics company leading the way in the development and commercialization of bladder cancer diagnostic and prognostic tests for patients presenting with hematuria or surveillance of recurrent disease. Headquartered in Dunedin, New Zealand, the company provides its suite of Cxbladder tests globally through its wholly owned, and CLIA certified, laboratories in New Zealand and the USA.

Cxbladder: www.cxbladder.com

Cxbladder is a suite of non-invasive genomic urine tests optimized for the risk stratification of urothelial cancer in patients presenting with hematuria and those being monitored for recurrent disease. The tests help improve the overall patient experience, while prioritizing time and clinical resources to optimize practice workflow and improve efficiency.

Supported by over 20 years of research, Cxbladder's evidence portfolio extends to more than twenty-five peer reviewed publications, and Cxbladder Triage is now included in the American Urological Association's Microhematuria Guideline. To drive increased adoption and improved patient health outcomes, Cxbladder is the focal point of numerous ongoing and planned studies designed to generate further clinical utility evidence.

Cxbladder is available in the US, Australasia, and Israel and in markets throughout Asia and South America. In the US, the test has been used by over 5,000 urologists who have ordered more than 130,000 tests. In New Zealand, Cxbladder is accessible to around 70% of the population via public healthcare and all residents have the option of buying the test online.

[i] Savage et al (2025). Diagnostic Performance of Cxbladder® Triage Plus for the Identification and Stratification of Patients at Risk for Urothelial Carcinoma: The Multicenter, Prospective, Observational DRIVE Study. Accepted October 6, 2025.

[ii] Buhariwalla V, Sethi K, Vela I, Hayne D, Atchia Z, de Lange M, Lough T, White A, Ranasinghe W. Validation of Cxbladder Triage Plus in Australian Patients with Haematuria: The AUSSIE Study. BJU International; 2026.

[iii] The AUA determines the timeline for re-opening the updated literature review, but Pacific Edge management understand this can be no earlier than June 2027. Updated literature reviews prioritize emerging fields where there is advancement to consider in the published literature.