#### 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): September 16, 2019

	TherapeuticsMD	, Inc.	
(I	Exact Name of Registrant as Spe	ecified in its Charter)	
Nevada	001-00100		87-0233535
(State or Other Jurisdiction of Incorporation)	(Commission File Number)		(IRS Employer Identification No.)
	951 Yamato Road, S Boca Raton, FL 3	3431	
'	(Address of Principal Executive	Office) (Zip Code)	
Registra	nt's telephone number, including	g area code: (561) 961-1900	)
6800 Brol	ken South Parkway NW, Third I	Floor, Boca Raton, FL 3348	37
	ner name or former address, if c		_
Sec	curities registered pursuant to Se	ction 12(b) of the Act:	
Title of Each Class	Trading Symbol	Name of Each Excha	ange on Which Registered
Common Stock, par value \$0.001 per share	TXMD	The Nasdaq Stock Mar	rket LLC
Check the appropriate box below if the Form 8-K filiprovisions:	ng is intended to simultaneously	satisfy the filing obligatio	on of the registrant under any of the following
<ul> <li>□ Written communications pursuant to Rule 425 und</li> <li>□ Soliciting material pursuant to Rule 14a-12 under</li> <li>□ Pre-commencement communications pursuant to F</li> <li>□ Pre-commencement communications pursuant to F</li> </ul>	the Exchange Act (17 CFR 240. Rule 14d-2(b) under the Exchange Rule 13e-4(c) under the Exchange	14a-12) ge Act (17 CFR 240.14d-2( ge Act (17 CFR 240.13e-4(	c))
Indicate by check mark whether the registrant is an en or Rule 12b-2 of the Securities Exchange Act of 1934		ned in Rule 405 of the Seco	urities Act of 1933 (§230-405 of this chapter)
Emerging growth company $\square$			
If an emerging growth company, indicate by check marevised financial accounting standards provided pursu			sition period for complying with any new or

#### Item 7.01. Regulation FD Disclosure.

TherapeuticsMD, Inc. is furnishing as Exhibit 99.1 to this Current Report on Form 8-K an investor presentation which may be used, in whole or in part, and subject to modification, on September 16, 2019 and at subsequent meetings with investors or analysts.

The information in this Current Report on Form 8-K (including the exhibit) is being furnished pursuant to Item 7.01 of Form 8-K and shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934, as amended, or otherwise subject to the liabilities of that section, nor will any of such information or exhibits be deemed incorporated by reference into any filing under the Securities Act of 1933, as amended, or the Securities Exchange Act of 1934, as amended, except as expressly set forth by specific reference in such filing.

#### Item 9.01. Financial Statements and Exhibits.

(d) Exhibits

Exhibit Index

Exhibit
Number
Description

99.1 TherapeuticsMD, Inc. presentation dated September 16, 2019.

Cover Page Interactive Data File (the cover page tags are embedded within the Inline XBRL document).

#### **SIGNATURES**

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Date: September 16, 2019 THERAPEUTICSMD, INC.

By: /s/ Daniel A. Cartwright

Name: Daniel A. Cartwright
Title: Chief Financial Officer



# Investor Presentation

September 2019

Building a Premier Women's Health Portfolio

Therapeutics MD°

#### Forward-Looking Statements

This presentation by TherapeuticsMD, Inc. (referred to as "we" and "our") may contain forward-looking statements. Forward-looking statements may include, but are not limited to, statements relating to our objectives, plans and strategies, as well as statements, other than historical facts, that address activities, events or developments that we intend, expect, project, believe or anticipate will or may occur in the future. These statements are often characterized by terminology such as "believe," "hope," "may," "anticipate," "should," "intend," "plan," "will," "expect," "estimate," "project," "positioned," "strategy" and similar expressions and are based on assumptions and assessments made in light of our managerial experience and perception of historical trends, current conditions, expected future developments and other factors we believe to be appropriate.

Forward-looking statements in this presentation are made as of the date of this presentation, and we undertake no duty to update or revise any such statements, whether as a result of new information, future events or otherwise. Forward-looking statements are not guarantees of future performance and are subject to risks and uncertainties, many of which may be outside of our control. Important factors that could cause actual results, developments and business decisions to differ materially from forward-looking statements are described in the sections titled "Risk Factors" in our filings with the Securities and Exchange Commission, including our most recent Annual Report on Form 10-K and Quarterly Reports on Form 10-Q, as well as our current reports on Form 8-K, and include the following: our ability to maintain or increase sales of our products; our ability to develop and commercialize IMVEXXY®, ANNOVERA™, BIJUVA® and our hormone therapy drug candidates and obtain additional financing necessary therefor, whether we will be able to comply with the covenants and conditions under our term loan facility; the potential of adverse side effects or other safety risks that could adversely affect the commercialization of our current or future approved products or preclude the approval of our future drug candidates; the length, cost and uncertain results of future clinical trials; the ability of our licensees to commercialize and distribute our products; our reliance on third parties to conduct our manufacturing, research and development and clinical trials; the availability of reimbursement from government authorities and health insurance companies for our products; the impact of product liability lawsuits; the influence of extensive and costly government regulation; the volatility of the trading price of our common stock and the concentration of power in our stock ownership.

This non-promotional presentation is intended for investor audiences only.

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### **General Updates and Near-Term Catalysts**

- · Began IMVEXXY direct to consumer advertising leveraging digital and social media platforms
- Held Satellite Media Tour for Menopause Awareness Month (September)
- Expanded payer coverage for BIJUVA and ANNOVERA; awaiting additional decisions on IMVEXXY
  - With the recent addition of Cigna, expanded commercial coverage for BIJUVA to 5 of the top 10 payers¹
  - ANNOVERA has 40% unrestricted coverage in commercial health plans<sup>1</sup>
  - Added 2 of the top 10 commercial payers for ANNOVERA and several regional plans<sup>1</sup>
  - Additional commercial and Medicare Part D payer decisions expected 3Q/4Q 2019 for IMVEXXY and BLILIVA
  - Awaiting commercial coverage decision from CVS and Aetna for IMVEXXY
- IMVEXXY and BIJUVA data will be presented at 2019 Annual Meeting of the North American Menopause Society (Sept. 25-28, 2019)
- ANNOVERA data will be presented at 2019 Annual Meeting of the American Society for Reproductive Medicine (Oct. 12-19, 2019)
- Recent stock purchases by members of the executive team and board of directors
  - CEO purchased approximately \$280k in TXMD stock in 3Q19
  - CEO 2019 annual stock-based award of a single stock option to provide more equity to executive team with less dilution to stockholders

MMIT September 2019 and Account Insights

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## **August Launch Metrics**

IMVEXXY Launch Metrics			
Total paid scripts¹ (August 1-31, 2019)	~44,600		
Total patients (since launch through August 31, 2019)	~87,400		
Total prescribers <sup>2</sup> (since launch through August 31, 2019)	~14,800		

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<sup>&</sup>lt;sup>1</sup> Total prescription data is based on IQVIA prescriber level data plus additional unique patients identified through utilization of our affordability program. This includes a two week estimation for the lag in reporting retail data, which can cause minor fluctuations in historical comparisons.
<sup>2</sup> Total Unique Prescribers that have sent a prescription to a pharmacy for at least 1 patient for IMVEXXY.



References:

1. Total prescription data is based on IQVIA prescriber level data plus additional unique patient data identified through utilization of our affordability program. This includes two weeks of estimation for the lag in reporting retail data, which can cause minor fluctuations in historical comparisons.

2. Osphena and Interess data sourced from Symphony Health Integrated Delaverse.

3. Vagitem data sourced from IQVIA National Prescriber Level Data.

4. Market share data based on IQVIA prescriber level data plus additional unique patient data identified through utilization of our affordability program. All trademarks are the property of their respective owners.

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# \*Imvexxy Continued Strong Patient Adherence

IMVEXXY Patient Adherence <sup>1,2</sup>				
Month Initial Prescription Filled	Average # Fills for Those Patients	Maximum Allowable Fills Given the Month of Initial Fill		
Aug 2019	1 Fill	1 Fill		
Jul 2019	1.9 Fills	2 Fills		
Jun 2019	2.4 Fills	3 Fills		
May 2019	2.9 Fills	4 Fills		
Apr 2019	3.5 Fills	5 Fills		
Mar 2019	4.0 Fills	6 Fills		
Feb 2019	4.5 Fills	7 Fills		
Jan 2019	5.0 Fills	8 Fills		
Dec 2018	5.4 Fills	9 Fills		
Nov 2018	6.1 Fills	10 Fills		
Oct 2018	6.2 Fills	11 Fills		
Sep 2018	6.7 Fills	12 Fills		
Aug 2018	8.0 Fills	13 Fills		
Jul 2018	8.0 Fills	14 Fills		

#### IMVEXXY: 3.8 fills/yr3 (through Aug)

- Vaginal creams: average 1.5 fills/yr4
- Vaginal tablets: average 3.5 fills/yr<sup>4</sup>

Example of calculation: For patients who filled their initial prescription in November 2018, each of those patients averaged 6.1 fills from November 2018 through August 2019

- Newrage number of fills per patient is the average number of fills per patient grouped by their initial month on therapy.
   Total prescription data is based on IQVIA prescriber level data plus additional unique patients identified through utilization of our affordability program.
   Average number of fills for all patients is calculated as Total Rx / Total Patients.
   Total Rx/Patient Count

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# **August Launch Metrics**

BIJUVA Launch Metrics		
Total paid scripts dispensed to patients <sup>1</sup> (since launch through August 31, 2019)	~14,200	
Total paid scripts (August 1-31, 2019)	~5,300	
Total patients (since launch through August 31, 2019)	~6,800	
Total prescribers <sup>2</sup> (since launch through August 31, 2019)	~3,000	

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<sup>&</sup>lt;sup>1</sup>Total prescription data is based on IQVIA prescriber level data plus additional unique patients identified through utilization of our affordability program. This includes a two week estimation for the lag in reporting retail data, which can cause minor fluctuations in historical comparisons.

<sup>2</sup>Total Unique Prescribers that have sent a prescription to a pharmacy for at least 1 patient for BIJUVA.



#### Bijuva commercial Payer Update (estradid and progresterme) capsules Coverage Decisions Expected by 4Q19

#### **Quicker Process to** Payer Coverage than IMVEXXY

- · Commercial segment represents vast majority of BIJUVA patients
- Expect 3-4 quarters coverage cycle (from launch) to secure commercial payers
- · Amendments to the company's existing payer contracts with little Medicare Part D

Top 10 Plans Account for ~71%	6
of all Commercial Pharmacy Liv	es

Plan	% of Lives <sup>1</sup>	Status <sup>2</sup>
cvs	15.4%	In discussions
ESI	15.3%	Adjudicating as of 4/19/19
United	7.5%	Adjudicating as of 8/1/19
Anthem	7.3%	In discussions
Prime	6.5%	In discussions
OptumRx	6.1%	Adjudicating as of 8/1/19
Kaiser	4.7%	In discussions
Aetna	4.0%	Adjudicating as of 4/2019
Cigna	3.9%	Adjudicating as of 9/2019
EnvisionRx	1.8%	In discussions

New

Adjudication of claim by payer: BUUVA is on payer formulary as covered product and is being submitted to insurance company for payment by payer to pharmacy.

<sup>1</sup>Plan numbers as of May 2019 <sup>2</sup>Adjudication status from MMIT September 2019 and Account Insights

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#### **Key Payer Updates**

#### ANNOVERA has 40% Unrestricted Coverage in Commercial Health Plans<sup>1</sup>

- Anthem adjudicating ANNOVERA at Tier 3 with no copay as of August 2019<sup>1</sup>
- Kaiser Washington ACA drug list covers ANNOVERA at no copay<sup>1</sup>
- Cigna adjudicating ANNOVERA at Tier 3 as of August 2019<sup>1</sup>
- Starting on January 1, 2020, New York state insurance law requires coverage for all contraceptives, including ANNOVERA, with no copay<sup>2</sup>
- Currently with the addition of New York, 19 states, plus Washington, D.C., require insurance plans to cover all contraceptives that do not have a generic equivalent

Test and Learn Market Introduction Planned in 4Q 2019

\*MMIT September 2019 and Accounts Insights \*https://www.nysenate.gov/legislation/bills/2019/s659/amendment/a

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# Commercial Payer Update Coverage Decisions Expected to be finalized 1Q20

Top 10 Plans Account for ~71% of all Commercial Pharmacy Lives

	Plan	% of Lives1	Status <sup>2</sup>
	cvs	15.4%	In discussions
	ESI	15.3%	In discussions
	United	7.5%	In discussions
New	Anthem	7.3%	Adjudicating at T3, no copay as of August 2019
	Prime	6.5%	In discussions
	OptumRx	6.1%	In discussions
New	Kaiser	4.7%	In discussions
			Kaiser Washington covering at no copay
	Aetna	4.0%	In discussions
New	Cigna	3.9%	Adjudicating at T3 as of August 2019
	EnvisionRx	1.8%	In discussions

Adjudication of claim by payer: ANNOVERA is on payer formulary as covered product and is being submitted to insurance company for payment by payer to pharmacy.

\*Plan numbers as of May 2019
\*Adjudication status from MMIT September 2019 and Account Insights

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# Commercial Payer Update Coverage Decisions Expected to be finalized 1Q20

#### **Selected Regional Plan Coverage**

	Plan	Status <sup>1</sup>
	MC-Rx (ProcareRx)	Adjudicating as of April 2019
	BCBS of Massachusetts	Adjudicating at no copay as of August 2019
New	Excellus	Adjudicating as of September 2019
New	EmblemHealth	Adjudicating at no copay as of September 2019
New	Wellmark	Adjudicating as of August 2019
-	Harvard Pilgrim	Adjudicating at no copay as of August 2019
	Independent Health Association	Adjudicating as of August 2019
New	BC of Idaho	Adjudicating at no copay as of September 2019
New	Summacare	Adjudicating at no copay as of September 2019
New	Clear Script PBM	Adjudicating as of August 2019
New	Univera Healthcare	Adjudicating as of August 2019

Adjudication of claim by payer: ANNOVERA is on payer formulary as covered product and is being submitted to insurance company for payment by payer to pharmacy.

<sup>1</sup>Adjudication status from MMIT September 2019 and Account Insights

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# BIRTH CONTROL STATE LAWS REGARDLESS OF ACA MANDATES

#### 11 STATES, plus Washington D.C., REQUIRE COVERAGE WITH NO COPAY REGARDLESS OF ACA DECISION

(~51 Million women in these states)



Data on file (July 2019).

Washington State Office of the Insurance Commissioner
 https://www.facebook.com/WSOIC/photos/starting-in-2019-health-plans-in-washington-state-must-cover-all-forms-of-birth-/2485878528095084/
 (accessed July 5, 2019).
 "NY is effective 1/1/2020

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#### BIRTH CONTROL STATE LAWS REGARDLESS OF ACA MANDATES





<sup>1</sup> Data on file (July 2019).

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#### Portfolio Approach to Women's Health Sum of the Parts



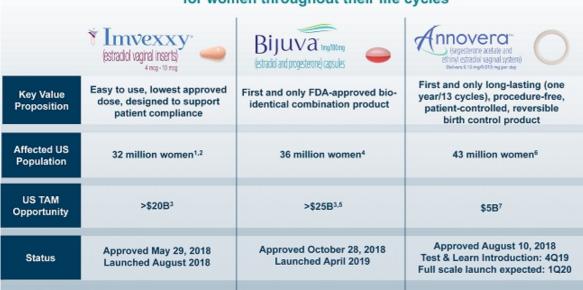
#### Focused on lifespan of the patient and healthcare provider's needs

- Innovative products, chronic conditions, large markets
- 200 sales representatives focused on single call point
- Products transition from one to the next through the various stages of life
  - contraception → prenatal vitamins → contraception → vasomotor symptoms → vulvar and vaginal atrophy
- Patient cost conscious portfolio
  - Products with patient out-of-pocket costs as little as \$35 with copay programs\*
  - Possibility of no out-of-pocket costs for ANNOVERA
- Copay as little as \$35 with commercial coverage. Offer not valid for patients enrolled in Medicare, Medicaid, or other federal or state health care programs (including any state pharmaceutical assistance programs). Program Terms, Conditions, and Eligibility Criteria apply.

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# Therapeutics MD\* (TXMD)

Focused on developing and commercializing products for women throughout their life cycles



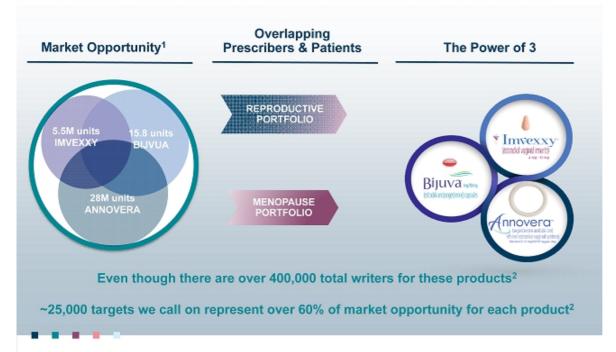
th American Verapouse Society, Management of symptomatic wavesupinal stophy: 2015 position statement of The North American Management of Society, assets, 2013;3(9):898-992.

L. Contraine SEL Instein GL, et al. Publishes and predictors of sexual activity among women in the hormone therapy this of the Women's Health Initiative. Instein 1911;19(1):1908-1911.

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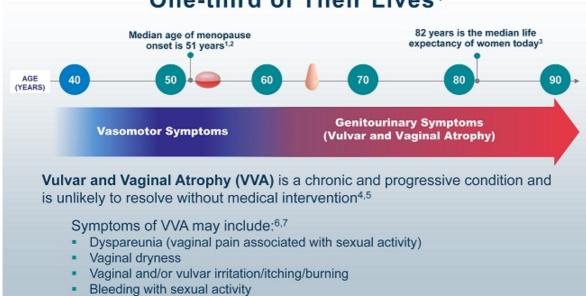
#### The Power of A Women's Health Portfolio



Symphony Health Integrated Dataverse
 DIQVIA National Prescriber Level Data.

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#### Women are Menopausal More Than One-third of Their Lives<sup>1</sup>

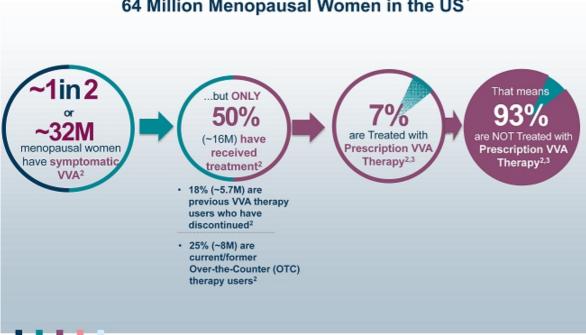


Parish SJ, et al. Menopause. 2018;25(8):937-941. 2. North American Menopause Society. Menopause 101.
 www.menopause.org/for-women/menopause/flashes/menopause-symptoms-and-treatments/menopause-101-a-primer-for-the-perimenopausal. Accessed March 25, 2019. 3. US Census Bureau. http://wordbooguiationreview.com/countries/united-states-papuls/for/ Accessed April 23, 2019.4. North American Menopause Society. Menopause. 2013;20(9):888-902. 5. Wysocki S et al. Uliv Med Insights Reprod Health. 2014;8:23-30. 6. Kingsberg SA et al. J Sex Med. 2013;10(7):1790-1799. 7. North American Menopause Society. Menopause. 2013;20(9):888-902.

Dysuria (pain when urinating)

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### The Scope of VVA in the US 64 Million Menopausal Women in the US<sup>1</sup>



- Wysocki S et al. Clin Med Insights Reprod Health. 2014;8:23-30.
   Kingsberg SA et al. J Sex Med. 2017;14:413-424.
   IMS Health Plan Claims (April 2008-Mar 2011).

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#### IMVEXXY is "Redefining Relief"

A highly effective patient experience supported by strong clinical attributes



- ·Small, digitally inserted, vaginal softgel insert that dissolves completely
- Easy to use without the need for an applicator
- Mess-free administration
- Use any-time of day
- Lowest approved doses of estradiol 4 mcg and 10 mcg
- •Efficacy demonstrated as early as 2 weeks (secondary endpoint) and maintained through week 12
- •PK data No increase in systemic hormone levels beyond the normal postmenopausal range\*
- Mechanism of action and dosing that are familiar and comfortable
- •No patient education required for dose preparation or applicators
- Dose packaging to optimize compliance and convenience
- → High patient satisfaction resulting in high refill rates

\*The clinical relevance of systemic absorption rates for vaginal estrogen therapies is not known.

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### \*Imvexxy Launch Approach Developed to **Shift Entrenched Behavior**







Drive Early Experience for a Differentiated Product



Drive Share Momentum Through New Writers and Share of Existing Writers

- · No new Estrogen product launched since 2000
- · Affordability a challenge for patients while insurance builds
- Prescribers typically slow writing during this phase because of lack of access
- · Open access approach only works for a product that delivers a good patient experience
- \$ spent went toward copay program, removed barrier to HCP writing and less expensive than pushing early through DTC
- · Continuous unlocking of new levers as insurance adjudication normalizes

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## \*Invexxy The VVA Market Exceeds \$1.7B **Gross Revenue Annually**

Product	12 Months through June 2019 Total Units <sup>1</sup>	Gross Dollars for 2018 <sup>1</sup>
Estrace® Cream Brand & Generics	2,000,000	\$554,450,000
Premarin®	1,190,000	\$460,760,000
Vagifem® Brand & Generics	1,500,000	\$454,550,000
Estring®	259,000	\$114,360,000
Osphena®	217,000	\$75,910,000
Intrarosa®	209,000	\$46,940,000

2018 Value of the VVA Market

\$1,700,000,000

Symphony Health Solutions PHAST Data powered by IDB; MBS dollars.
 All trademarks are the property of their respective owners.

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### Value of Additional Fills

		Percent of marke	t based on patient	count of 2.3M an	d 4 fills per yea
4	Average Net Revenue / Unit	25%	35%	45%	55%
Fills/year	\$80	\$184,000,000	\$257,600,000	\$331,200,000	\$404,800,000
	\$100	\$230,000,000	\$322,000,000	\$414,000,000	\$506,000,000
		Percent of market	t based on patient (	Count of 2.3M an	d 5 fills per yea
5	Average Net Revenue / Unit	25%	35%	45%	55%
Fills/year	\$80	\$230,000,000	\$322,000,000	\$414,000,000	\$506,000,000
	\$100	\$287,500,000	\$402,500,000	\$517,500,000	\$632,500,000
		Percent of marke	t based on patient	count of 2.3M an	d 6 fills per yea
6	Average Net Revenue / Unit	25%	35%	45%	55%
/year	\$80	\$276,000,000	\$386,400,000	\$496,800,000	\$607,200,000
	\$100	\$345,000,000	\$483,000,000	\$621,000,000	\$759,000,000

Market opportunity is calculated by multiplying the number of patients on products annually times the market share times the average number of fills per patient per year times the average potential net revenue per unit. At \$100 average net revenue, the value per fill ranges from \$57M to \$126M, depending on market share.

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## **Commercial Payer Status**

Top 10 Plans Account for ~71% of all Commercial Pharmacy Lives

Plan	% of Lives <sup>1</sup>	Status <sup>2</sup>
cvs	15.4%	Awaiting decision in 3Q
ESI	15.3%	Adjudicating as of 10/1/18
United	7.5%	Adjudicating as of 3/1/19
Anthem	7.3%	Adjudicating as of Aug. 2018
Prime	6.5%	Adjudicating as of 1/1/19
OptumRx	6.1%	Adjudicating as of 1/1/19
Kaiser	4.7%	In discussions
Aetna	4.0%	Awaiting decision in 3Q ~1.8M of these lives are adjudicating
Cigna	3.9%	Adjudicating as of 12/15/18
EnvisionRx	1.8%	Adjudicating as of 1/1/19

Adjudication of claim by payer: IMVEXXY is on payer formulary as covered product and is being submitted to insurance company for payment by payer to pharmacy.

<sup>1</sup>Plan numbers as of May 2019 and Account Insights
<sup>2</sup>Adjudication status from MMIT September 2019 and Account Insights

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### **Medicare Part D Payer Status**

Decisions Expected 3Q/4Q19

Top 6 Plans Account for ~78% of all Medicare Part D Pharmacy Lives

Plan	% of Lives <sup>1</sup>	Status <sup>2</sup>
United	20.7%	Adjudicating as of 2/1/19
Humana	17.9%	Decision expected 3Q/4Q19
CVS Caremark	14.1%	Decision expected 3Q/4Q19
Wellcare with Aetna lives	13.6%	Decision expected 3Q/4Q19
Express Scripts/ Cigna	8.5%	Decision expected 3Q/4Q19 ~1M of these lives are adjudicating as of June 2019
Kaiser	3.6%	Adjudicating maintenance pack as of 10/1/18 and starter pack as of 3/1/19

Adjudication of claim by payer: IMVEXXY is on payer formulary as covered product

Plan numbers as of July 2019 and is being submitted to insurance company for payment by payer to pharmacy.

Adjudication status from MMIT September 2019 and Account Insights

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# \* Invexxy How Adjudication Rate\* Will Change When Payer Cycle Completes



#### 2Q 2019 Actuals

	Column A	Column B	Column C	
IMVEXXY	No Insurance	Commercial Insurance	Medicare Eligible Patients	
% of Business	3%	62%	35%	
% Adjudicated	0%	50%	8%	
Contribution to Overall Adjudication Rate	0%	31%	3%	
Overall Adjudication Rate	34% (up from 27% in 1Q19)			

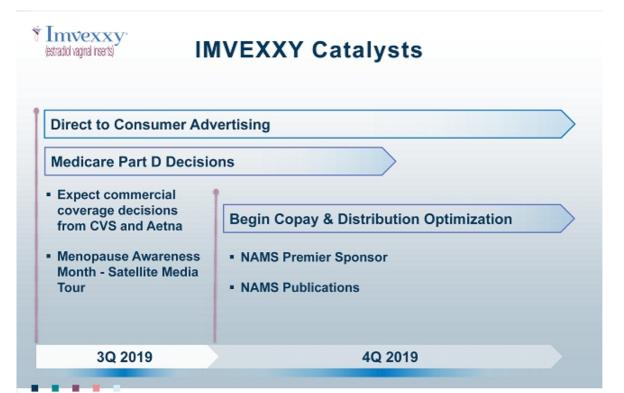


#### Target Adjudication as Contracting is Finalized

	Column A	Column B	Column C
IMVEXXY	No Insurance	Commercial Insurance	Medicare Eligible Patients
% of Business	6%	70%	24%
% Adjudicated	0%	75%	65%
Contribution to Overall Adjudication Rate	0%	53%	17%
Overall Adjudication Rate		70%	

<sup>\*</sup>Adjudication Rate= Percent of Business multiplied by percent of claims being covered.

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# **BIJUVA**

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# Hormone Therapy Options for Vasomotor Symptoms Before BIJUVA

After WHI (2002), a majority of women and clinicians shifted to bio-identical hormone therapy<sup>1</sup>

FDA-APPROVED		NOT FDA-APPROVED		
Combination Synthetic Estrogens + Progestins	Separate Bio-identical Estradiol & Progesterone	Compounded Bio-identical Estradiol + Progesterone		
~ 2.5 million total annual prescriptions <sup>2</sup>	~ 3.9 million total annual prescriptions (each) <sup>1</sup>	12 - 18 million total annual prescriptions <sup>3</sup>		
Prempro®, Activella®, Angeliq®, Femhrt®, Climara Pro®, Combipatch®	Oral or transdermal estradiol & Prometrium®	Compounded estradiol + progesterone		
FDA-approved	Not FDA-approved to be used together	Not FDA-approved		
1 copay	2 copays	Often not covered by insurance		
Insurance coverage	Insurance coverage	Almost 100% out of pocket		
> NEED FOR AN FDA-APPROVED COMBINATION BIO-IDENTICAL HORMONE THERAPY				

1) Symphony Health Solutions PHAST Data powered by IDV; 12 months as of December 31 2018
2) Individes the following drugs: Activelis®, FerniRTS , Angelig®, Generic 17b + Progestins, Prempro®, Premphase®, Duawee®, Brisdelle®
3) Composite of Fisher , 10 utilitiesIMS, Write Paper A Profile of the US Compounding Pharmacy Market, internal surveying of compounding pharmacies & NAMS publications
All trademarks are the property of their respective owners.

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# BIJUVA is indicated in a woman with a uterus for the treatment of moderate to severe vasomotor symptoms due to menopause

#### **KEY CLINICAL ATTRIBUTES**

- First and only bio-identical combination of estradiol to reduce moderate to severe hot flashes combined with progesterone to help reduce the risk to the endometrium
- Strong efficacy and safety data
- Sustained steady state of estradiol
- No clinically meaningful changes in weight or blood pressure
- No clinically meaningful changes in coagulation or lipid parameters
- No clinically meaningful changes in mammograms
- Clinically meaningful improvements in quality of life and sleep disturbance data
- High desired amenorrhea rates (no bleeding)

#### OTHER KEY ATTRIBUTES

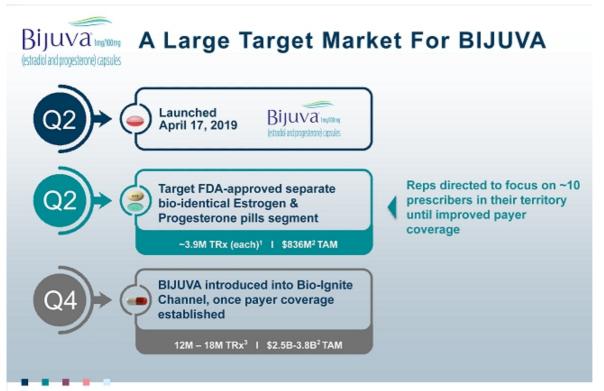
- Once-a-day single oral softgel capsule only approved continuous combined progesterone product
- No peanut allergen unlike other FDA-approved progesterone products
- One prescription, one copay
- BIJUVA is available in blister packages containing 30 capsules



References:

BIJUVA [package insert]. Boca Raton, FL: TherapeuticsMD, Inc; 2019. Lobo RA, et al. Obstet Gynecol. 2018;132(1):161-170. Lobo RA, et al. Noth American Menopause Society Annual Meeting, October 3 - 6, 2018, San Diego, CA, USA, abstract number S-2.

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Symphony Health Solutions PHAST Data powered by IDV; 12 months as of December 31 2018
 Based on WAC pricing of \$214.50
 Composite of Fisher, J. QuintlesIMS, White Paper: A Profile of the US Compounding Pharmacy Market, internal surveying of compounding pharmacies & NAMS publications

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#### **Launch Plan Mirrors IMVEXXY**

Focused on Driving Early Behavior Change that Leads to Long Term Adoption





- As little as \$35 out-of-pocket cost\*
- Addresses the cost and coverage concerns which are often barriers to early adoption
- "Keep Cool" Early Experience Program drives appropriate patient and prescriber education
- Positive early clinical experience has the potential to drive momentum

 Offer not valid for patients enrolled in Medicare, Medicaid, or other federal or state health care programs (including any state pharmaceutical assistance programs). Program Terms, Conditions, and Eligibility Criteria apply.

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# Impact of Faster Payer Cycle on Adjudication Rate\*



#### 2Q 2019 Actuals

	Column A	Column B	Column C
BIJUVA	No Insurance	Commercial Insurance	Medicare Eligible Patients
% of Business	3.1%	89.1%	7.8%
% Adjudicated	0%	37.6%	7.6%
Contribution to Overall Adjudication Rate	0%	33.4%	0.6%
Overall Adjudication Rate	34% (up from 25% in May 2019)		



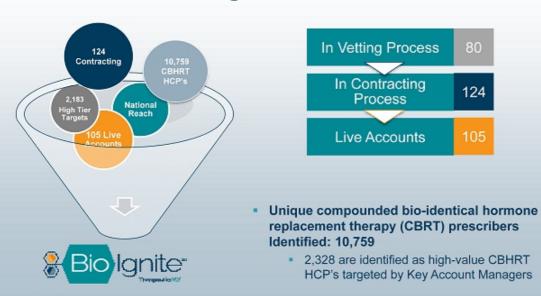
#### Target at Fully Established Insurance Coverage

	Column A	Column B	Column C
BIJUVA	No Insurance	Commercial Insurance	Medicare Eligible Patients
% of Business	6%	87%	8%
% Adjudicated	0%	75%	65%
Contribution to Overall Adjudication Rate	0%	65%	5%
Overall Adjudication Rate		70%	

<sup>\*</sup>Adjudication Rate= Percent of Business multiplied by % of claims being covered.

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## **Compounding Pharmacy Onboarding Process and Status**



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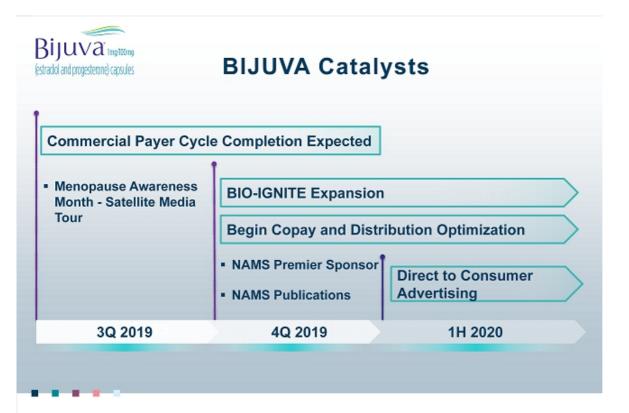


### **Market Opportunity**

	Total Addr	essable FDA Marke	st: 3 900 000		
Tota		ompounding Marke			
Percent of Addressable Market					
Average Net Revenue / Unit	25%	35%	45%	55%	
\$80	\$316,000,000	\$442,400,000	\$568,800,000	\$695,200,000	
\$100	\$395,000,000	\$553,000,000	\$711,000,000	\$869,000,000	

Market opportunity is calculated by multiplying the annual addressable market units (3.9M units of FDA-approved E+P plus the low-end of the estimated compounded market of 12M prescriptions) times the market share times the average potential net revenue per unit.

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## ANNOVERA: 2019 Prix Galien USA Award Nominee

The Prix Galien Award, counted among the global health innovation industry's most prized honors, recognizes outstanding biomedical and medical technology product achievement that improves the human condition

### Best Pharmaceutical Product 2019 Nominee:



#### Past Award Winners in the Category

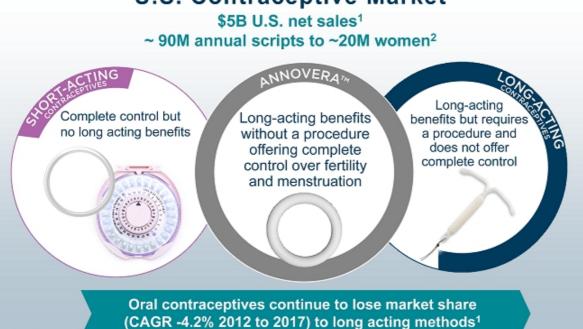
	2018 TRx MBS Dollars <sup>1</sup>
Ibrance®	\$2,293,000,000
IMBRUVICA®	\$2,334,000,000
Gleevec®	\$362,000,000
Januvia <sup>®</sup>	\$6,237,000,000
Chantix®	\$1,258,000,000

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1. MBS Data

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#### **U.S. Contraceptive Market**



QuintilesIMS MIDAS, QuintilesIMS Analysis, Company filings.
 Symphony Health Solutions PHAST Data powered by IDV; 12 months as of December 31 2017

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#### **Access Attributes**

- Market shift to long-acting contraception
- Offer women a long-term birth control option without requiring a procedure for insertion and removal like IUDs or Implants
- Available to all prescribers no special training, equipment, or inventory
- Acceptable for women who haven't had a child (nulliparous) or are not in a monogamous relationship<sup>1</sup>
- "Vaginal System" the only product in a potential new category of contraception with potential for \$0 co-pay
- Does not require refrigeration



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#### **Clinical Attributes**

- Only FDA-approved long-lasting reversible birth control that doesn't require a procedure or repeat visit
  - Empowers women to be in control of their fertility and menstruation
  - ANNOVERA is the only user-directed single 12-month birth control product (used in repeated 4-week cycles for 13 cycles)
- Highly effective in preventing pregnancy when used as directed (97.3%)
- High patient satisfaction in clinical trials (phase 3 acceptability study of 905 women)<sup>1</sup>
  - -89% overall satisfaction, adherence (94.3%) and continuation (78%)
- Softer and more pliable than NuvaRing®
- Only product with new novel progestin segesterone acetate<sup>2</sup>
  - No androgenic or glucocorticoid effects at contraceptive doses\*
- Low rates of discontinuation related to irregular bleeding (1.7%)

"Based on pharmacological studies in animals and in vitro receptor binding studies. The clinical significance is not known.

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### **High Patient Satisfaction**

- Phase 3 acceptability study (n=905 subjects)<sup>1</sup>
- Overall satisfaction (~90%) related to:
  - · Ease of use
  - · Side effects
  - · Expulsions/feeling the product
  - · Physical effect during sexual activity
- High rates of adherence (94.3%) and continuation (78%)

Ease of Use					
Ease of inserting (N=905)	Ease of removing (N=905)	Ease of remembering CVS insertion (N=905)	Ease of remembering CVS removal (N=905)		
90.8% (n=823)	88.2% (n=798)	87.6% (n=793)	85.2% (n=771)		

\*Merkatz, Ruth B., Martena Plagianos, Elena Hoskin, Michael Cooney, Paul C. Hewett, and Barbara S. Mensch. 2014. "Acceptability of the Nestorone@fethinyl estradiol contraceptive vaginal ring: Development of a model; implications for introduction," Contraceptive vaginal ring: Development of a model; implications for introduction," Contraceptive vaginal ring:

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### **Patient Types**

- Broad-based product a single contraceptive product for most patient and prescriber types
- Supports patient preference
- Amenable to women of all reproductive ages and demographics
- Highly effective
- Self-administered, long-lasting product that is reversible
- Nulliparous women (never had a child before)
- Between children birth spacing
- Women not in monogamous relationships
- Ideal for adolescents of reproductive age who don't want to take a product everyday, but don't want a procedure or nulliparous or non-monogamous
- College women no need for monthly refills
- Women in the military control fertility for 1 year



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### Launch Approach

#### **Pre-Launch Activities**

- WAC Price set at \$2,000/ unit (1 year)
- Continue dialogue with FDA regarding potential ACA decision designating ANNOVERA as a new method of contraception
- · Start payer discussions
- Test and learn market introduction
- Production ramps to ~10,000 units for the 4Q19

#### **National Launch**

- Initial focus on OBGYN target overlap with Menopause Products
- Early consumer focus given how influential women are in the choice of birth control
- Full-scale production anticipated 1Q20

3Q 2019 4Q 2019 1Q-3Q 2020

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### **Market Opportunity**

Addressa	able Birth Control Market R	x Options NRx	28,000,000	
	Percent o	f Overall Birth Control N	larket NRx	
Average Net Revenue / Unit	1.0%	1.5%	2.0%	2.5%
\$1,000	\$280,000,000	\$420,000,000	\$560,000,000	\$700,000,000
\$1,500	\$420,000,000	\$630,000,000	\$840,000,000	\$1,050,000,000
\$1,750	\$490,000,000	\$735,000,000	\$980,000,000	\$1,225,000,000
	Addressable NuvaRin	g Market NRx	1,200,000	
	Per	cent of NuvaRing Market	NRx	
Average Net Revenue / Unit	25%	35%	45%	55%
\$1,000	\$300,000,000	\$420,000,000	\$540,000,000	\$660,000,000
\$1,500	\$450,000,000	\$630,000,000	\$810,000,000	\$990,000,000
\$1,750	\$525,000,000	\$735,000,000	\$945,000,000	\$1,155,000,000

Market opportunity is calculated by multiplying the annual addressable market times the market share times the average potential net revenue per unit.

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# The Power of the Portfolio Multiple Paths to \$1B of Peak Sales

Percent of Market Based on Patient Count of 2.3M and 4 fills per year					
Average Net Revenue / Unit		35%	45%	55%	
\$80	\$184,000,000	\$257,600,000	\$331,200,000	\$404,800,000	
\$100	\$230,000,000	\$322,000,000	\$414,000,000	\$506,000,000	

Total Addressable FDA Market: 3,800,000 Total Addressable Compounding Market: 12,000,000 Percent of Addressable Market								
Average Net								
\$80								
\$100	\$395,000,000	\$553,000,000	\$711,000,000	\$869,000,000				

Total Add	ressable Birth Cor	ntrol Market NRx	28,000,000	
Average Net Revenue / Unit	1.0%	1.5%	2.0%	2.5%
\$1,000	\$280,000,000	\$420,000,000	\$560,000,000	\$700,000,000
\$1,500	\$420,000,000	\$630,000,000	\$840,000,000	\$1,050,000,000
\$1,750	\$490,000,000	\$735,000,000	\$980,000,000	\$1,225,000,000



Diversified risk with 3 FDA-approved products, creating multiple paths to \$1B peak sales opportunity

Example: \$230M (IMVEXXY), \$395M (BIJUVA) and \$420M (ANNOVERA) = \$1B peak sales potential Therapeutics MD\*



## Financial Overview

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### 2019 Financial Guidance

	3Q2019 Estimate	4Q2019 Estimate	FY2019 Estimate
FDA-Approved Products Net Revenue	\$4.50 - 6.50M	\$11.00 - 13.00M	\$20.75 - 24.75M
Prenatal Vitamins Net Revenue	\$2.25 - 2.50M	\$1.75 - 2.25M	\$8.70 - 9.45M
Total TXMD	\$6.75 - 9.00M	\$12.75 - 15.25M	\$29.45 - 34.20N

As our sales force focus shifts to our FDA-approved products and payer headwinds continue to increase for prenatal vitamins, we anticipate prenatal vitamins will continue to become a smaller percentage of overall company revenues

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### **TXMD: Financial Snapshot**



\* \$300 million non-dilutive term loan facility with TPG Sixth Street Partners (TSSP) entered into on April 24, 2019. The initial tranche of \$200 million was drawn on April 24, 2019, with additional tranches of \$50 million available to the company upon the designation of ANNOVERA as a new category of contraception by the U.S. Food and Drug Administration on or prior to December 31, 2019 and another \$50 million available to the company upon achieving \$11 million in net revenues from IMVEXXY, ANNOVERA and BLIUVA for the fourth quarter of 2019. A portion of the proceeds (\$81M) from the initial tranche of the TSSP facility was used to repay all amounts outstanding under the company's prior credit facility.

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#### The Power of a Women's Health Portfolio

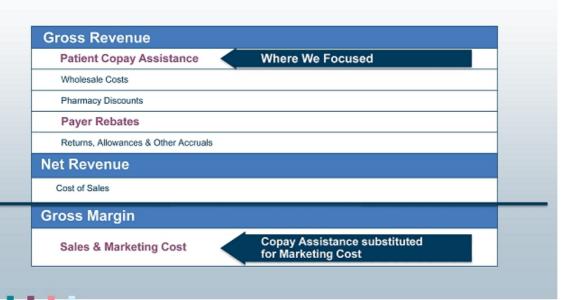


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## IMVEXXY Model Different Than Typical Pharmaceutical Launch



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## Example: How a Prescription is Paid & the Impact on Manufacturer

	Column A Patient's Insurance Doesn't Cover Product Yet	Column B Commercial Insurance Used w/ Patient Deductible Not Yet Met & High Deductible Plans	Column C Commercial Insurance Used w/ Average Copay	Column D Medicare Part D Insurance Used w/ Average Copay
Payment from Copay Card (cost to Manufacturer)	\$200	\$215	\$40	\$0
Payment from Insurance Company	\$0	\$0	\$175	\$205
Payment from Patient	_ \$ 35	<u>\$ 35</u>	_ \$ 35	<u>\$ 40</u>
Total Amount Received by Pharmacy	\$235	\$250	\$250	\$245

- For columns A and B, the copay card covers most of the cost of the product for the patient
- For columns C and D, the insurance company pays most of the cost of the product for the patient

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