



# bluebird bio Company Presentation

May 2023

**NASDAQ: BLUE**

# forward-looking statements

These slides and the accompanying oral presentation contain forward-looking statements and information. The use of words such as “may,” “might,” “will,” “should,” “expect,” “plan,” “anticipate,” “believe,” “estimate,” “project,” “intend,” “future,” “potential,” or “continue,” and other similar expressions are intended to identify forward-looking statements. For example, all statements we make regarding our expectations regarding our programs and therapies, including but not limited to the timing or likelihood of regulatory filings and approvals, our commercialization plans, and addressable market for approved products are forward looking. All forward-looking statements are based on estimates and assumptions by our management that, although we believe to be reasonable, are inherently uncertain. All forward-looking statements are subject to risks and uncertainties that may cause actual results to differ materially from those that we expected. These statements are also subject to a number of material risks and uncertainties that are described in our most recent quarterly report on Form 10-Q, as well as our subsequent filings with the Securities and Exchange Commission. Any forward-looking statement speaks only as of the date on which it was made. We undertake no obligation to publicly update or revise any forward-looking statement, whether as a result of new information, future events or otherwise, except as required by law.



*pursuing curative gene therapies ...*

**TO GIVE PATIENTS AND THEIR FAMILIES MORE BLUEBIRD DAYS**

# Demonstrating gene therapy expertise across clinical, regulatory and commercial

## Clinical Leadership

**180+ patients**  
treated with bluebird  
therapies across 8  
clinical trials

**Over 10+ years**  
of gene therapy research

## Regulatory Success

Industry leader with **2 FDA**  
**approved gene**  
**therapies and seeking**  
**3<sup>rd</sup>** in 2023

Established track record for  
LVV technology, **with 5**  
**regulatory submissions**

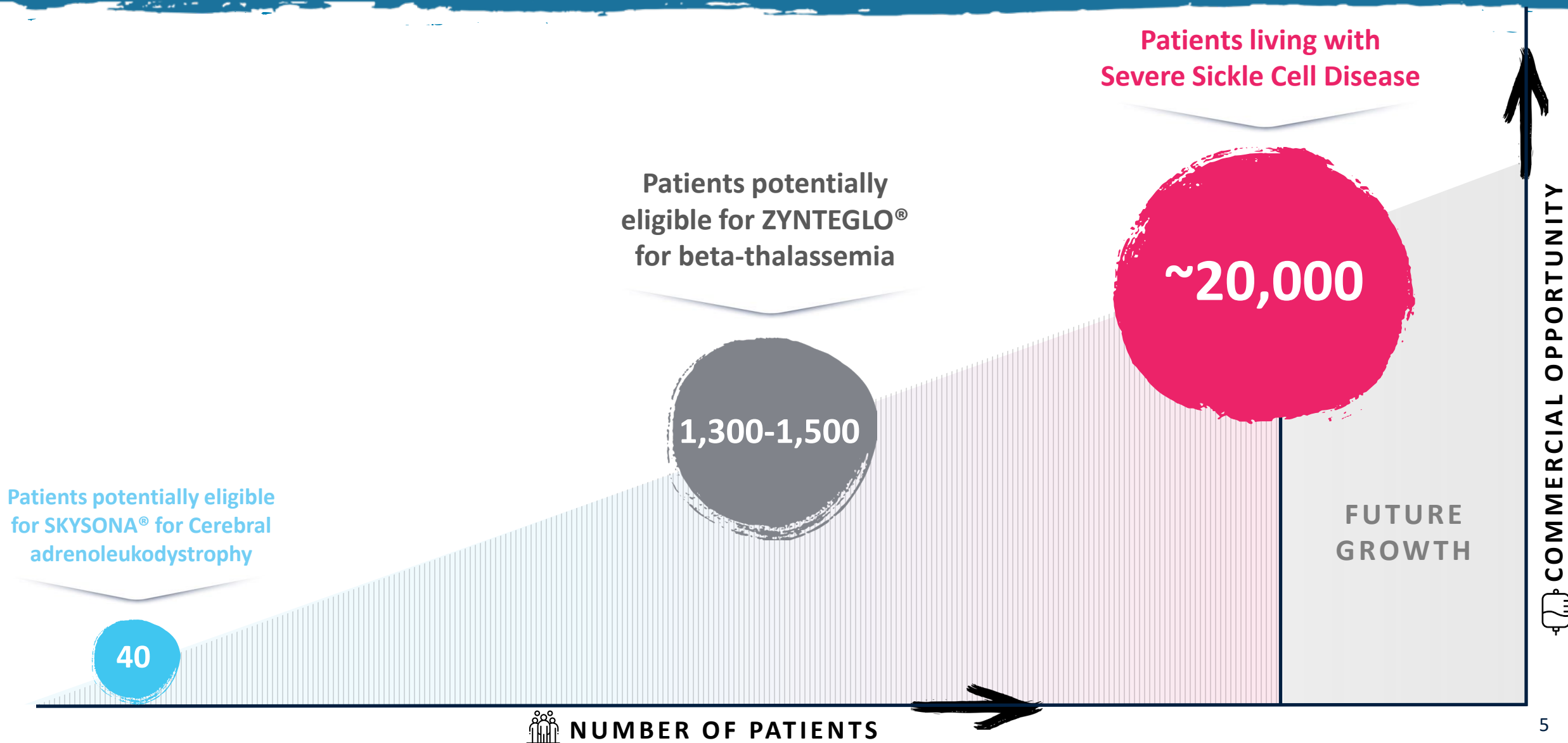
## Commercial Impact

**2 ongoing US launches,**  
all with wholly-owned global  
rights

**~22,000 patients**  
potentially addressable with  
our 3 programs in the U.S.<sup>1</sup>

<sup>1</sup> Hassell KL. Population estimates of sickle cell disease in the U.S. Am J Prev Med. 2010;38(4 Suppl):S512-521; Jul '21 bbb analysis of Komodo patient-level claims data (Apr '20 – Mar '21), IQVIA patient-level claims data (Aug '18 – Jul '19); Hulihan, Mary M., et al. State-based surveillance for selected hemoglobinopathies. Genetics in Medicine 17.2 (2015): 125-130.; Bezman L, et al. Adrenoleukodystrophy: Incidence, new mutation rate, and results of extended family screening. Ann Neurol. 2001;49:512-517; Moser HW, Mahmood A, Raymond GV. X-linked adrenoleukodystrophy. Nature Clin Pract Neurol. 2007;3(3):140-51

# Momentum building with near-term commercial launches; opportunity to deliver significant value for patients and shareholders



# Inherited hemoglobin disorders



Launching now



  
**zynteglo**<sup>®</sup>  
(betibeglogene autotemcel)  
suspension for IV infusion

# ZYNTEGLO commercial launch off to a strong start

Launch built on three key pillars

*Patient Interest*



*QTC Network*



*Access &  
Reimbursement*



ZYNTEGLO®



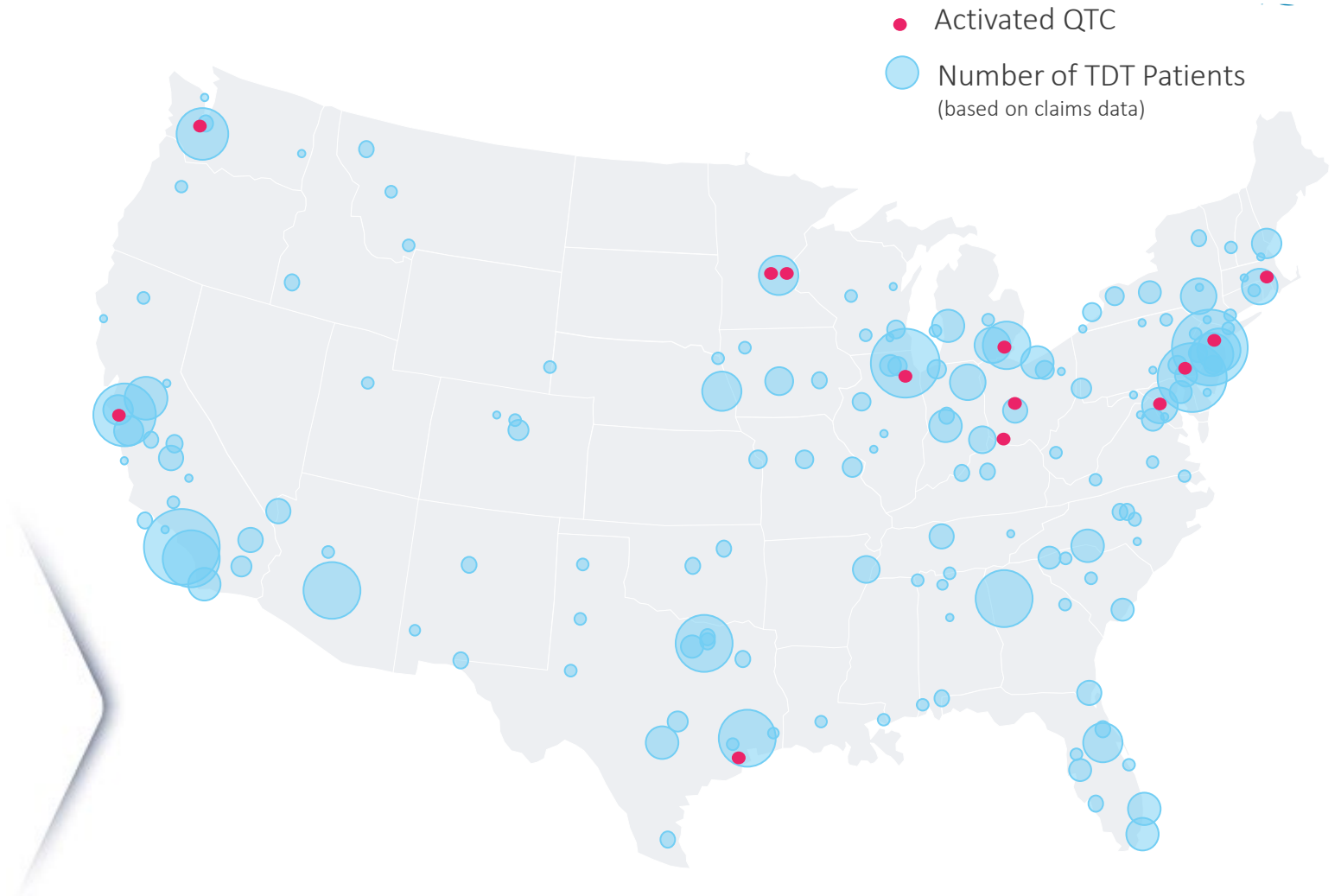
# Fit-for-purpose Qualified Treatment Center (QTC) network being activated in waves

## Targeted QTC selection

- Focused on high prevalence states
- Centers actively treating beta-thalassemia today
- Deep experience with commercial cell and gene therapies

## QTC growth aligned with demand

- QTCs in on-boarding or MSA negotiation stage
- Anticipated expansion to ~40-50 QTCs by YE 2023 to maximize opportunity for ZYNTEGLO and in anticipation of lovo-cel launch



# Confident in timely, quality access and reimbursement with upfront payment at \$2.8M price

## PRICE TIED TO RECOGNIZED VALUE

### Beta-thalassemia requiring regular RBC transfusions is associated with:

- \$6.4 million average lifetime medical care cost per patient<sup>1</sup>
- 23X higher average total health care cost per patient per year vs. general population<sup>2</sup>
- Blood transfusions every 2-5 weeks for life<sup>3</sup>

## SIMPLE AND INNOVATIVE PAYMENT STRATEGY

### bluebird is offering payers:

- One-time upfront payment
- Outcomes-based agreement with up to 80% rebate if patient does not reach transfusion independence within 2 years
- Clinically-relevant outcome, easily tracked in claims data

## ENCOURAGING PAYER INTERACTIONS

### All target payers have responded favorably to approach:

- Estimated 70-75% of patients with beta-thalassemia have commercial insurance
- Engaging with state Medicaid agencies representing ~80% of publicly-insured beta-thalassemia patients

Early indications show value of ZYNTEGLO is recognized

## Patients are achieving access

**>190M**

**lives covered by a favorable  
coverage policy**

**2 weeks**

**on average for prior  
authorization approvals for  
drug product**

**ZERO**

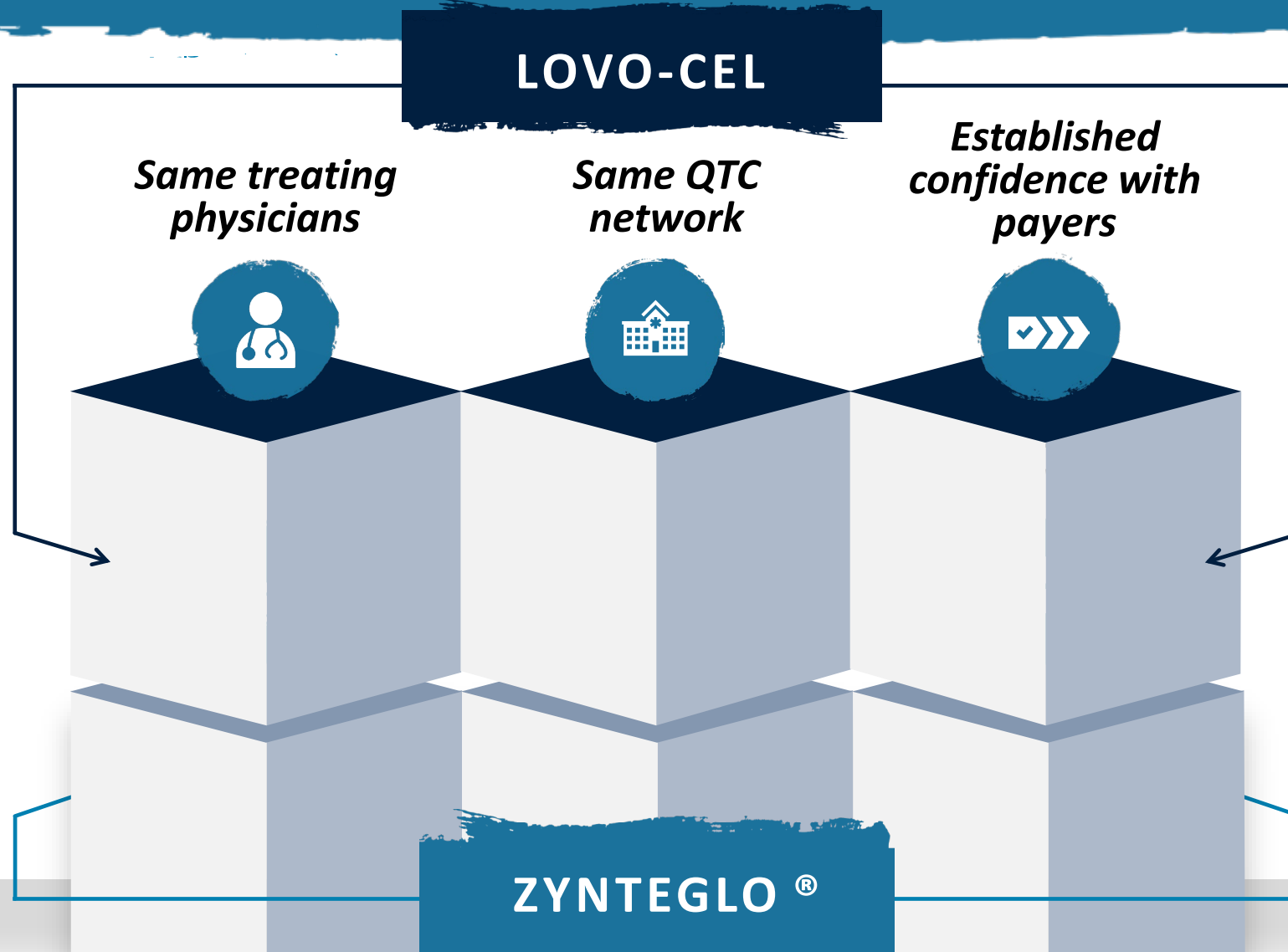
**ultimate denials to date**

# ZYNTEGLO<sup>®</sup> manufacturing allows for flexible scheduling and is designed to deliver high quality drug product



*Bulk of time spent on release testing to deliver high quality drug product*

# ZYNTEGLO expected to enable seamless transition to commercializing lovo-cel for sickle cell disease



# Opportunity to address a critical unmet need for >20,000 individuals living with severe sickle cell disease in the US



## LARGE PATIENT POPULATION

- 1 in 365 Black or African American babies is born with sickle cell disease<sup>1</sup>
- **>20,000 SCD patients** in the US may be addressed by gene therapy<sup>2</sup>

## SIGNIFICANT UNMET NEED

- VOs are the hallmark of SCD, but the disease is more than just pain
- 1 in 4 patients have a stroke by age 45<sup>3</sup>
- Widespread risk of organ damage or organ failure<sup>3</sup>
- 75% report difficulty completing daily tasks<sup>4</sup>

## MEANINGFUL OPPORTUNITY

- Patients average \$4.0 million in direct medical costs, despite a median age of death of only 45<sup>5</sup>
- Approximately 65% report giving up a job due to SCD<sup>4</sup>
- Estimates of foregone income over a lifetime up to \$1.3 million<sup>6</sup>
- Nearly 1/3 report experiencing discrimination in a healthcare setting<sup>7</sup>

# lovo-cel BLA submitted in April 2023

**Most robust and longest follow up of any gene therapy program for SCD**

## **BLA includes:**

- ✓ HGB-206 Group C as primary basis of effectiveness 36 patients with a median 32 months of follow-up and 2 patients in the HGB-210 study with 18 months of follow-up
- ✓ Pivotal study HGB-206; largest gene therapy study in SCD to date with clinically meaningful primary endpoint
- ✓ Safety data from 50 patients treated across the entire lovo-cel program with six patients with  $\geq$  six years of follow-up

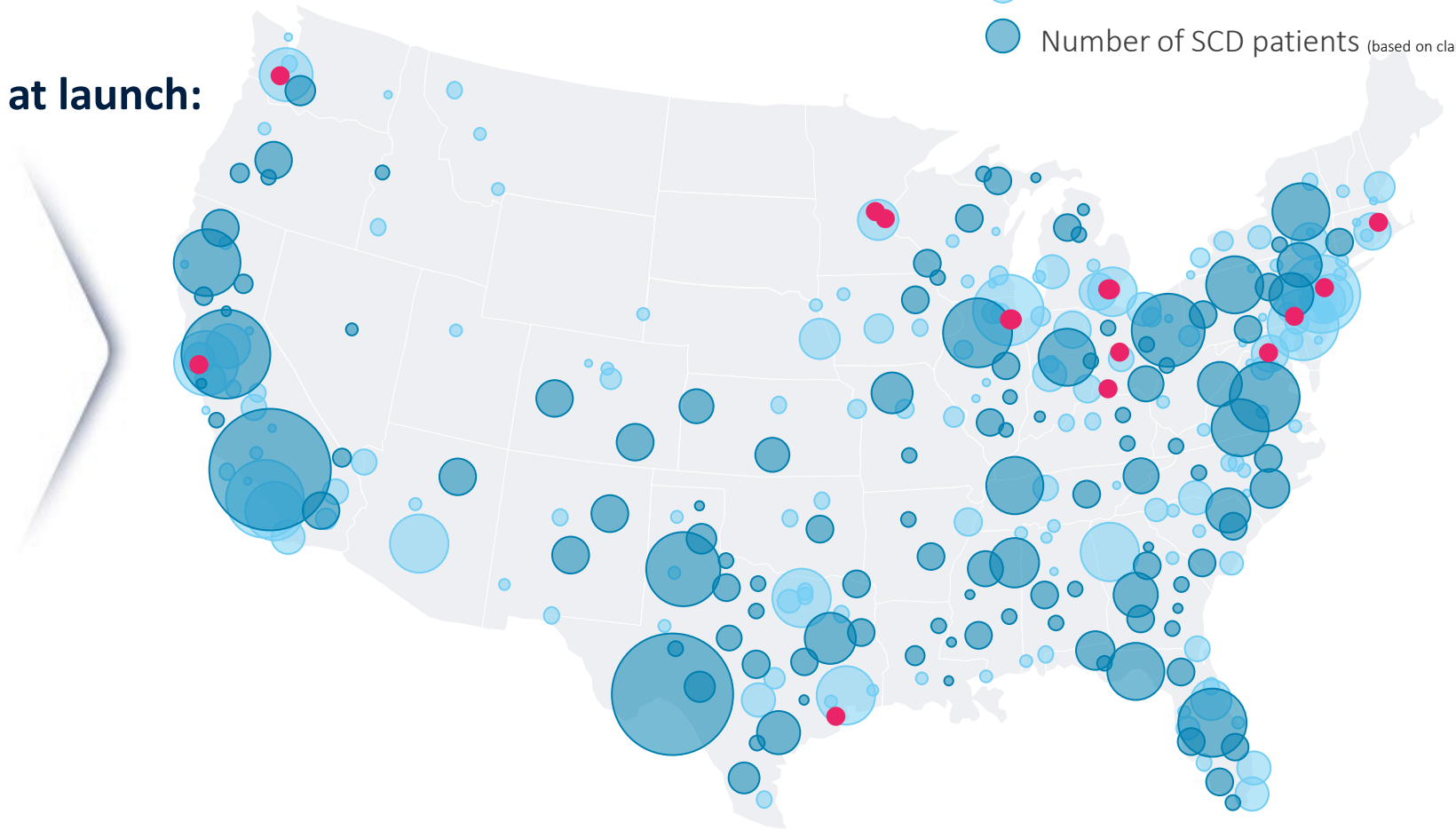
**Anticipate BLA acceptance in Q2 2023**

# Planned 2023 network expansion ensures QTCs are in place and ready to treat appropriate SCD patients upon FDA approval of lovo-cel

- Activated QTC for ZYNTEGLO
- Number of TDT Patients (based on claims data)
- Number of SCD patients (based on claims data)

## Significant synergies in QTC network at launch:

- Expansion to ~40-50 QTCs by YE 2023 maximizes opportunity to rapidly reach patients
- Established contract allows for simplified activation process
- Estimated 65% of SCD patients within 50 miles of a planned QTC; (95% within 200 miles); anticipate continued expansion in 2024





SKYSONA®





# Launching now

  
skysona™  
(elivaldogene autotemcel)

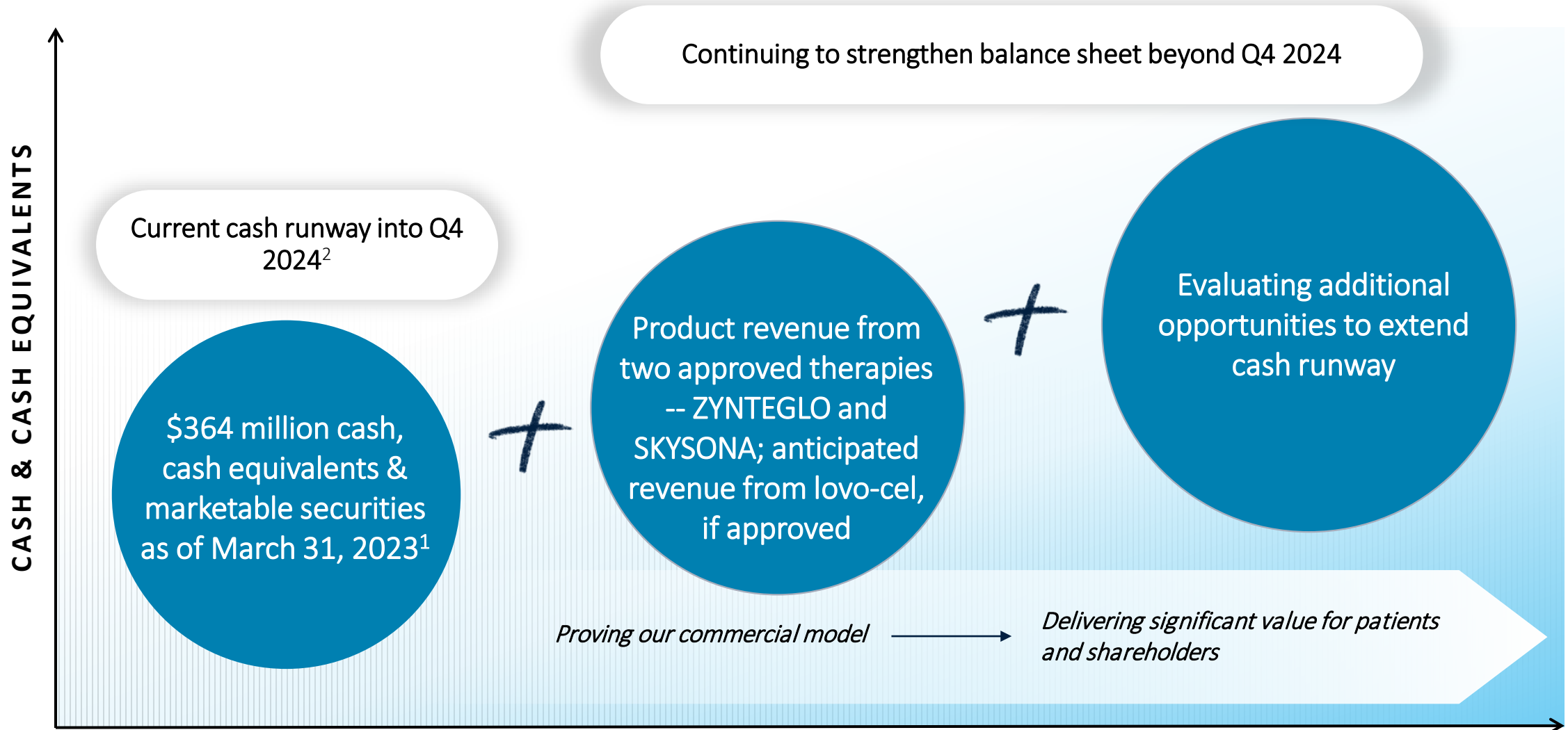
- First commercial infusion has been completed; in total cell collection completed for three patients for SKYSONA
- Three activated QTCs
- Zero ultimate denials to date; payers recognize value and urgency to treat
- Anticipate 5-10 patient starts in 2023

Early, active cerebral adrenoleukodystrophy refers to asymptomatic or mildly symptomatic (neurologic function score, NFS  $\leq 1$ ) boys who have gadolinium enhancement on brain magnetic resonance imaging (MRI) and Loes scores of 0.5-9. SKYSONA was granted accelerated approval based on 24-month Major Functional Disability (MFD)-free survival observed in clinical studies. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory trial(s). \*Real patients pictured, but they have not used our therapies. QTC: Qualified Treatment Center

# Closing



# Strong financial position – cash burn and runway horizon



1. Contains \$45m in restricted cash.; 2. Cash Runway is calculated using the current cash balance / net burn rate (cash from revenue less cash paid for expenses)

# Upcoming milestones

*First to market gene therapy for inherited hemoglobin disorders in the U.S.*

## SKYSONA® for cerebral adrenoleukodystrophy

- Anticipate 5-10 patient starts in 2023
- Continued launch expansion throughout 2023

## ZYNTEGLO® for beta-thalassemia

- First commercial revenue expected in Q2 2023
- Continued launch expansion throughout 2023
- 40-50 QTCs by end of 2023

## lovo-cel for sickle cell disease

- Anticipate BLA acceptance in Q2 2023
- Commercial launch expected early 2024

*Proving our commercial model* →

*Significant value driver* →

# bluebird bio: Setting the standard and proving the gene therapy commercial model

Demonstrating gene therapy expertise across clinical, regulatory and commercial



Momentum building with near-term commercial launches



Opportunity to deliver significant value for patients and shareholders

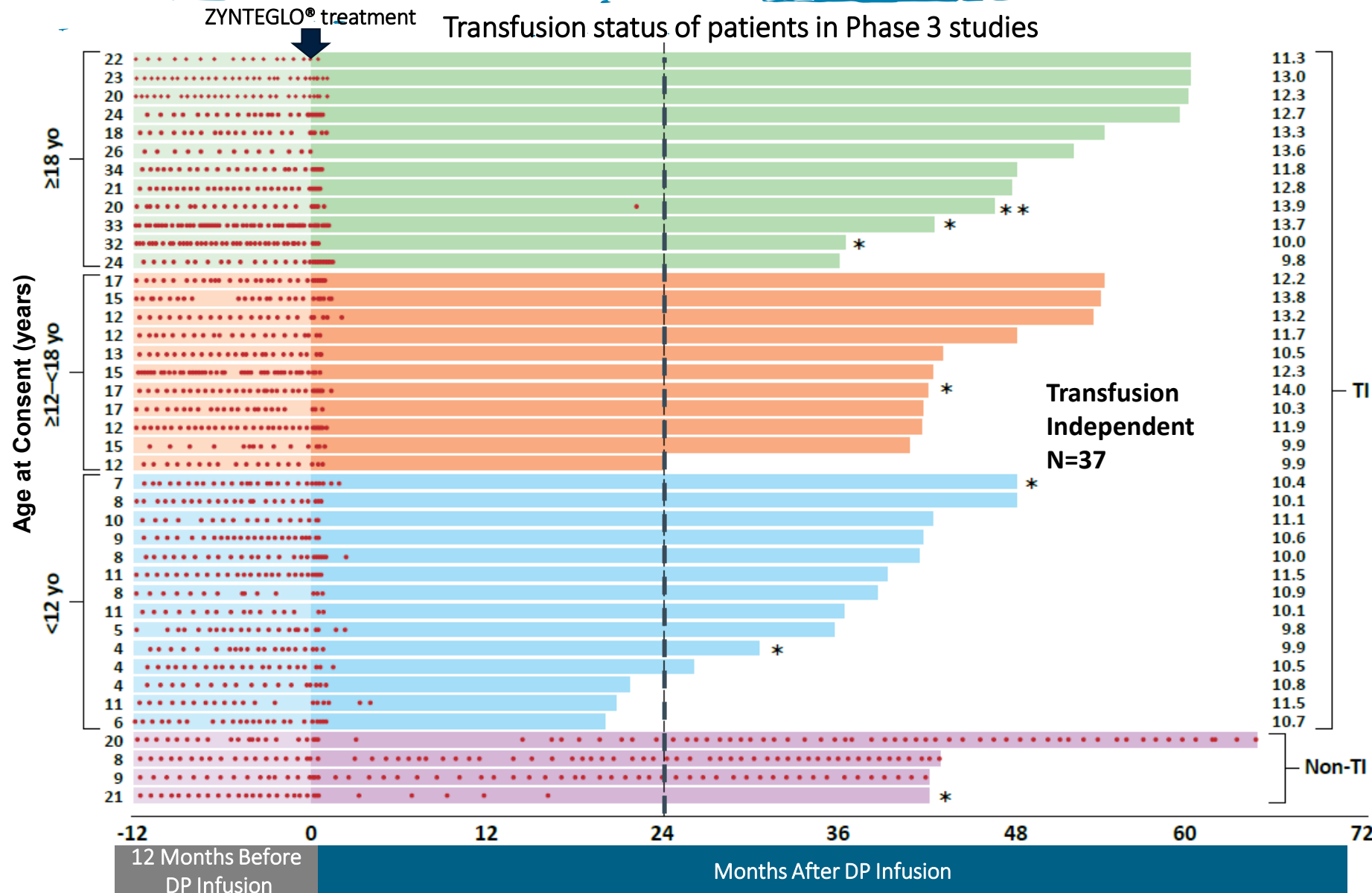


thank you

Q + A



# ZYNTEGLO<sup>®</sup> approval is underscored by impressive clinical study data

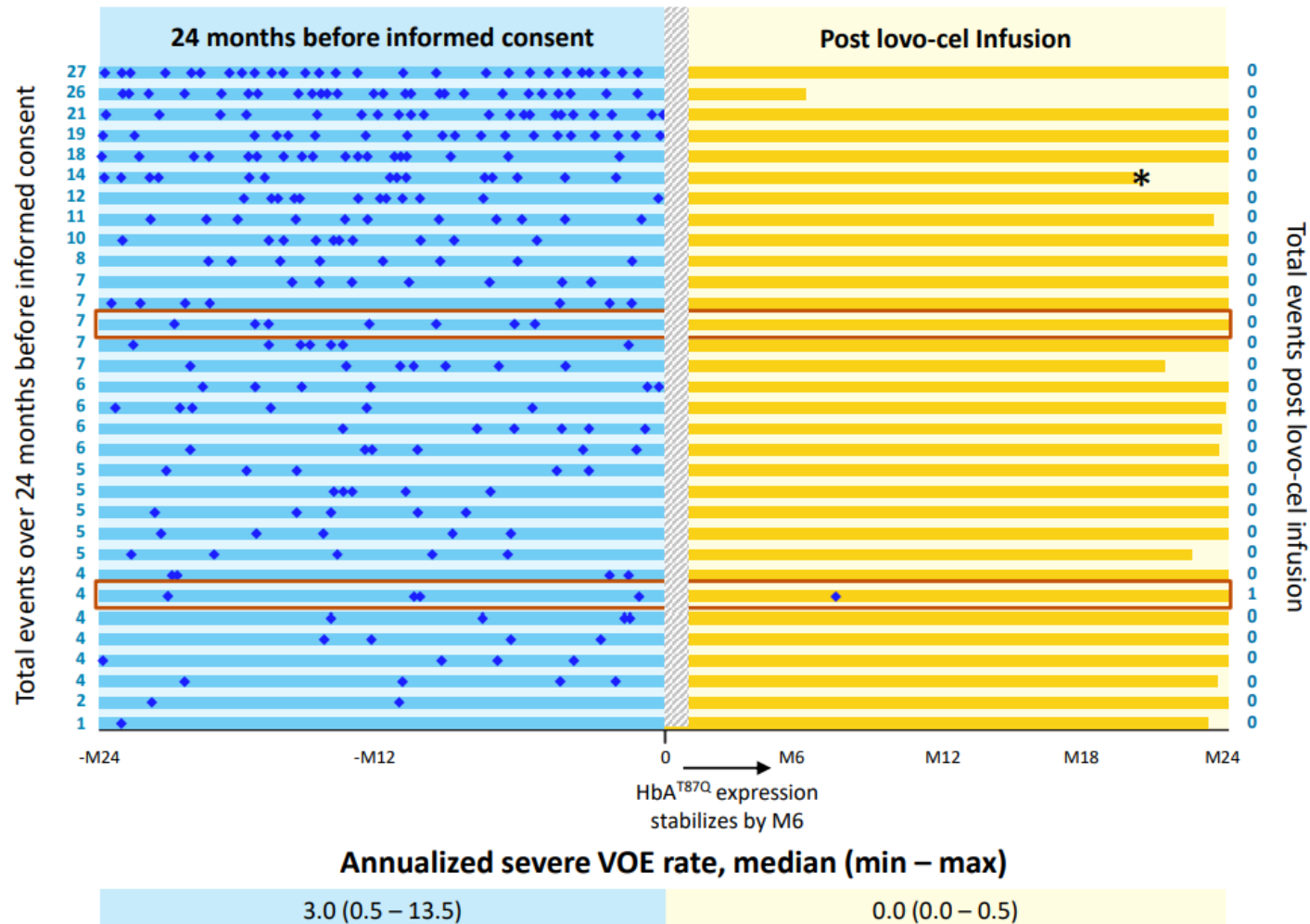


**In Phase 3 studies presented at ASH 2022:**

- 90% of patients achieved **transfusion independence (TI)** and normal or near-normal hemoglobin levels
- All patients who achieved TI **remained transfusion free** as of last follow-up
- **Durable results** with longest follow-up out to **5 years**
- Results were **consistent across ages and genotypes**
- Majority of AEs and SAEs **were consistent with myeloablative conditioning**

\*\*After a planned orthopedic surgery, the patient had blood loss, which required 1 packed red blood cell transfusion

# lovo-cel: most advanced sickle cell disease gene therapy development program in the industry



N=32  
 ◆ Severe VOE  
 \* Death

Data as of Aug 11, 2022

## Update on Pivotal Cohort (HGB 206 Group C) Presented at ASH 2022

- **96%** experienced complete resolution of severe VOEs through 24 months of follow-up (ASH 2022)
- As of August 2022, 50 patients had been treated with lovo-cel, with up to **7 years** of follow-up (median: 37.7 months)\*
- **Safety data remained consistent** with the known side effects of autologous hematopoietic stem cell collection, myeloablative single-agent busulfan conditioning and underlying SCD
- As previously reported, patient with significant baseline SCD-related cardiopulmonary disease died >18 months post-infusion (considered unlikely to be related to lovo-cel).
- Updated data cut, including long-term follow-up submitted in BLA package

\*50 patients treated includes patients from HGB-205, HGB-206 Group A, Group B and Group C and HGB-210

# The approval of SKYSONA<sup>®</sup> was based on data from bluebird bio's Phase 2/3 study ALD-102 and Phase 3 ALD-104 study

THE NEW ENGLAND JOURNAL of MEDICINE

October 4, 2017

ORIGINAL ARTICLE

## Hematopoietic Stem-Cell Gene Therapy for Cerebral Adrenoleukodystrophy

Florian Eichler, M.D., Christine Duncan, M.D., Patricia L. Musolino, M.D., Ph.D., Paul J. Orchard, M.D., Satrio De Oliveira, M.D., Adrian J. Thrasher, M.D., Myriam Armant, Ph.D., Colleen Dansereau, M.S.N., R.N., Troy C. Lund, M.D., Weston P. Miller, M.D., Gerald V. Raymond, M.D., Raman Sankar, M.D., Ami J. Shah, M.D., Caroline Sevln, M.D., Ph.D., H. Bobby Gaspar, M.D., Paul Gissen, M.D., Hernan Amartino, M.D., Drago Bratkovic, M.D., Nicholas J.C. Smith, M.D., Asif M. Paker, M.D., Esther Shamir, M.P.H., Tara O'Meara, B.S., David Davidson, M.D., Patrick Aubourg, M.D., and David A. Williams, M.D.

N Engl J Med 2017; 377:1630-1638



## EFFICACY

Accelerated approval was based on a post hoc analysis of 24-month improvement in major functional disability (MFD) free survival

SKYSONA treated patients (n = 11) had an estimated 72% likelihood of MFD-free survival at 24 months compared to untreated patients in a natural history study (n = 7) who had only an estimated 43% likelihood of MFD-free survival

A total of 67 patients were treated in clinical trials

## SAFETY

The label includes a Boxed Warning on SKYSONA for hematologic malignancy; as previously reported, 3 boys treated in our clinical trials developed MDS which is believed to be caused by insertion of the Lenti-D vector

Other risks include serious infections, prolonged cytopenias, delayed platelet engraftment, risk of neutrophil engraftment failure, and hypersensitivity reactions.

Under accelerated approval, bluebird has agreed to provide confirmatory data to the FDA