



# BETTER IS POSSIBLE.

JP Morgan 43<sup>rd</sup> Annual Healthcare Conference

Frank D. Lee  
*Chief Executive Officer*

# Forward-looking statements and where to find additional information

*Any statements in this presentation about Pacira's future expectations, plans, trends, outlook, projections and prospects, and other statements containing the words "believes," "anticipates," "plans," "estimates," "expects," "intends," "may," "will," "would," "could," "can" and similar expressions, constitute forward-looking statements within the meaning of Section 21E of the Securities Exchange Act of 1934, as amended (the "Exchange Act"), and the Private Securities Litigation Reform Act of 1995, including, without limitation, statements related to '5x30', our growth and business strategy, our future outlook, contributions of new executives, our intellectual property and patent terms, our future operating results and trends, our strategy, plans, objectives, expectations (financial or otherwise) and intentions, future financial results and growth potential, including our plans with respect to the repayment of our indebtedness, anticipated product portfolio, development programs, development of products, strategic alliances, plans with respect to the Non-Opioids Prevent Addiction in the Nation ("NOPAIN") Act and other statements that are not historical facts. For this purpose, any statement that is not a statement of historical fact should be considered a forward-looking statement. We cannot assure you that our estimates, assumptions and expectations will prove to have been correct. Actual results may differ materially from those indicated by such forward-looking statements as a result of various important factors, including risks relating to, among others: risks associated with acquisitions, such as the risk that the acquired businesses will not be integrated successfully, that such integration may be more difficult, time-consuming or costly than expected or that the expected benefits of the transaction will not occur; our manufacturing and supply chain, global and U.S. economic conditions (including inflation and rising interest rates), and our business, including our revenues, financial condition, cash flow and results of operations; the success of our sales and manufacturing efforts in support of the commercialization of EXPAREL, ZILRETTA and iovera°; the rate and degree of market acceptance of EXPAREL, ZILRETTA and iovera°; the size and growth of the potential markets for EXPAREL, ZILRETTA and iovera° and our ability to serve those markets; our plans to expand the use of EXPAREL, ZILRETTA and iovera° to additional indications and opportunities, and the timing and success of any related clinical trials for EXPAREL, ZILRETTA and iovera°; the commercial success of EXPAREL, ZILRETTA and iovera°; the related timing and success of U.S. Food and Drug Administration supplemental New Drug Applications and premarket notification 510(k)s; the related timing and success of European Medicines Agency Marketing Authorization Applications; our plans to evaluate, develop and pursue additional product candidates utilizing our proprietary multivesicular liposome ("pMVL") drug delivery technology; the approval of the commercialization of our products in other jurisdictions; clinical trials in support of an existing or potential pMVL-based product; our commercialization and marketing capabilities; our ability to successfully complete capital projects; the outcome of any litigation; the ability to successfully integrate any future acquisitions into our existing business; the recoverability of our deferred tax assets; assumptions associated with contingent consideration payments; assumptions used for estimated future cash flows associated with determining the fair value of the Company; the anticipated funding or benefits of our share repurchase program; and factors discussed in the "Risk Factors" of our most recent Annual Report on Form 10-K and in other filings that we periodically make with the Securities and Exchange Commission (the "SEC").*

*In addition, the forward-looking statements included in this presentation represent our views as of the date of this presentation. These forward-looking statements involve known and unknown risks, uncertainties and other important factors that could cause actual results to differ materially from those indicated or implied by forward-looking statements, and as such we anticipate that subsequent events and developments will cause our views to change. Except as required by applicable law, we undertake no intention or obligation to update or revise any forward-looking statements, whether as a result of new information, future events or otherwise, and readers should not rely on these forward-looking statements as representing our views as of any date subsequent to the date of this presentation.*

When a patient is in pain, their world gets smaller. Our goal is to remove the constraints that pain imposes.



A portrait of Frank D. Lee, Chief Executive Officer & Director, against a blue background. He is wearing a dark suit jacket over a light blue button-down shirt.

**MISSION**

**We deliver innovative,  
non-opioid pain therapies to  
transform the lives of patients.**

Frank D. Lee | Chief Executive Officer & Director

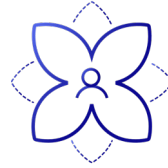
# Strong execution in 2024 has set the foundation for sustainable success in 2025 and beyond

- ✓ Achieved FY2024 revenue guidance
- ✓ Secured EXPAREL & iovera<sup>o</sup> reimbursement under NOPAIN
- ✓ Obtained FDA RMAT designation for PCRX-201 & presented compelling 2-year data from robust Phase 1 study
- ✓ Established commercial, medical & market access powerhouse

Abbreviations: FY, full-year; FDA, Food and Drug Administration; RMAT, Regenerative Medicine Advanced Therapy.

“ We enter 2025 with a clear corporate mission, guiding principles, values...

## GUIDING PRINCIPLES



**Keep the patient at the center**



**Follow the science**



**Treat our people well**

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## VALUES

- Every day, we are determined to achieve the extraordinary
- Integrity is the foundation of who we are
- We respect diverse talent and the collective power of a unified team

# 5x30 path to growth & value creation

## ACCELERATING GROWTH IN BASE BUSINESS

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**1** | **Patients:** More than **3 million** patients treated per year

**2** | **Product revenue:** **Double-digit** compounded annual growth rate

**3** | **Profitability:** **5-percentage point** gross margin improvement over 2024

## ADVANCING PIPELINE VALUE

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**4** | **Pipeline:** Clinical pipeline expansion with **5 novel programs** in development

**5** | **Partnerships:** Establishing **5 partnerships** including pipeline and commercial agreements

...a disciplined growth-oriented plan, and a commercial, medical and market access powerhouse. ”

Frank D. Lee | Chief Executive Officer & Director

# 5x30

path to growth &  
value creation

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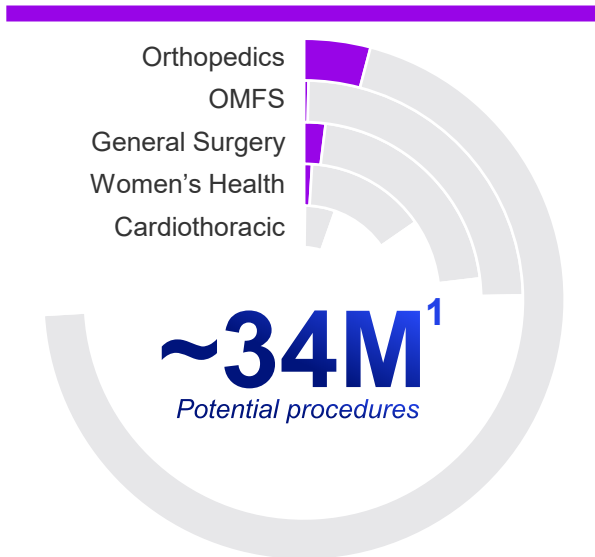


# Best-in-class non-opioid commercial portfolio addressing significant unmet needs



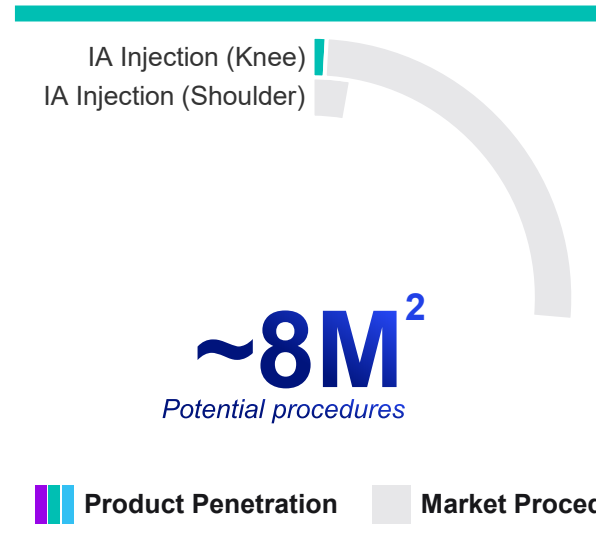
## EXPAREL

The market's leading long-acting, local analgesic for postsurgical pain



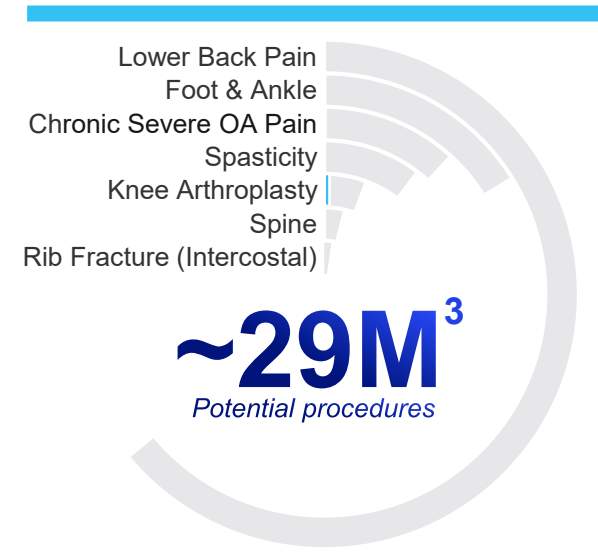
## ZILRETTA

The only FDA-approved extended-release IA injection for 3 months of OA knee pain



## iovera<sup>o</sup>

The only novel, handheld device for immediate, long-lasting, drug-free pain control using advanced cold technology



<sup>1</sup>FY2023 IQVIA Market Procedural Data; IQVIA EXPAREL Utilization Data Triangulated With Pacira Internal Sales Data.

<sup>2</sup>FY2023 IQVIA Market Procedural Data; ZILRETTA SOB (Source of Business) Utilization Data Triangulated With Pacira Internal Sales Data.

<sup>3</sup>FY2023 IQVIA Market Procedural Data; Spasticity Patient Model; Secondary Market Research; Pacira Internal Sales Utilization Data.

Abbreviations: IA, intra-articular.

# NOPAIN: Expected to significantly expand access to EXPAREL and iovera° by overcoming flaws in bundled payments

**EXPAREL and iovera° are among the 11 drugs and devices qualifying for separate payment via NOPAIN**

## Flaws of bundled payments for surgical procedures

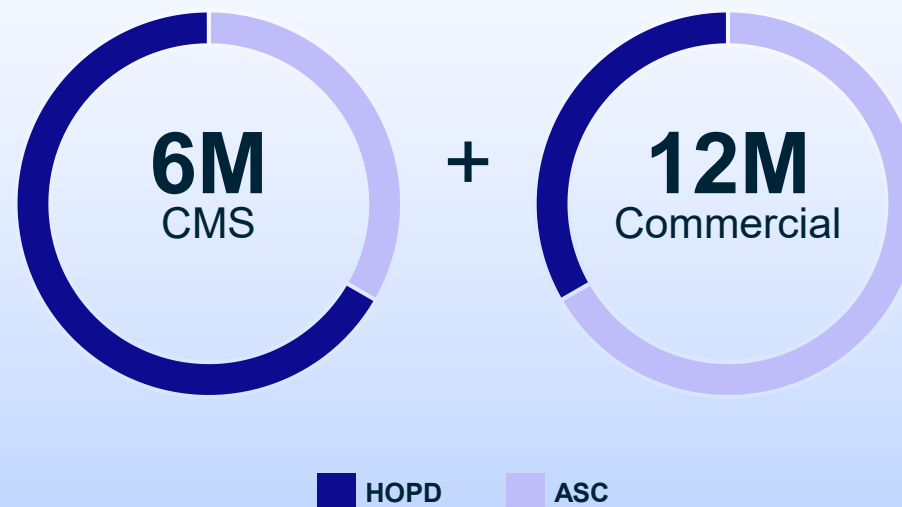
- Impedes patient and provider access to best-practice pain management by incentivizing the use of cheaper, generic approaches that often incorporate opioids
- Separate reimbursement at ASP+6% eliminates the cost barriers

## Patient-centric legislative solution

- Founding of Voices for Non-Opioid Choices—a non-partisan coalition dedicated to preventing addiction before it starts by improving access to non-opioid options for acute pain
- NOPAIN Act signed into law in 2023

## Opportunity to greatly expand patient access

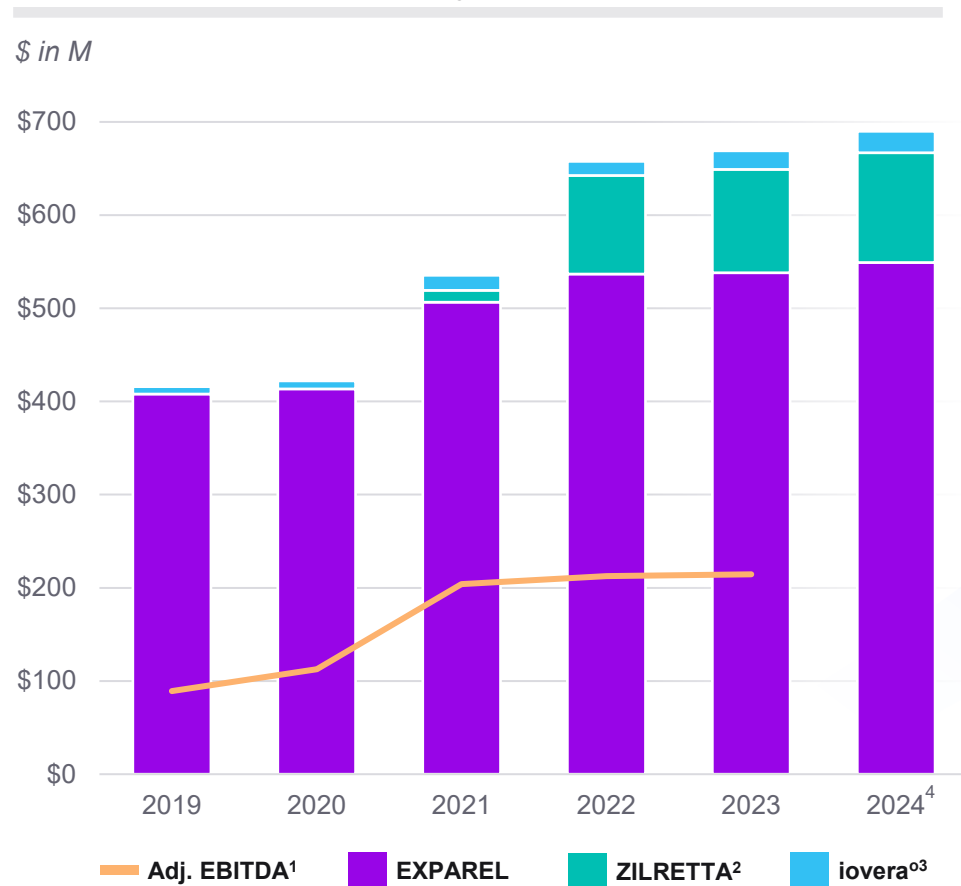
Reimbursement pathway for **18M** surgical procedures in HOPD and ambulatory settings<sup>1</sup>



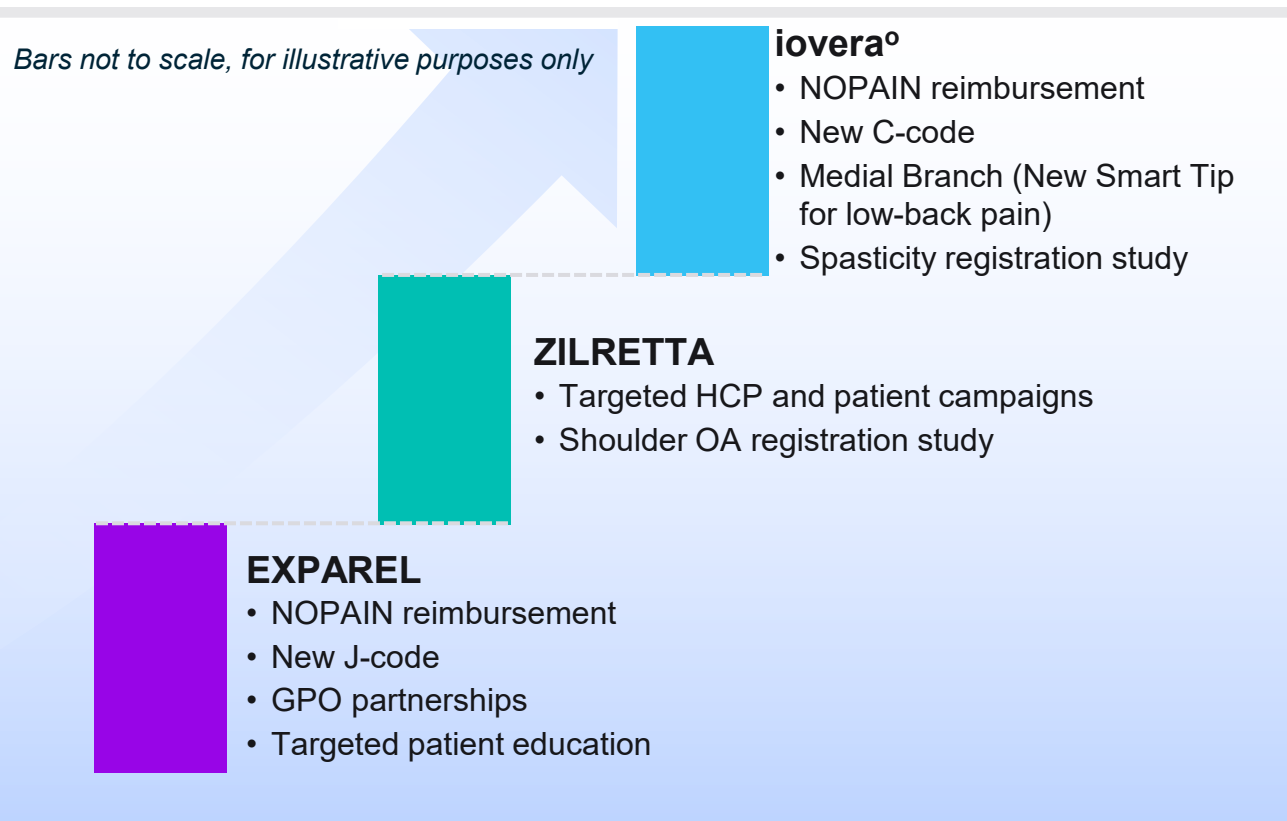
<sup>1</sup>FY2023 IQVIA Market Procedural Data.

# Strong base business with significant growth potential

## Product revenues and adjusted EBITDA



## Key growth drivers in 2025+ with a 5YR double-digit revenue CAGR target



<sup>1</sup>See non-GAAP disclosure in appendix for reconciliation to GAAP.

<sup>2</sup>Pacira began recognizing ZILRETTA sales upon completing its acquisition of Flexion in November 2021.

<sup>3</sup>Pacira began recognizing sales of iovera<sup>o</sup> in April 2019 after completing its acquisition of MyoScience, Inc.

<sup>4</sup>Preliminary and unaudited.

Abbreviations: CAGR, compounded annual growth rate; HCP, healthcare practitioner.

# 5x30

path to growth &  
value creation

## ACCELERATING GROWTH IN BASE BUSINESS

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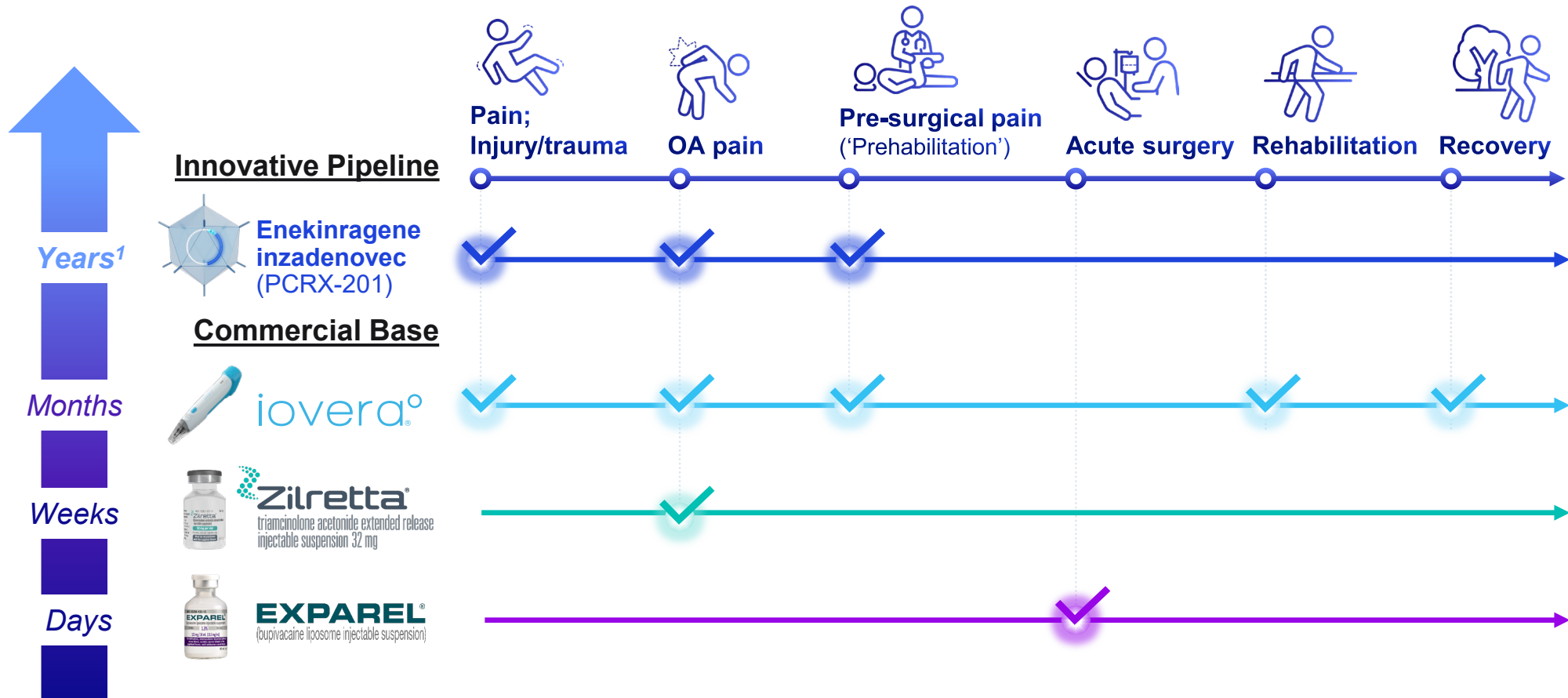
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# Uniquely positioned to deliver better outcomes across the patient journey



<sup>1</sup>Potential duration as product is not FDA approved.  
Abbreviations: OA, osteoarthritis.

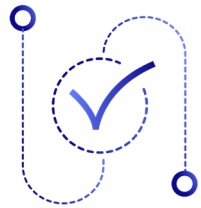
# Key data catalysts expected to begin in 2026

Product	Target	2025	2026	2027+	
<b>Innovative Pipeline</b>					
PCRX-201	Knee OA	Phase 2 Clinical Trial: Part A			2026: Phase 2 topline
		Phase 2 Clinical Trial: Part B			
<b>Commercial Base</b>					
 <small>(bupivacaine liposome injectable suspension)</small>	Pediatric 0 to <6	PK/Safety Clinical Trial			
	Intrathecal	Phase 1 Clinical Trial			
 <small>triamcinolone acetonide extended release injectable suspension 32 mg</small>	Shoulder OA	Registration Clinical Trial	2026: Phase 3 topline		
	Spasticity	Registration Clinical Trial	2026: Phase 3 topline		
	New SmartTip for Medial Branch Block (low back pain)	1Q25: Commercial launch			

Abbreviations: PK, pharmacokinetics.

# Enekinragene inzadenovec (PCRX-201) has the potential to transform osteoarthritis (OA) treatment

A first-of-its-kind, locally-administered gene therapy for the treatment of common diseases like OA



## Well-validated pathway

FDA-approved drugs successfully target the IL-1 pathway in inflammatory joint diseases

Existing drugs that target IL-1 not practical in OA due to high and frequent dosing regimens



## Unprecedented clinical results

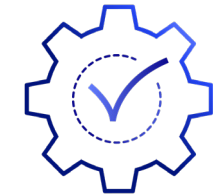
Robust Phase 1 trial with 72 adult patients aged 30 to 80 with moderate to severe OA

Unprecedented pain relief and durability across all levels of disease severity for at least 2 years from a single injection



## RMAT designation

First therapy to achieve these results and only one to earn FDA RMAT designation in osteoarthritis



## Attractive cost of goods

Localized administration and low dosing results in thousands of doses produced in a single batch

**High unmet need in OA with no new modalities approved in over 20 years**

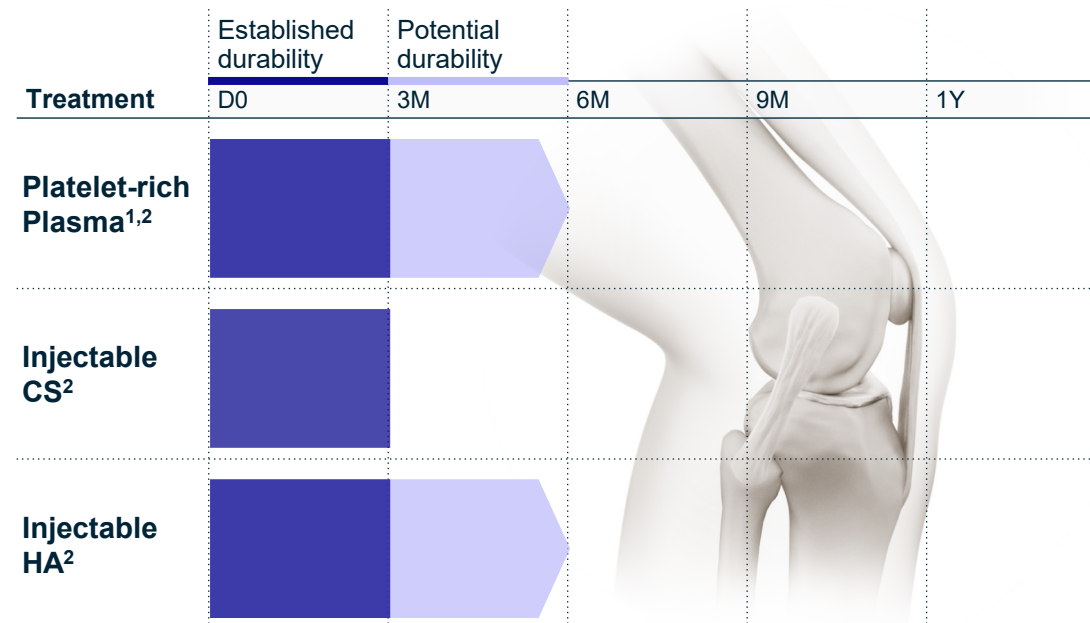
# Osteoarthritis: A serious disease of significant and growing economic burden that is starved for innovation

**1 in 18** → **14M**

U.S. adults of working age (18-64) suffer from knee OA

**2M** Are under 45 years of age

Patients suffering from knee OA say it impacts<sup>2</sup>



**PCR-X-201 could represent a revolution in OA treatment, addressing a validated root cause of disease and providing patients relief for years rather than months**

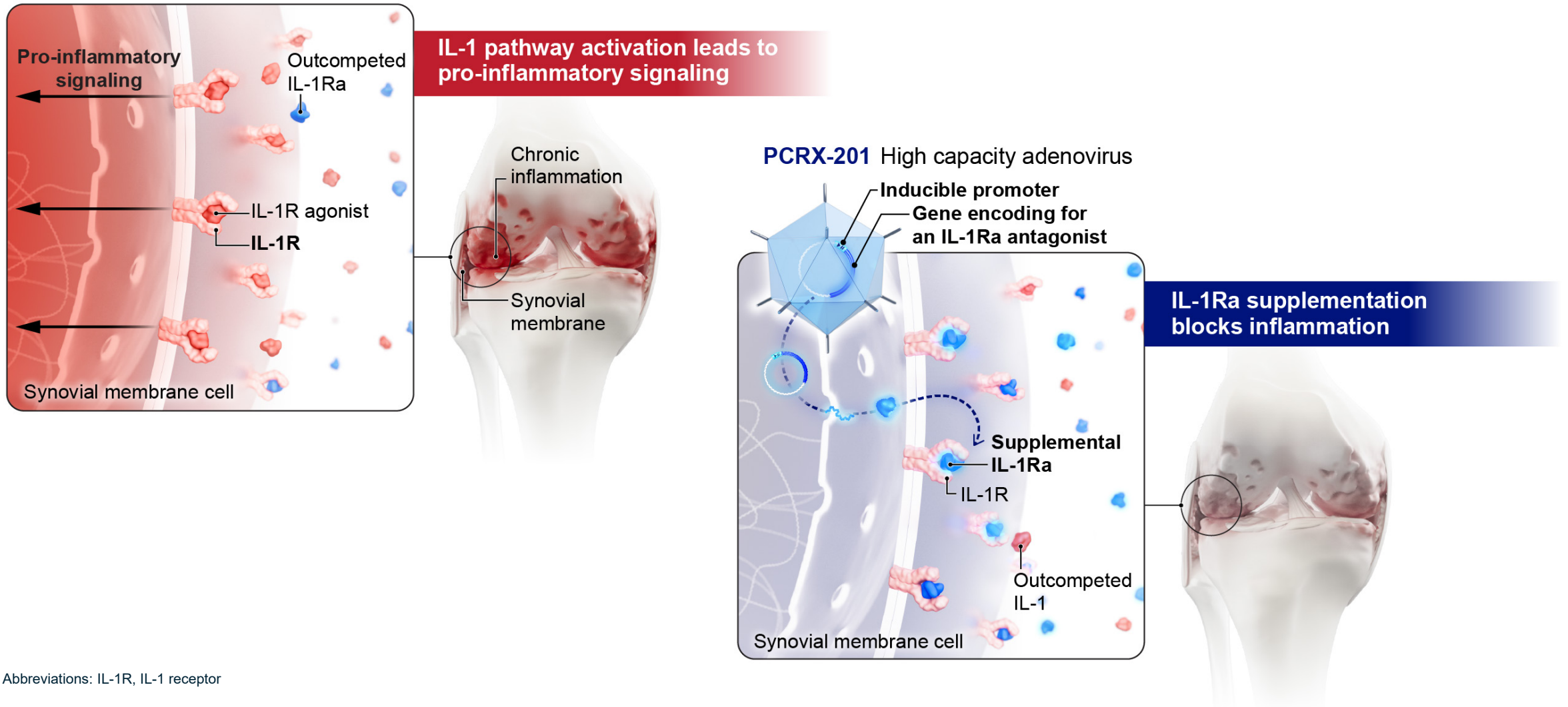
<sup>1</sup>Orthobiologic approaches are not FDA approved.

<sup>2</sup>[www.multivu.com/players/English/9104351-pacira-iovera-knee-pain-survey](http://www.multivu.com/players/English/9104351-pacira-iovera-knee-pain-survey).

Abbreviations: CS, Corticosteroids; D, day; HA, hyaluronic acids; IA, intra articular; M, month; NSAID, nonsteroidal anti-inflammatory drug; TKA, total knee arthroplasty; Y, year.



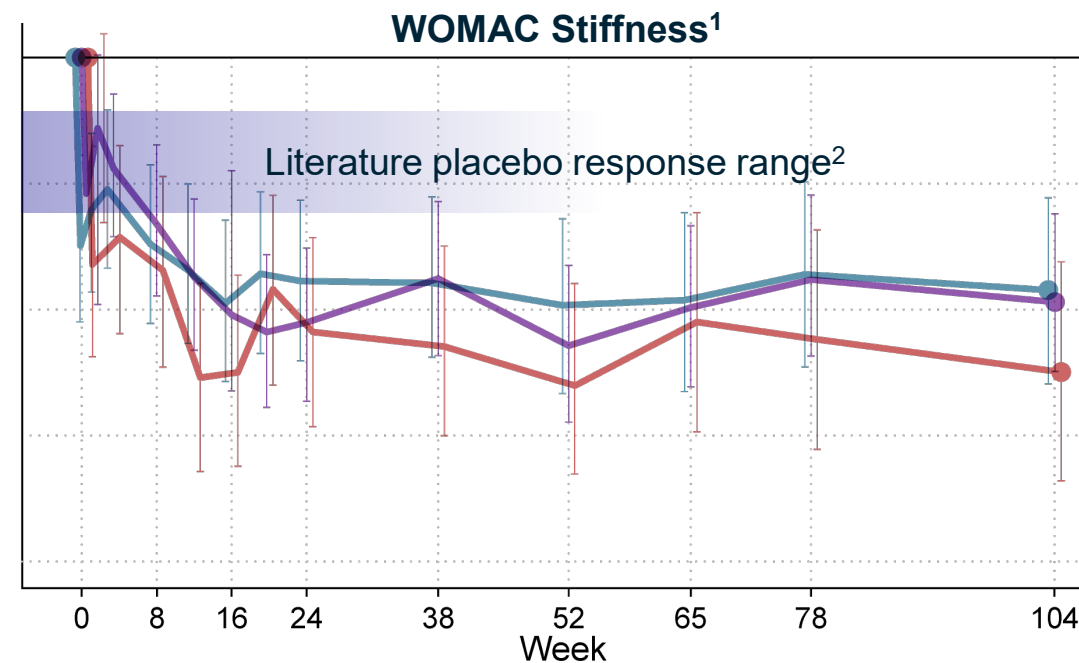
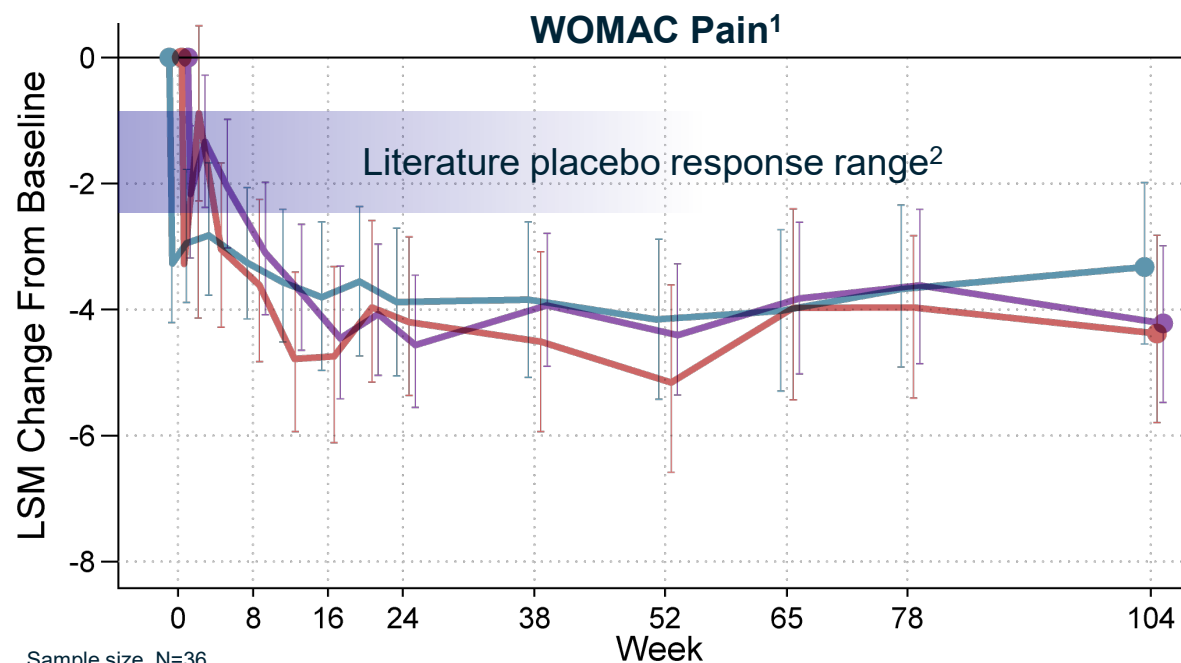
# PCRX-201 is locally administered to boost IL-1Ra production by the joint cells in the knee in response to inflammation



Abbreviations: IL-1R, IL-1 receptor

# >70% of patients saw a >50% improvement in pain and stiffness vs. baseline at week 16 and 78

Data presented at ACR 2024 (Cohen et. al.):



WOMAC Improvement

Sample size, N=36

Low	13	12	11	11	8	7	7	6	6
Mid	15	14	12	13	13	12	9	9	8
High	8	8	7	8	6	6	5	5	5

13	12	11	11	8	7	7	6	6
15	14	12	13	13	12	9	9	8
8	8	7	8	6	6	5	5	5

- 72 adult patients aged 30 to 80 with moderate to severe OA
- Two three-dose cohorts: co-administered intra-articular steroid cohort and a cohort that did not receive a steroid
  - Doses:  $1.4 \times 10^{10}$  GC (low);  $1.4 \times 10^{11}$  GC (mid);  $1.4 \times 10^{12}$  GC (high)
  - Well tolerated with most common AE dose-dependent, transient knee effusion

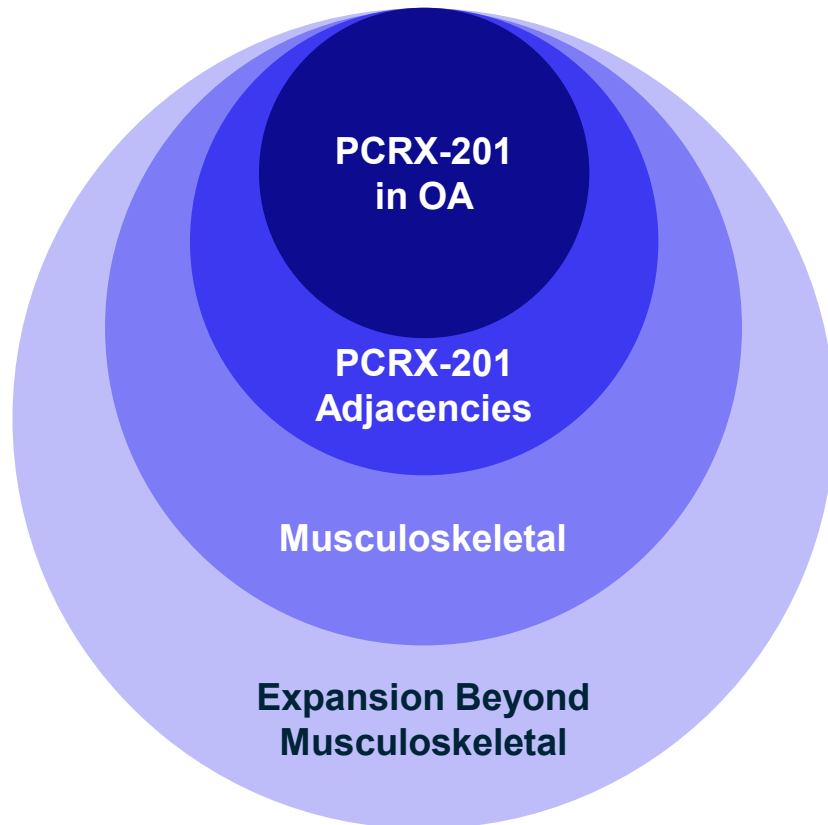
- **104-week data presented at ACR 2024**
  - Unprecedented pain relief and durability across all levels of disease severity for at least 2 years from a single injection
  - Greatest efficacy in co-administered steroid group
  - Well tolerated with most common AE dose-dependent, transient knee effusion

<sup>1</sup>Data from steroid pretreated cohort.

<sup>2</sup>Review of available literature shows ~1.0-2.5-point reduction in WOMAC scale attributable to placebo effect. Most studies go out to 12-24 weeks; very limited data available at 12-24 months.

Abbreviations: AE, adverse event; GC, genome copies; WOMAC, Western Ontario and McMaster Universities Osteoarthritis Index; ACR, American College of Rheumatology.

# PCRX-201 has the potential to be a pipeline within a product



**Potential disease-modifying platform**



**Localized administration**



**Addressing prevalent diseases of high unmet need**



**Attractive cost of goods profile**

# Disciplined capital allocation strategy to drive shareholder value



## Accelerating growth in base business

- Established commercial, medical & market access powerhouse
- Life cycle management programs in areas of high unmet need with favorable return on invested capital
- Educating patients and providers



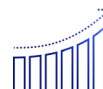
## Advancing pipeline value

- Therapeutic area focus on musculoskeletal pain and adjacencies
  - Large market, high unmet need and lacking innovation to date
- Prioritize mid-to-late-stage/derisked opportunities with validated MOAs and established reimbursement pathway
- PCRX-201 for Knee OA and adjacencies



## Balance sheet management

- Convertible notes maturing in 2025 and 2029, total of \$480M<sup>1</sup>
  - Strong cash balance and significant cash flow generation provides optionality for upcoming debt maturities
- Resourcefully leverage debt financing (Term Loan A, total of \$108M<sup>1</sup>)



## Return capital to shareholders

- Investment in growth with disciplined return of capital to shareholders
  - \$125mm available on share repurchase plan

<sup>1</sup>As of 9/30/2024.  
Abbreviations: MOA, mechanism of action.

# 5x30 path to long-term value creation

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We are transitioning into an innovative biopharmaceutical organization and intend to become the therapeutic area leader in musculoskeletal pain and adjacencies



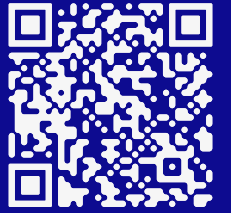
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IS POSSIBLE.**

Investor Contact:

[investor@pacira.com](mailto:investor@pacira.com)



Website



Investor-toolkit



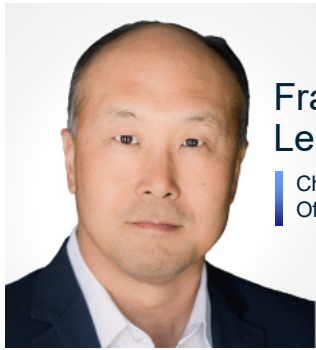
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# APPENDIX

# Seasoned executive leadership team



**Frank D. Lee**

Chief Executive Officer & Director

CEO Forma Therapeutics  
13+ years Genentech/Roche  
13+ years Novartis/Janssen/Lilly



**Daryl Gaugler**

Chief Operating Officer

20+ years Quintiles Transnational organization (now IQVIA)  
30+ years commercial leadership experience



**Kristen Williams**

Chief Administrative Officer & Secretary

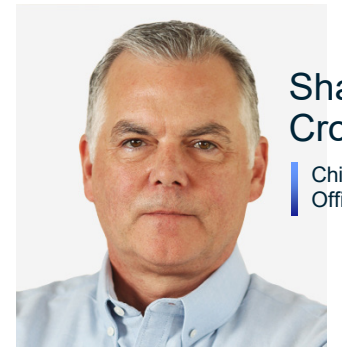
3 years Bioevision Inc.  
5 years Paul Hastings LLP



**Jonathan Slonin**

Chief Medical Officer

20 years board-certified anesthesiologist



**Shawn Cross**

Chief Financial Officer

20+ years biopharmaceutical investment banking experience



**Christopher Young**

Chief Manufacturing Officer

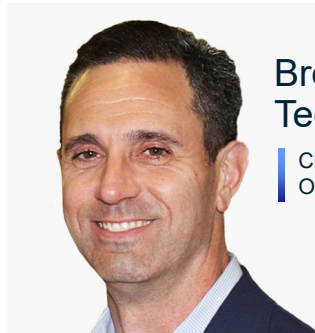
14+ years Actavis  
4+ years Akorn Inc.  
4+ years Alvogen Inc.



**Anthony Molloy**

Chief Legal & Compliance Officer

7+ years Patton Boggs LLP  
6+ years The Okonite Company



**Brendan Teehan**

Chief Commercial Officer

6+ years Acadia Pharmaceuticals  
13+ years Johnson & Johnson  
11+ years Amgen/TESARO/RainTree



**Krys Corbett**

Chief Business Officer

10+ years Genentech/Roche  
4+ years Lyell Immunopharma  
2+ years ORIC Pharmaceuticals



**Michael Rozycki**

SVP, Regulatory Affairs

6+ years Bayer Healthcare Pharmaceuticals  
4+ years Allergan  
2+ years Aventis



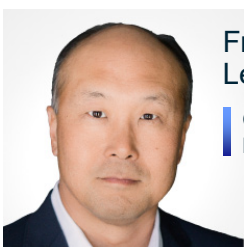


# Refreshed board of directors with diversified talent



**Paul J. Hastings**  
CEO of Nkarta Therapeutics

Director since 2011



**Frank Lee**  
CEO of Pacira Biosciences

Director since 2024



**Marcelo Bigal, MD, PhD**  
President & CEO of Ventus Therapeutics

Director since 2023



**Laura Brege**  
Former CEO of Nodality

Director since 2011



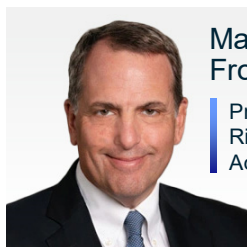
**Abraham Ceesay**  
CEO of Rapport Therapeutics

Director since 2023



**Chris Christie**  
55<sup>th</sup> Governor of the State of New Jersey

Director since 2019



**Mark I. Froimson, MD**  
Principal at Riverside Health Advisors

Director since 2017



**Mark Kronenfeld, MD**  
Chairman of Anesthesiology, Maimonides Medical Center

Director since 2013



**Andreas Wicki, PhD**  
CEO of HBM Healthcare

Director since 2006



**Michael Yang**  
Former President & CEO of ViaCyte

Director since 2023

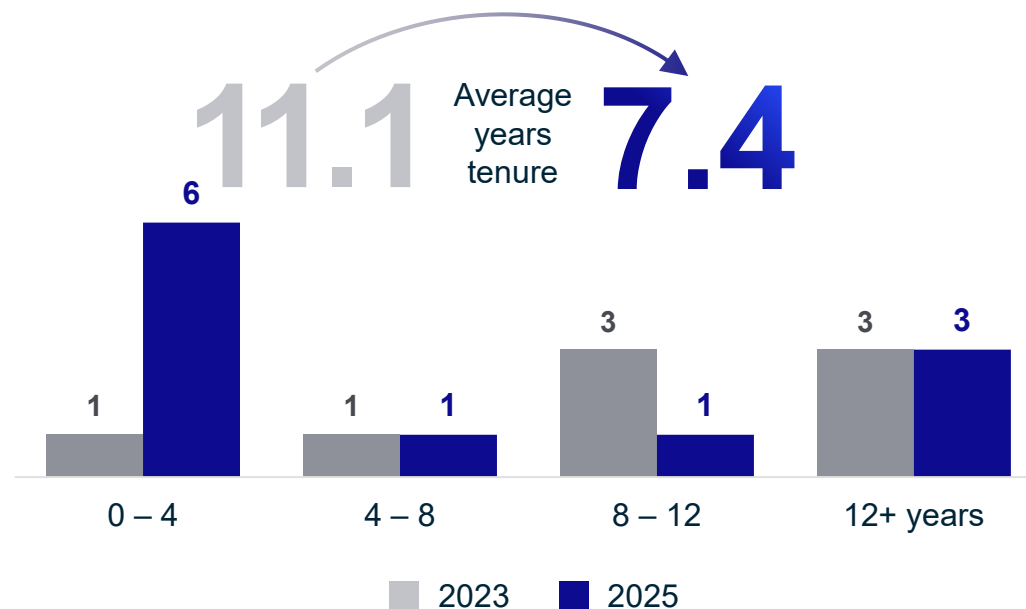


**Alethia Young**  
CFO of Bicycle Therapeutics

Director since 2023

## Five new directors added since 2023

Board Tenure (Number of Directors)



# Non-GAAP disclosure

(\$ in 000's)	Year Ended December 31,				
	2019	2020	2021	2022	2023
<b>GAAP net income (loss)</b>	<b>(11,016)</b>	<b>145,523</b>	<b>41,980</b>	<b>15,909</b>	<b>41,955</b>
Interest income	(7,376)	(4,629)	(896)	(4,542)	(11,444)
Interest expense <sup>(1)</sup>	23,628	25,671	31,750	39,976	20,306
Income tax (benefit) expense	268	(125,434) <sup>(2)</sup>	14,424 <sup>(3)</sup>	(2,607)	19,746
Depreciation expense	13,873	12,042	14,995	34,213	18,286
Amortization of acquired intangible assets	5,703	7,866	13,553	57,288	57,288
<b>EBITDA</b>	<b>25,080</b>	<b>61,039</b>	<b>115,806</b>	<b>140,237</b>	<b>146,137</b>
Other adjustments:					
Contingent consideration (gains) charges, acquisition-related charges, and other:					
Severance-related expenses	-	-	-	4,494	-
Acquisition-related charges, product discontinuation and other <sup>(4)</sup>	25,230	5,166	42,911	5,546	1,963
Changes in fair value of contingent consideration	-	-	-	(29,476)	(3,424)
Restructuring charges	-	-	-	-	1,109
Impairment of acquired IPR&D	-	-	-	26,134	-
Termination of license agreement	-	-	-	3,000	-
Milestone revenue	-	-	(125)	-	-
Stock-based compensation	33,650	39,920	42,246	48,092	47,895
Loss on early extinguishment of debt	-	8,071	-	-	16,926
Recognition of step-up basis in inventory from acquisition	220	-	581	4,719	3,884
Loss (gain) on investment	4,981	(1,618)	2,585	10,000	-
<b>Adjusted EBITDA</b>	<b>89,161</b>	<b>112,578</b>	<b>204,004</b>	<b>212,746</b>	<b>214,490</b>

## Notes:

<sup>(1)</sup> Includes amortization of debt discount.

<sup>(2)</sup> Includes the reversal of a deferred tax valuation allowance during the year ended December 31, 2020.

<sup>(3)</sup> Includes an income tax benefit in connection with the acquisition of Flexion Therapeutics, Inc. during the three months and year ended December 31, 2021.

<sup>(4)</sup> Excludes any depreciation expense included in EBITDA above.