



Investor Presentation

April 2024

Disclaimer

This presentation contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. All statements contained in this presentation that do not relate to matters of historical fact should be considered forward-looking statements, including without limitation statements regarding our future results of operations and financial position, industry and business trends, our prospective value to constituents, our collaborations and partnerships with third parties, including our integrated savings programs, anticipated impacts of the de-prioritization of certain solutions under our pharma manufacturer solutions offering and our cost savings initiatives, our hybrid contracting model with PBMs and select pharmacies, our business strategy, our plans, our market opportunity and growth and our objectives for future operations. These statements are neither promises nor guarantees, but involve known and unknown risks, uncertainties and other important factors that may cause our actual results, performance or achievements to be materially different from any future results, performance or achievements expressed or implied by the forward looking statements, including, but not limited to, risks related to our limited operating history and early stage of growth; our ability to achieve broad market education and change consumer purchasing habits; our general ability to continue to attract, acquire and retain consumers, in a cost-effective manner; our reliance on our prescription transactions offering and ability to expand our offerings; changes in medication pricing and pricing structures; our general inability to control the categories and types of prescriptions for which we can offer savings or discounted prices; our reliance on a limited number of industry participants, including pharmacy benefit managers, pharmacies, and pharma manufacturers; the competitive nature of industry; risks related to pandemics, epidemics or outbreak of infectious disease, such as COVID-19; the accuracy of our estimate of our total addressable market and other operational metrics; our ability to respond to changes in the market for prescription pricing and to maintain and expand the use of GoodRx codes; our ability to maintain positive perception of our platform and brand; risks related to any failure to maintain effective internal control over financial reporting; risks related to use of social media, emails, text messages and other messaging channels as part of our marketing strategy; our dependence on our information technology systems and those of our third-party vendors, and risks related to any failure or significant disruptions thereof; risks related to government regulation of the internet, e-commerce, consumer data and privacy, information technology and cybersecurity; risks related to a decrease in consumer willingness to receive correspondence or any technical, legal or any other restrictions to send such correspondence; risks related to any failure to comply with applicable data protection, privacy and security, advertising and consumer protection laws, standards, and other requirements; our ability to utilize our net operating loss carryforwards and certain other tax attributes; the risk that we may not achieve the intended outcomes of our restructuring and cost reduction efforts; our ability to attract, develop, motivate and retain well-qualified employees; risks related to our acquisition strategy; risks related to our debt arrangements; interruptions or delays in service on our apps or websites; our reliance on third-party platforms to distribute our platform and offerings, including software as-a-service technologies; systems failures or other disruptions in the operations of these parties on which we depend; risks related to climate change; the increasing focus on environmental sustainability and social initiatives; risks related to our intellectual property; risks related to operating in the healthcare industry; risks related to our organizational structure; litigation related risks; our ability to accurately forecast revenue and appropriately plan our expenses in the future; risks related to general economic factors, natural disasters or other unexpected events; risks related to fluctuations in our tax obligations and effective income tax rate which could materially and adversely affect our results of operations; risks related to the recent healthcare reform legislation and other changes in the healthcare industry and in healthcare spending which may adversely affect our business, financial condition and results of operations; as well as the other important factors discussed in the section entitled “Risk Factors” of our Annual Report on Form 10-K for the year ended December 31, 2023, and our other filings with the SEC. These factors could cause actual results to differ materially from those indicated by the forward-looking statements made in this presentation. The forward-looking statements in this presentation are based upon information available to us as of the date of this presentation, and while we believe such information forms a reasonable basis for such statements, such information may be limited or incomplete, and our statements should not be read to indicate that we have conducted an exhaustive inquiry into, or review of, all potentially available relevant information. These statements are inherently uncertain, and investors are cautioned not to unduly rely upon these statements. While we may elect to update such forward-looking statements at some point in the future, we disclaim any obligation to do so, even if subsequent events cause our views to change.

The cost of healthcare in the U.S. continues to increase and Americans are bearing the burden

8.5%

projected increase in cost of health insurance plans in 2024¹, outpacing wage growth and nearly double the rate of 2023²

- Premiums, deductibles and copays rising and drug coverage lessening with narrower formularies¹
- Over 17 million people disenrolled from Medicaid³

1. Based on Aon's U.S. Employer Health Care Costs report published in August 2023.

2. Based on the Bureau of Labor Statistics' employment cost index report published in December 2023.

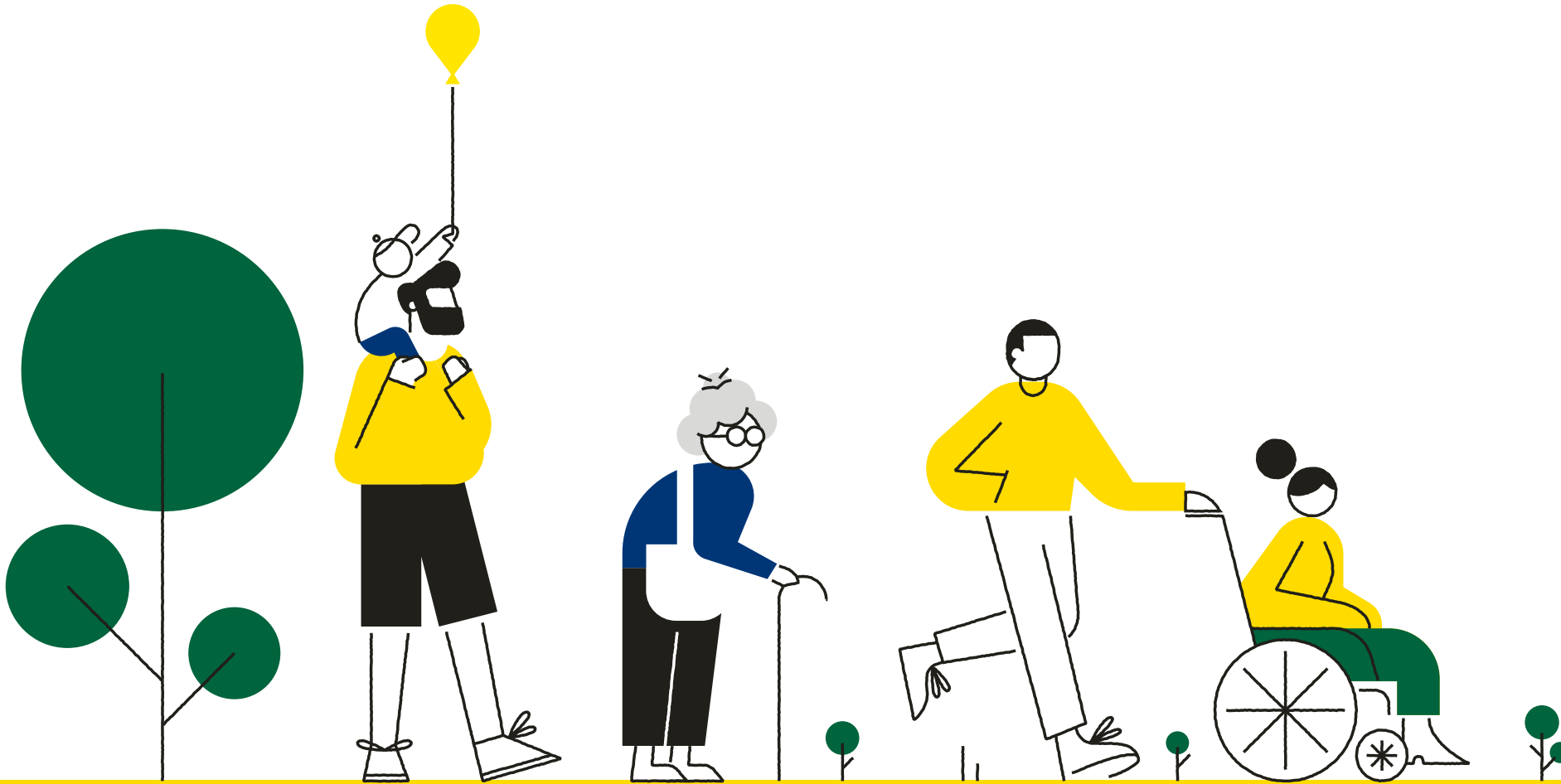
3. Based on KFF Analysis of State Unwinding Dashboards and Monthly Reports to CMS, as of March 2024.

To Pay for Weight Loss Drugs, Some Take Second Jobs, Ring Up Credit-Card Debts

Higher Bills Are Leading Americans to Delay Medical Care

Patients Lose Access to Free Medicines Amidst Spat Between Drugmakers, Health Plans

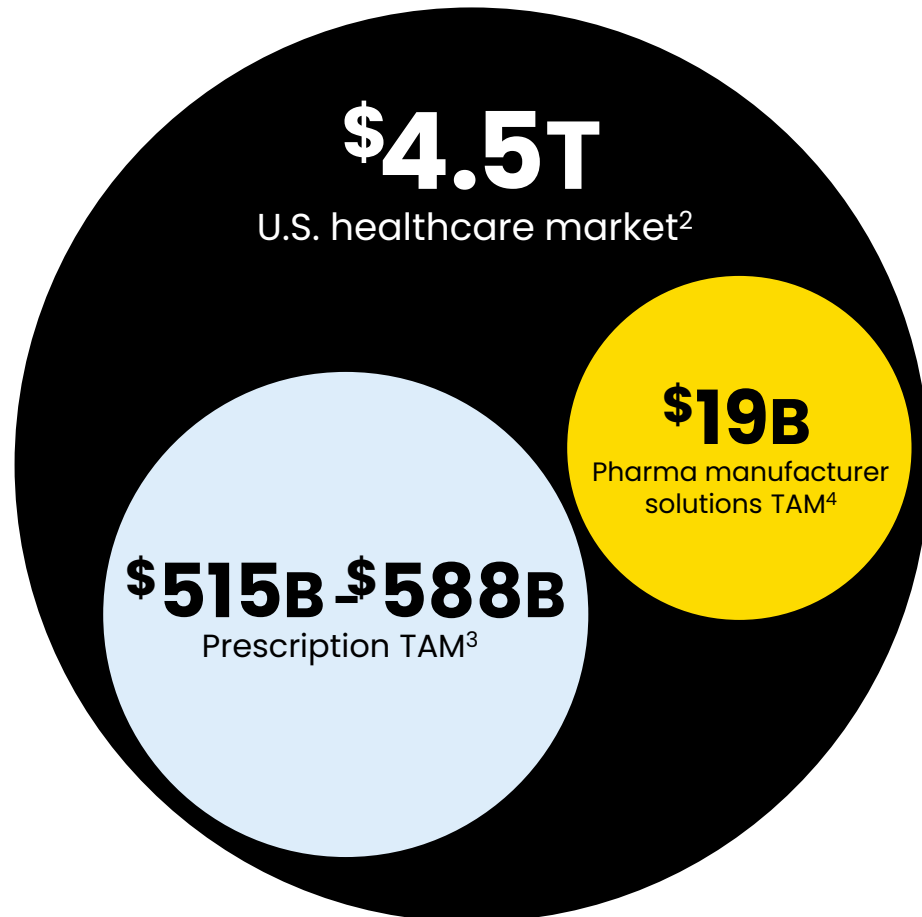
The number of uninsured Americans is about to jump dramatically for the first time in years



Our mission is to help Americans get the healthcare they need at a price they can afford.

Believe market opportunity is substantial with significant room for growth

GoodRx represents only ~2% of all Rx's filled in the US annually¹



Over **6 Billion** annual prescriptions⁵

~**1 Billion** annual physician visits⁶

U.S. prescription drug spend is projected to grow ~**5%** per year on average⁷

Consumers visit their pharmacy almost **twice as often** as they visit their physician⁸

Fragmented marketplace

1. Source: IQVIA & GoodRx data; Unadjusted Rx's for 2023.

2. CMS: 2022 National Health Expenditures.

3. Prescription drugs market size based on CMS projected 2023 market size + GoodRx estimate regarding unfilled prescriptions.

4. Pharma manufacturer solutions market size based on recent internal data regarding the amount of advertising and marketing spending by U.S. pharma manufacturers relating to prescription drugs in 2022.

5. Source: IQVIA from 1/1/23-12/31/23; Prescription amount has been adjusted to count prescriptions of multi-month supplies on a per month basis (e.g., 90-day fills have been adjusted to count as 3 30-day fills and 60-day fills have been adjusted to count as 2 30-day fills).

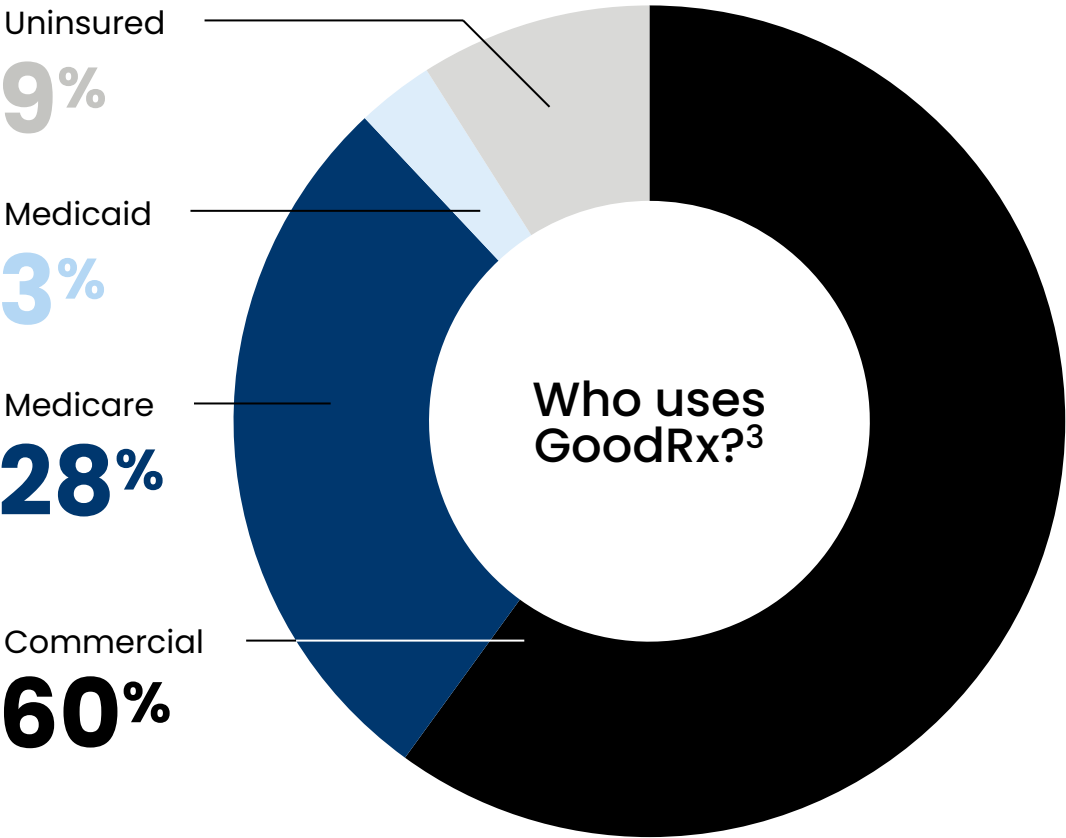
6. 2022 Physician Office Market Report.

7. Source: CMS. Growth projection is for years 2022 through 2031.

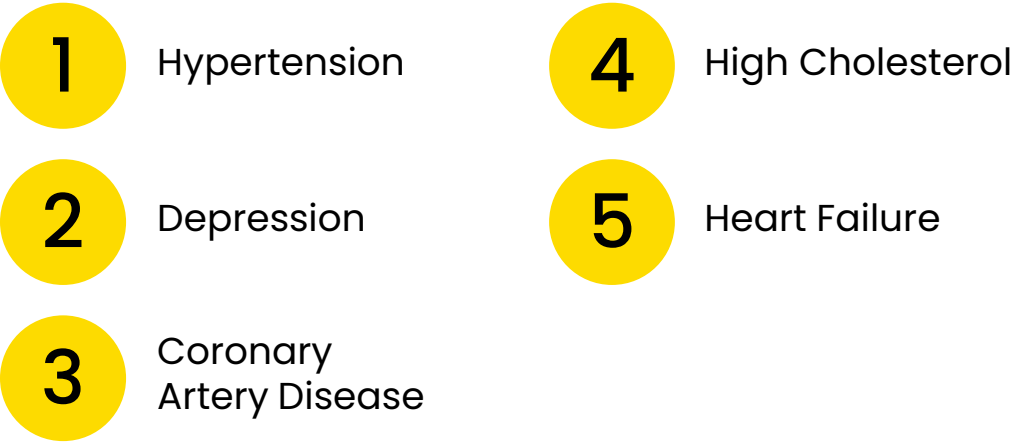
8. Source: National Library of Medicine. Pharmacists as accessible health care providers: quantifying the opportunity published January 2022.

Americans use GoodRx to save an average of ~80%¹ on prescriptions compared to retail prices

GoodRx beats the average copay ~50% of the time for our most commonly prescribed medications²



GoodRx Consumers' Top Conditions⁴



1. Based on internal data; Average savings for GoodRx users for LTM 9/30/23, comparing the GoodRx discounted price to the usual and customary, or cash price.
2. Based on a GoodRx study, The GoodRx Effect, dated January 2024. In the last twelve months ended September 30, 2023, approximately 50% of the 100 most purchased prescriptions filled using GoodRx (including its membership savings programs) were cheaper than the average commercial insurance stated copays, based on industry data. When GoodRx users paid less than the average commercial insurance copays for these most commonly purchased medications, they saved on average about 50% off average commercial insurance copays.
3. GoodRx Power Patients Survey, n=1,075 Standard Users, n=1,624 Power Patients (weighted), Conducted August 28–September 13, 2023.
4. Top Conditions in 2023 based on GoodRx total claims volume.

GoodRx delivers value to key constituents, starting with consumers and healthcare providers

Consumers

~\$15B

Consumer savings annually¹

Pharmacies

- Customer acquisition
- Cost-based economics

Payors

- Lower costs for members and plans



Physicians

750K+

Unique HCPs visit GoodRx annually²

PBM³s

- Proven growth channel
- Long-term partnerships

Manufacturers

- Engage and convert high-intent users
- Drive brand awareness

1. Based on 2023 consumer savings. Savings are measured as the difference between the pharmacy list price and the price the consumer pays utilizing a GoodRx code at the same pharmacy.

2. Based on internal data on unique HCP visits to GoodRx for the year ended December 31, 2023. A unique HCP who visits GoodRx more than once during a given year is only counted as one unique HCP in that year.

3. PBM refers to a pharmacy benefit manager. PBMs aggregate demand to negotiate prescription medication prices with pharmacies and pharma manufacturers. PBMs find most of their demand through relationships with insurance companies and employers. However, nearly all PBMs also have consumer direct or cash network pricing that they negotiate with pharmacies for consumers who choose to purchase prescriptions outside of insurance.

A trusted prescription affordability solution

Prescription Marketplace

Aggregates Discounted Prescription Pricing Options Available to Consumers

Pharmacy-Direct Contracting

PBM Contracting

- Consumer savings
- Pharmacy-Direct Contracting is informed by acquisition cost-based pricing¹
- Broad network access

Pharma Manufacturer Solutions

Partner with Pharma to Facilitate Access Solutions for Brand Medications

Embedded Copay Affordability Programs

Direct Point-of-Sale Brand Drug Buydowns

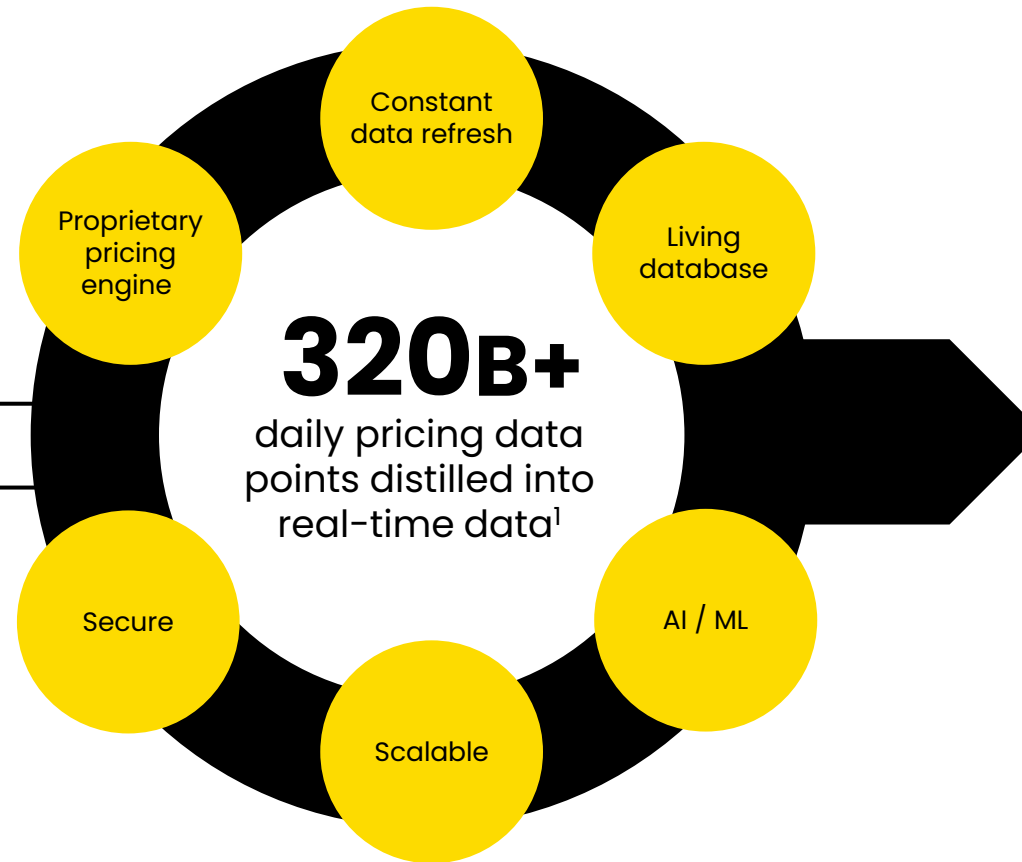
- Consumer savings and access
- Pharma awareness and pull through

GoodRx makes the complex simple and powerful for consumers

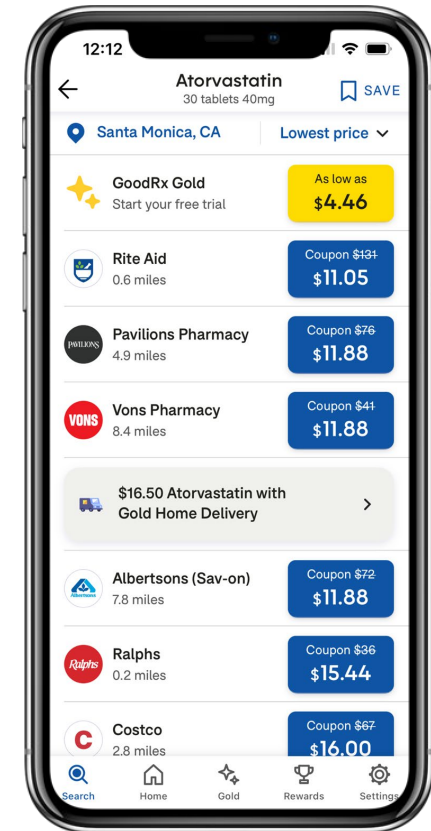
Data Sources

- Multiple Pharmacy Benefit Manager Networks
- Retail-direct contracts
- Pharmacy savings programs
- Usual & customary prices
- Medicare prices
- Pharmaceutical manufacturers
- Patient assistance programs

Engine



Customized Options



We reach healthcare providers (HCPs) at the high-intent, point of prescription

Digital tools to communicate savings to patients at the point of prescription, including Electronic Health Record (EHR) integrations

90%

estimated awareness with HCPs¹

80%+

estimated HCPs recommended GoodRx in 2023¹

75%

of GoodRx HCP usage happens during office hours²

1.5M+

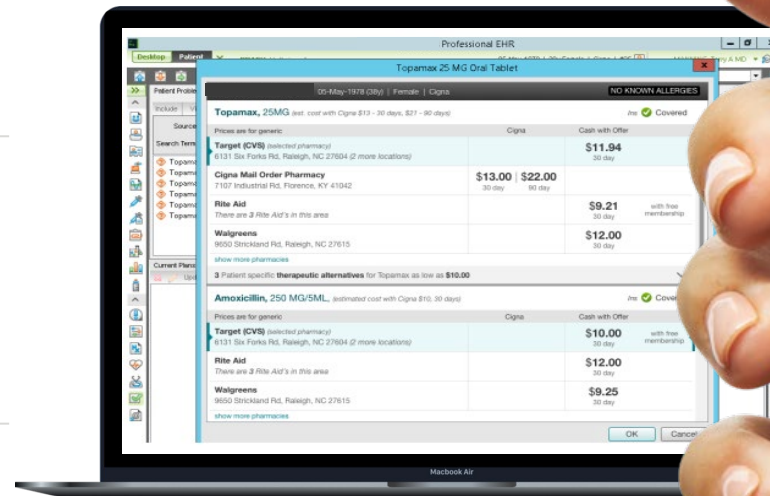
prescribers have a patient who has used GoodRx in the LTM³

High

HCP NPS⁴

750K+

unique HCPs visit GoodRx annually⁵



1. Based on a survey conducted by GoodRx between January 1, 2023 - December 31, 2023.

2. Based on internal data of GoodRx HCP usage from January 1, 2023 - December 31, 2023 between the hours of 7 a.m. and 6 p.m.

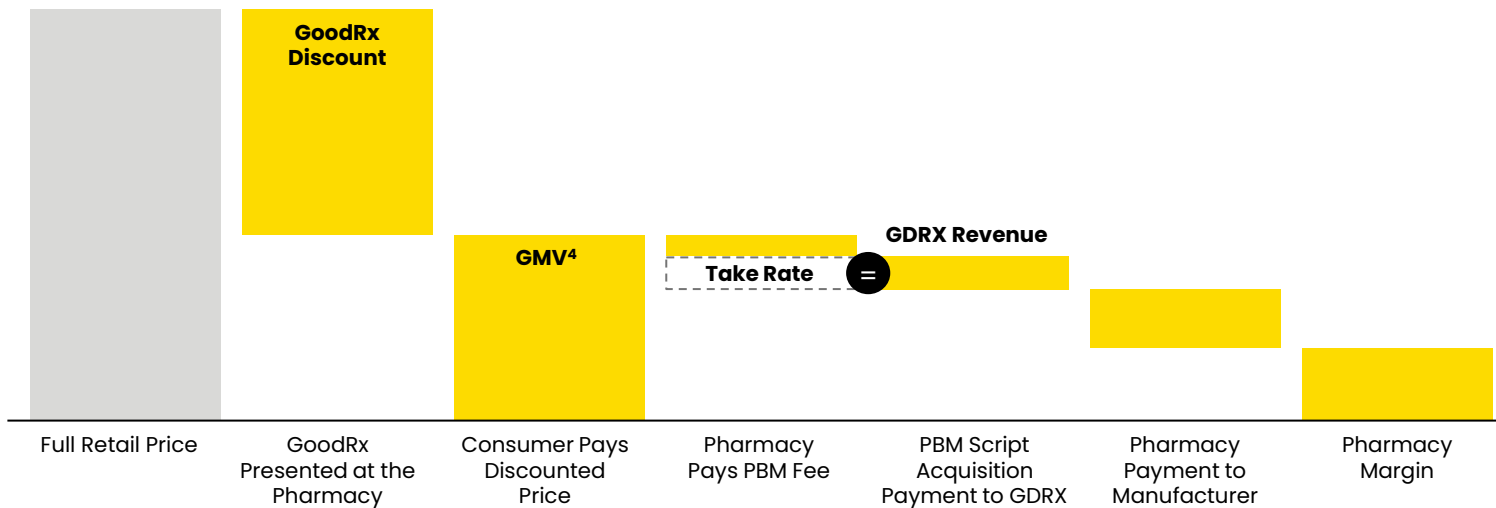
3. LTM data as of 12/31/23.

4. HCP NPS based on survey ran in February 2024.

5. Based on internal data on unique HCP visits to GoodRx for the year ended December 31, 2023. A unique HCP who visits GoodRx more than once during a given year is only counted as one unique HCP in that year.

Hybrid contracting model: Aligning economic incentives with PBMs and pharmacies to help drive sustainable growth

PBM Contracting



Expansive network of over a dozen PBMs³



Take rate is a mid-teen percentage of GMV⁴; take rate in dollars = GoodRx revenue



GoodRx, Inc. has never had a PBM terminate



Higher revenue share with higher volume in many tiered contracts



PBMs have fixed cost structures that benefit from incremental volume

Consumers present GoodRx at one of over 70,000 pharmacies (or refill at their preferred pharmacy with stored GoodRx information¹) with GoodRx users having saved an average of 80%+² on retail prices for their prescription medication

1. When a consumer uses GoodRx, their profile is saved at the pharmacy. From then on, GoodRx typically applies to all future refills as well as, in many cases, fills for other prescriptions at that location, without the consumer having to re-present their GoodRx information.

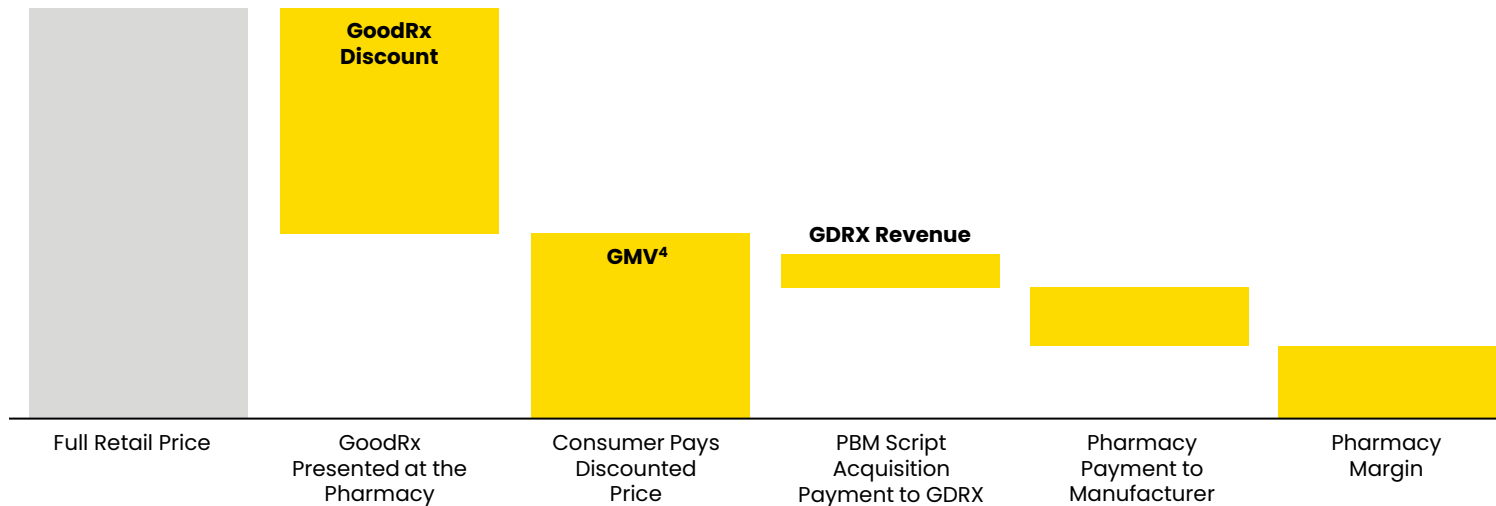
2. Based on internal data; Average savings for GoodRx users for LTM 9/30/23, comparing the GoodRx discounted price to the usual and customary, or cash price.

3. PBM refers to a pharmacy benefit manager. PBMs aggregate demand to negotiate prescription medication prices with pharmacies and pharma manufacturers. PBMs find most of their demand through relationships with insurance companies and employers. However, nearly all PBMs also have consumer direct or cash network pricing that they negotiate with pharmacies for consumers who choose to purchase prescriptions outside of insurance.

4. As of Q4 2023, GMV represents gross merchandise value, which is the aggregate price paid by our consumers who used a GoodRx code available through our platform for their prescriptions during such period. GMV excludes any prices paid by consumers linked to our other offerings, including our subscription offerings.

Hybrid contracting model: Aligning economic incentives with PBMs and pharmacies to help drive sustainable growth

Pharmacy-Direct Contracting



Consumers present GoodRx at one of over 70,000 pharmacies (or refill at their preferred pharmacy with stored GoodRx information¹) with GoodRx users having saved an average of 80%+² on retail prices for their prescription medication



Hybrid model (combination of PBM³ and retail-direct contracts) took shape as pharmacy margins were compressing and GoodRx was in a unique position to help



We're able to contract directly with retail pharmacies without PBM involvement; Pharmacy payment to GoodRx = revenue



Strengthens retail pharmacy relationships and collaboration on solutions focused on mutual success and profitability



Retailer-direct contracts with most of our largest retail pharmacy partners, and our directly contracted medication volume makes up a growing minority of our prescription transactions volume.

1. When a consumer uses GoodRx, their profile is saved at the pharmacy. From then on, GoodRx typically applies to all future refills as well as, in many cases, fills for other prescriptions at that location, without the consumer having to re-present their GoodRx information.

2. Based on internal data; Average savings for GoodRx users for LTM 9/30/23, comparing the GoodRx discounted price to the usual and customary, or cash price.

3. PBM refers to a pharmacy benefit manager. PBMs aggregate demand to negotiate prescription medication prices with pharmacies and pharma manufacturers. PBMs find most of their demand through relationships with insurance companies and employers. However, nearly all PBMs also have consumer direct or cash network pricing that they negotiate with pharmacies for consumers who choose to purchase prescriptions outside of insurance.

4. GMV represents gross merchandise value, which is the aggregate price paid by our consumers who used a GoodRx code available through our platform for their prescriptions during such period. GMV excludes any prices paid by consumers linked to our other offerings, including our subscription offerings.

Integrating GoodRx savings with insurance

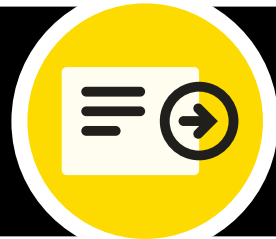
Our integrated savings program (ISP) automatically compares offerings and routes insured consumers to whichever eligible price is lower for their medication, the GoodRx price¹ or the insurance price, and applies it to their deductible

Programs live with Express Scripts, CVS Caremark, MedImpact and Navitus as of January 1, 2024

How our Integrated Savings Program works



Patient needs to fill a prescription



Pharmacy submits claim, using card patient already has



Behind-the-scenes pricing tool compares available options to get lowest price



Claim adjudicates



Patient gets prescription at lower of funded or GoodRx price

- SAM expanding; helps reach members who might not be discount card users
- Partnering with PBMs partners who cover **~60%** of insured lives to aggregate demand for our prescription discounts²
- Levers to drive growth: number of lives and conversion; ISP contributes to prescription transactions revenue

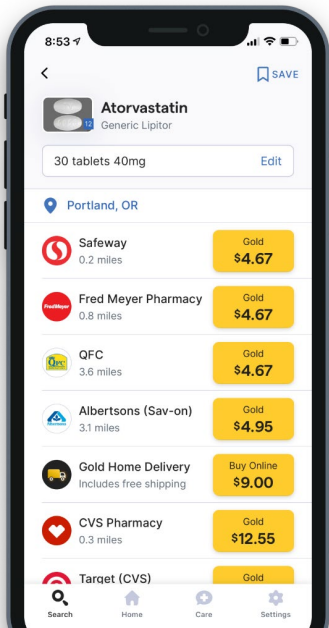
Subscription products can deliver more value to consumers & extend our reach focusing on users with chronic conditions

\$23.1M

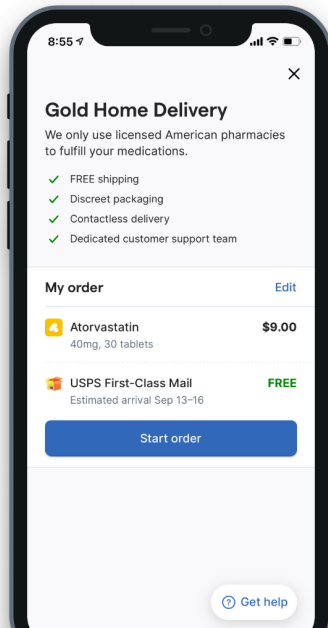
subscription revenue in Q423

884k

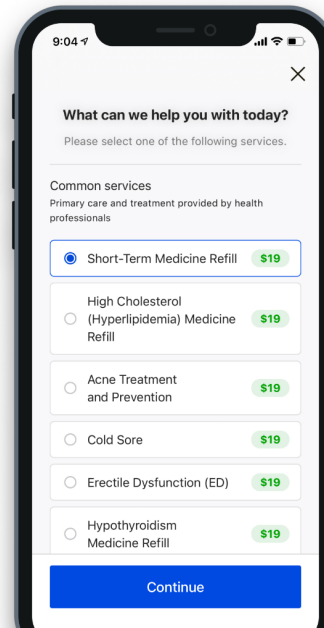
subscription plans¹



Prescription Savings



Home Delivery



Discounted Telehealth







GoodRx Gold monthly & annual subscription plan

- 1,000+ prescriptions under \$10 at up to 90% savings off list prices¹
- Free mail delivery
- Discounted access to telehealth services

GoodRx partners with pharma manufacturers to help connect consumers to the lowest available price for brand medications

We offer awareness, access and adherence solutions to meet pharma manufacturer, consumer and HCP needs

	Manufacturer Benefit	Consumer Benefit	HCP Benefit
 Awareness Solutions	Ability to promote innovative and life-saving products and services	Ability to easily find HCP reviewed authoritative educational resources for their medication and conditions	Ability to easily find and recommend educational resources to patients
 Access Solutions	Ability to enable incremental consumers to start on therapy	Ability to easily find savings and support resources to start on therapy	Ability to easily find and recommend savings and support resources to patients
 Adherence Solutions	Ability to increase adherence, delivering increased LTV for patients on therapy	Provides consumers a highly trusted liaison to help them through their patient journey	Creates confidence patients will stay on therapy and offloads work
 Value Propositions	Enable pharma manufacturers to convert patients at a strong ROI	Consumers receive savings and support they need to start and stay on therapy	HCPs drive better patient outcomes and patient satisfaction while saving administrative time

GoodRx offers free coupons for over **2,500 brand drugs**¹

We work with nearly all of the top 20 pharma manufacturers¹

Focused on deal quality and creating standardized go-to-market programs we expect to scale rapidly and sustainably

Strong Relationships with Pharma Manufacturers

100+

Brand drugs have partnered with GoodRx

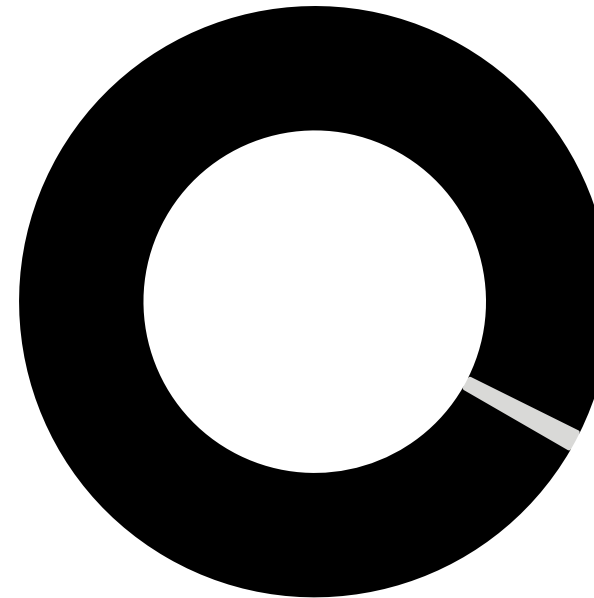
Includes:

sanofi

Dexcom®

BAUSCH+
Health

GoodRx Share of TAM <1%², Representing Significant Opportunity



~99%
significant opportunity

<1%

GoodRx's share of TAM

1. Through its Pharma Manufacturer Solutions offering, GoodRx has worked with 19 of the top 20 pharmaceutical manufacturers for at least one brand to deliver savings options directly to relevant patients. Top pharmaceutical manufacturers is based on 2022 market data and excludes pharmaceutical manufacturers with a commercialized portfolio consisting exclusively of (i) covid-19 vaccines and/or (ii) pharmaceuticals that are not dispensed at retail or specialty pharmacies.

2. Calculated based on the Company's pharma manufacturing solutions revenue for FY 2023 as compared to estimated pharma manufacturing solutions TAM based on internal data regarding the amount of advertising and marketing spending by U.S. pharma manufacturers relating to prescription drugs in 2022.

Strengths for us to build on

Powerful Value Proposition

- High consumer and provider Net Promoter Scores (NPS)¹
- Ability to drive ~\$15B of consumer savings annually²
- Scope of PBM and retail networks

Ways to Grow

- Driving even more meaningful prescription savings
- Tighter partnerships with retail pharmacies through hybrid retails contracting model
- Expanding our integrated saving programs with funded benefit plans
- Growing our pharma manufacturer solutions business

Massive Scale + Impact

25M+

consumers used GoodRx for prescription savings in 2023³

1.5M+

prescribers with a patient who has used GoodRx in 2023⁴



1. Consumer NPS based on survey ran in January 2024; Provider NPS based on survey ran in February 2024.
2. Based on 2023 consumer savings. Savings are measured as the difference between the pharmacy list price and the price the consumer pays utilizing a GoodRx code at the same pharmacy.
3. LTM data as of 12/31/23.
4. LTM data as of 12/31/23.

Top priorities for growth



1

Make sure we have the **strongest network relationships and retail pharmacy** strategy possible



2

Hone our short- and medium-term growth plans for the core prescription transactions offering and **align our teams and resources behind it**



3

Scale our **pharma manufacturer solutions** efforts



4

Get the **right team in place** and organize ourselves to execute with **speed & quality**

Significant progress made in 2023

- **Returned to growth** in Q3 on Adjusted Revenue¹ basis with an **acceleration** to 7% YoY growth in Q4 driven by organic growth in Prescription Transactions Revenue
- Q4 Adjusted EBITDA² grew to \$57.3 million, representing a margin of 29.1%; **margin expansion** reflects our commitment to expense and operating discipline
- **Strong balance sheet** with \$672.3 million in cash and cash equivalents at the end of Q4
- **Great traction with retail-direct contracting** as part of our hybrid model; driver of topline growth in Q4 and has helped strengthen retail pharmacy relationships and collaboration on solutions focused on mutual success and profitability
- **Announced Integrated Savings Program** in partnership with Express Scripts, CVS Caremark, MedImpact, Navitus, and others; driving expansion into funded benefit market with PBMs who cover ~60% of insured lives³ with all four programs live as of January 1, 2024
- **Restructuring of pharma manufacturer solutions** offering essentially completed, including deprioritization of vitaCare; focused on deal quality and creating standardized go-to-market programs we expect to scale rapidly and sustainably
- **Bolstered management team** with new Interim CEO, Chief Marketing Officer, Chief Commercial Officer and President & EVP of Prescription Marketplace

1. Adjusted Revenue is a non-GAAP financial measure and is presented for supplemental information purposes only. Refer to Appendix for reconciliation to the most directly comparable GAAP measure. Revenue for the third quarter of 2023 was impacted by a \$10 million client-contract termination payment, which was recognized as a reduction of revenue, in connection with our plan to de-prioritize certain solutions under our pharma manufacturer solutions offering approved by our board of directors on August 7, 2023 (the "Restructuring Plan"). For the third quarter 2023, revenue of \$180 million, excluding the \$10 million client contract termination costs incurred in the third quarter of 2023, represents Adjusted Revenue. For all other periods, revenue equals or is expected to equal Adjusted Revenue.

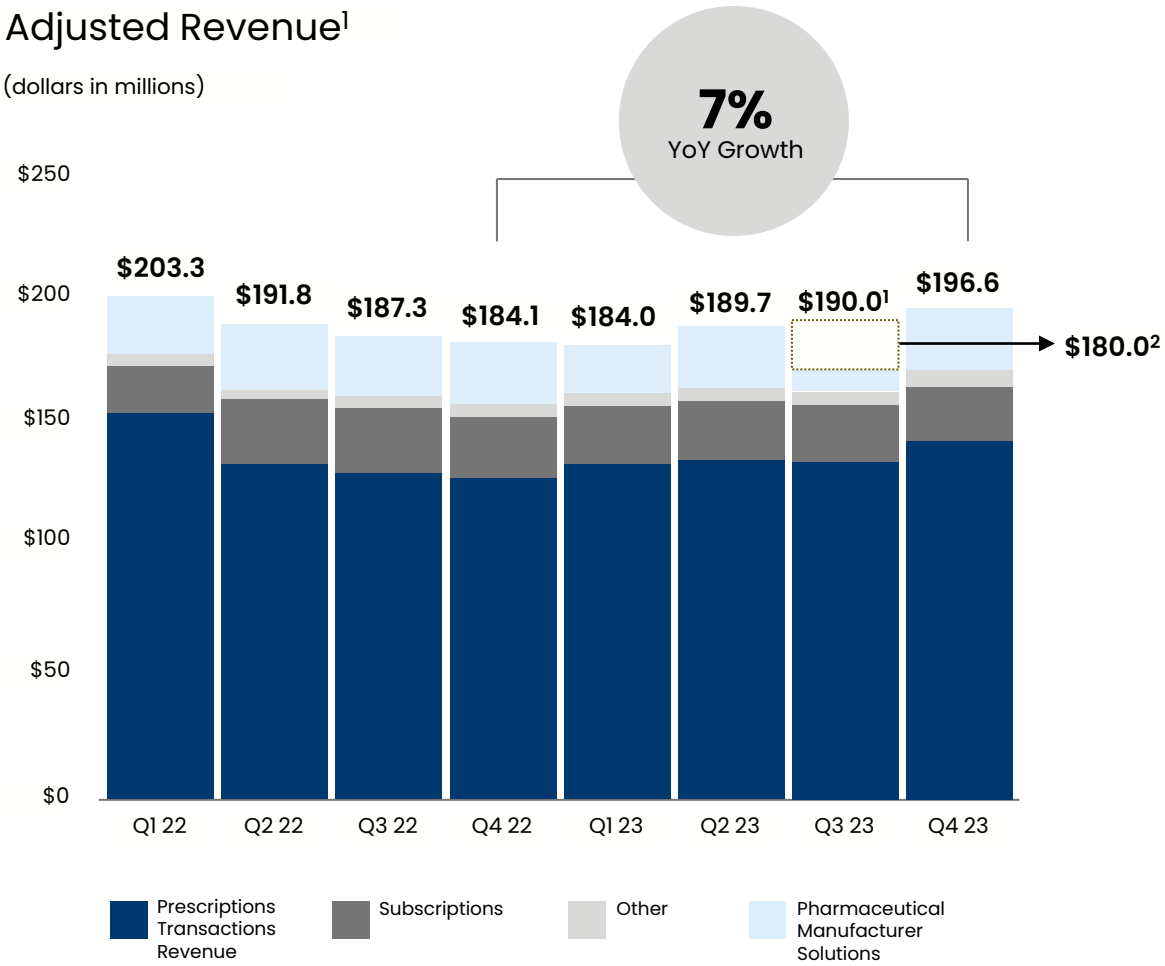
2. Adjusted EBITDA is a non-GAAP financial measure and is presented for supplemental information purposes only. Refer to Appendix for reconciliation to the most directly comparable GAAP measure.

3. Based on 2023 PBM market share data from Drug Channels Institute. As of January 2024, the GoodRx ISP program was available to a subset of PBM partners' eligible members.

Adjusted Revenue¹ growth with attractive margin profile

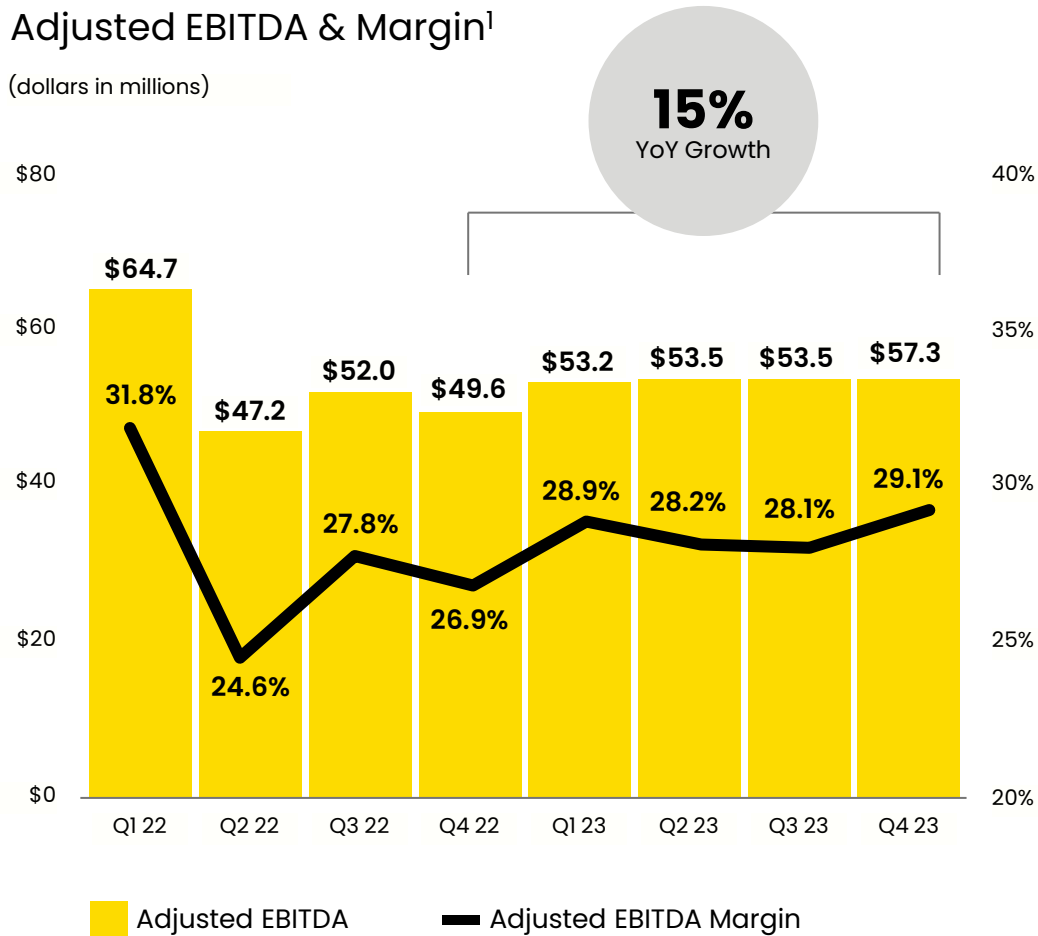
Adjusted Revenue¹

(dollars in millions)



Adjusted EBITDA & Margin¹

(dollars in millions)



Note: Due to rounding, numbers presented may not add up precisely to the totals provided.

1. Adjusted Revenue, Adjusted EBITDA and Adjusted EBITDA Margin are non-GAAP financial measures and are presented for supplemental informational purposes only. We define Adjusted Revenue for a particular period as revenue excluding client contract termination costs associated with the restructuring related activities. We exclude these costs from revenue because we believe they are not indicative of past or future underlying performance of the business. For all periods other than Q3 2023, revenue equals or is expected to equal Adjusted Revenue. Refer to Appendix for reconciliation of Adjusted Revenue, Adjusted EBITDA and Adjusted EBITDA Margin to the most directly comparable GAAP measures.

2. Revenue excluding the \$10.0 million client contract termination payment represents Adjusted Revenue for the third quarter 2023. For all other periods, revenue equals Adjusted Revenue.

Our management team is mission-driven and committed to improving healthcare in America

Strong leadership team with an advantaged mix of experienced executives from adjacent industries



Scott Wagner
Interim CEO



Doug Hirsch
Co-Founder and
Chief Mission Officer



Trevor Bezdek
Co-Founder and Chairman



Karsten Voermann
Chief Financial Officer



Vina Leite
Chief People Officer



Andrew Slutsky
Chief Marketing Officer



Grayce Cheng
SVP & General Counsel



Dorothy Gemmell
Chief Commercial Officer



Building the leading digital platform for consumer healthcare in the U.S.



Unique combination of **scale, impact, and profitability**¹



Macro trends drive the need for our solutions and technology



First mover advantage and partnership strategy help **deepen the competitive moat**



Transparency and **trust** are core to our platform



Consumer first approach



Powerful **value proposition**

Appendix

GoodRx at a glance: Strengthening our ecosystem while driving profitable growth

Scaled Platform

7M+

Prescription-related Consumers²

750K+

Unique HCPs visit GoodRx annually⁶

320B+

Daily pricing data points distilled into real-time data

Consumer First

25M+

Consumers used GoodRx for prescription savings in 2023³

~\$70B

Cumulative Consumer Savings⁷

80%+

Average saved off retail prices by GoodRx users⁹

Trusted Ecosystem Partner

High

Consumer & Provider Net Promoter Scores⁴

1.5M+

Prescribers with a patient who has used GoodRx in 2023⁸

70K+

U.S. pharmacies accept GoodRx

Profitable¹ Growth

\$196.6M / 7%

4Q23 Adj. Revenue⁵ YOY growth

\$57.3M / 29.1%

4Q23 AEBITDA⁵ AEBITDA Margin⁵

80%+

Repeat Activity¹⁰

1. On an Adjusted EBITDA basis. Adjusted EBITDA is a non-GAAP financial measure and is presented for supplemental information purposes only. Refer to Appendix for reconciliation to the most directly comparable GAAP measure.

2. Represents sum of Monthly Active Consumers for Q4 2023 and subscribers to our subscription plans as of December 31, 2023.

3. LTM data as of 12/31/23.

4. Consumer NPS based on survey ran in January 2024; Provider NPS based on survey ran in February 2024.

5. Adjusted Revenue, Adjusted EBITDA and Adjusted EBITDA Margin are non-GAAP financial measures. We define Adjusted Revenue for a particular period as revenue excluding client contract termination costs associated with the restructuring related activities. We exclude these costs from revenue because we believe they are not indicative of past or future underlying performance of the business. For Q4 2023 and all other periods except for Q3 2023, revenue equals or is expected to equal Adjusted Revenue. Refer to Appendix for reconciliation of Adjusted Revenue, Adjusted EBITDA and Adjusted EBITDA Margin to the most directly comparable GAAP measures.

6. Based on internal data on unique HCP visits to GoodRx for the year ended December 31, 2023. A unique HCP who visits GoodRx more than once during a given year is only counted as one unique HCP in that year.

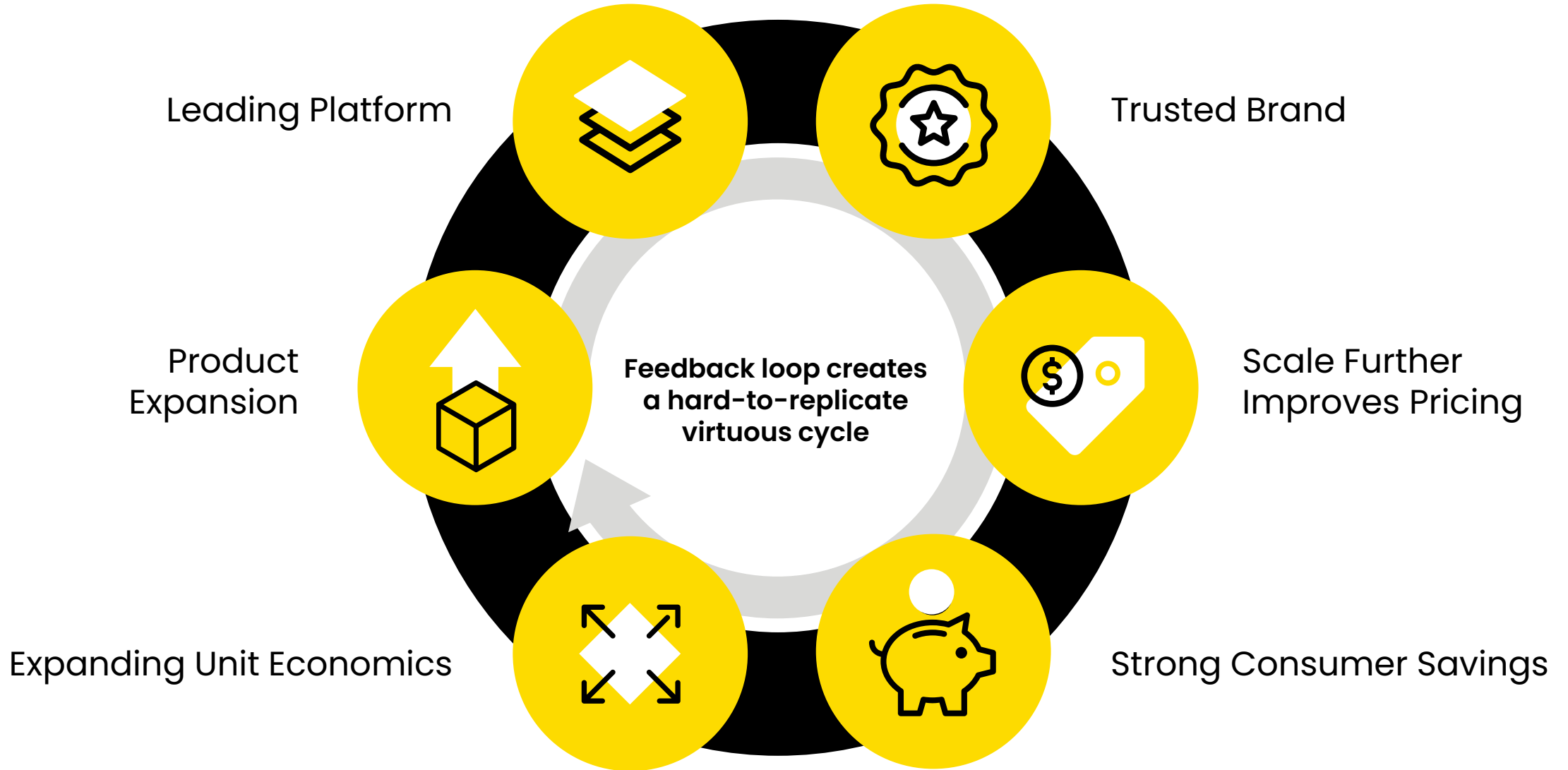
7. As of 12/31/23. Savings are measured as the difference between the pharmacy list price and the price the consumer pays utilizing a GoodRx code at the same pharmacy. Because consumers of our website and mobile application may switch pharmacies if they find a better discount, our consumer savings calculation includes an estimate of savings achieved based on switching pharmacies.

8. Based on internal data as of 12/31/23.

9. Based on internal data; Average savings for GoodRx users for LTM 9/30/23, comparing the GoodRx discounted price to the usual and customary, or cash price.

10. Based on 2023 internal data. Repeat activity refers to the second and later use of our discounted prices by a single GoodRx consumer.

Our network strengthens with every transaction



Definitions

Hybrid Contracting Model – Refers to a 4 prong strategy:

1. **Traditional PBM network:** Multiple PBM price points for one pharmacy
2. **Single source PBM opportunity:** One PBM network on behalf of one singular pharmacy
3. **True hybrid model:** Still rely on PBM to contract most of the network, but we directly contract with pharmacy on a subset of drugs
4. **Full direct contracting model:** Our pricing relationship with that pharmacy is between us and them, no PBM involvement

MACs (Monthly Active Consumers) – Refers to the number of unique consumers who have used a GoodRx code to purchase a prescription medication in a given calendar month and have saved money compared to the list price of the medication. A unique consumer who uses a GoodRx code more than once in a calendar month to purchase prescription medications is only counted as one Monthly Active Consumer in that month. A unique consumer who uses a GoodRx code in two or three calendar months within a quarter will be counted as a Monthly Active Consumer in each such month. Monthly Active Consumers do not include subscribers to our subscription offerings, consumers of our pharma manufacturer solutions offering, or consumers who used our telehealth offering. When presented for a period longer than a month, Monthly Active Consumers are averaged over the number of calendar months in such period.

GMV (Gross Merchandise Value) – The aggregate price paid by our consumers who used a GoodRx code available through our platform for their prescriptions during such period. GMV excludes any prices paid by consumers linked to our other offerings, including our subscription offerings.

HCPs – Healthcare providers.

ISP – Integrated savings program.

Partner Pharmacies – Select licensed pharmacies with whom we have direct contractual agreements.

PBMs (Pharmacy Benefit Managers) – PBMs aggregate demand to negotiate prescription medication prices with pharmacies and pharma manufacturers. PBMs find most of their demand through relationships with insurance companies and employers. However, nearly all PBMs also have consumer direct or cash network pricing that they negotiate with pharmacies for consumers who choose to purchase prescriptions outside of insurance.

Prescribers – Refers to individuals in the medical profession who are allowed to write orders for medical treatment.

Subscription Plans – Represent the ending subscription plan balance across both of our subscription offerings, GoodRx Gold and Kroger Savings Club. Each subscription plan may represent more than one subscriber since family subscription plans may include multiple members.

Savings, Saved, or other similar references – Refers to the difference between the list price for a particular prescription at a particular pharmacy and the price paid by the GoodRx consumer for that prescription utilizing a GoodRx code available through our platform at that same pharmacy. In certain circumstances, we may show a list price on our platform when such list price is lower than the negotiated price available using a GoodRx code and, in certain circumstances, a consumer may use a GoodRx code and pay the list price at a pharmacy if such list price is lower than the negotiated price available using a GoodRx code. We do not earn revenue from such transactions, but our savings calculation includes an estimate of the savings achieved by the consumer because our platform has directed the consumer to the pharmacy with the low list price. This estimate of savings when the consumer pays the list price is based on internal data and is calculated as the difference between the average list price across all pharmacies where GoodRx consumers paid the list price and the average list price paid by consumers in the pharmacies to which we directed them. We do not calculate savings based on insurance prices as we do not have information about a consumer's specific coverage or price. We do not believe savings are representative or indicative of our revenue or results of operations.

Quarterly Non-GAAP Financial Measures

The following table presents a reconciliation of net (loss) income and revenue, the most directly comparable financial measures calculated in accordance with GAAP, to Adjusted EBITDA and Adjusted Revenue, respectively, and presents net (loss) income margin, the most directly comparable financial measure calculated in accordance with GAAP, with Adjusted EBITDA Margin:

	Three Months Ended							
	December 31, 2023	September 30, 2023	June 30, 2023	March 31, 2023	December 31, 2022	September 30, 2022	June 30, 2022	March 31, 2022
<i>(dollars in thousands)</i>								
Net loss (income)	\$ (25,869)	\$ (38,495)	\$ 58,786	\$ (3,290)	\$ (1,972)	\$ (41,734)	\$ (1,415)	\$ 12,293
Adjusted to exclude the following:								
Interest income	(8,474)	(8,649)	(7,814)	(7,234)	(5,445)	(2,920)	(857)	(52)
Interest expense	14,821	14,720	14,054	13,133	11,927	9,478	6,969	5,869
Income tax expense (benefit)	1,234	(8,106)	(46,718)	6,886	(2,773)	19,463	(8,744)	1,651
Depreciation and amortization	43,608	33,024	16,097	14,939	15,533	13,952	13,319	11,373
Other expense	—	2,200	—	1,808	—	—	—	—
Financing related expenses	—	—	—	—	6	5	5	4
Acquisition related expenses	174	162	385	1,056	2,856	18,656	3,001	1,973
Restructuring related expenses	4,634	22,389	—	—	37	5,880	45	311
Legal settlement expenses	(2,900)	3,000	—	—	(1,300)	—	2,800	—
Stock-based compensation expense	28,778	32,646	17,897	25,499	29,414	29,038	31,633	30,149
Payroll tax expense related to stock-based compensation	268	580	405	440	143	184	472	1,083
Loss on operating lease assets	979	—	374	—	12,569	—	—	—
Gain on sale of business	—	—	—	—	(11,404)	—	—	—
Adjusted EBITDA	\$ 57,253	\$ 53,471	\$ 53,466	\$ 53,237	\$ 49,591	\$ 52,002	\$ 47,228	\$ 64,654
Revenue	\$ 196,644	\$ 179,958	\$ 189,677	\$ 183,986	\$ 184,109	\$ 187,318	\$ 191,798	\$ 203,329
Adjusted to exclude the following:								
Client contract termination costs	\$ —	10,000	—	—	—	—	—	—
Adjusted Revenue	\$ 196,644	\$ 189,958	\$ 189,677	\$ 183,986	\$ 184,109	\$ 187,318	\$ 191,798	\$ 203,329
Net (loss) income margin	(13.2%)	(21.4%)	31.0%	(1.8%)	(1.1%)	(22.3%)	(0.7%)	6.0%
Adjusted EBITDA Margin	29.1%	28.1%	28.2%	28.9%	26.9%	27.8%	24.6%	31.8%