(AMARIAN)

We are Agile NASDAQ: AGRX

Forward Looking Statement

Certain information contained in this presentation and other matters discussed today or answers that may be given in response to questions may include "forward-looking statements". We may, in some cases, use terms such as "predicts," "believes," "potential," "continue," "estimates," "anticipates," "expects," "plans," "intends," "may," "could," "might," "will," "should" or other words that convey uncertainty of future events or outcomes to identify these forward-looking statements.

In particular, the Company's statements regarding projections and potential future results are examples of such forward-looking statements. The forward-looking statements are subject to important factors, risks and uncertainties, including, but not limited to, risks related to our ability to maintain regulatory approval of Twirla[®], our ability along with our third-party manufacturer, Corium, to complete successfully the scale-up of the commercial manufacturing process for Twirla, including the qualification and validation of equipment related to the expansion of Corium's manufacturing facility, the performance and financial condition of Corium or any of the suppliers to our third-party manufacturer, the ability of Corium to produce commercial supply in quantities and quality sufficient to satisfy market demand for Twirla, our ability to successfully commercialize Twirla, the successful development of our sales and marketing capabilities, the accuracy of our estimates of the potential market for Twirla, regulatory and legislative developments in the United States and foreign countries, our ability to obtain and maintain intellectual property protection for Twirla, our strategy, business plans and focus, and unforeseen market factors or events in our clinical, regulatory and manufacturing development plans; and other factors, including general economic conditions and regulatory developments, not within the Company's control.

These factors could cause actual results and developments to be materially different from those expressed in or implied by such statements. The forward-looking statements are made only as of the date of this presentation and the Company undertakes no obligation to publicly update such forward-looking statements to reflect subsequent events or circumstance. For additional information about the risks and uncertainties that may affect our business please see the factors discussed in "Risk Factors" in the Company's periodic reports filed with the SEC.

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- A champion for healthcare choices women deserve, headquartered in Princeton, NJ
- Dedicated to building a robust Women's Health Franchise
- Twirla[®] is our first FDA-approved product



TWIRLA is indicated as a method of contraception for use in women with a BMI < 30 kg/m² for whom a combined hormonal contraceptive is appropriate. Consider TWIRLA's reduced effectiveness in women with a BMI \ge 25 to < 30 kg/m² before prescribing TWIRLA. TWIRLA is contraindicated in women with a BMI \ge 30 kg/m².



Agile's Corporate Strategy: Become a Leader in Women's Health

- Short-Term Goal Establish Agile in the prescription contraceptive market with Twirla, our first FDA-approved product
- Long-Term Mission Broaden our women's health portfolio, including in areas of unmet medical need





Agile's Women's Health Mission Starts with Contraception

WHY CONTRACEPTION?	Women use contraception for an average of 30 years, and nearly all women use contraception at some point ^{1,2}		
WITT CONTRACEF HON?	Nearly half of pregnancies in U.S. women are unintended ³		
WHY DO WOMEN NEED MORE BIRTH CONTROL OPTIONS?	Nearly half of unintended pregnancies are due to inconsistent and/or improper use of contraception ⁴		
	Women's individual preferences for contraceptive methods vary and change across their lifetimes as their needs change ⁵		
	Women are more consistent with contraceptive use and stay with a method for longer when using a method of their choosing ⁴		

1-Hamilton BE, Kirmeyer SE., National Center for Health Statistics. 2017; 2-Daniels K et al, National Center for Health Statistics. 2013 3-Finer LB and Zolna MR, NEJM 2016; 4-Frost JJ and Darroch J., Perspectives on Sexual and Reproductive Health 2008 5-Mansour D, Int J Women's Health 2014



What is Missing From Available Hormonal Birth Control Options?

"Some women are just not good at remembering to take a pill at the same time every day...Others don't want something in their vagina while others don't want an injection."

- Ob/Gyn



The dose of estrogen in CHCs is believed to be the primary factor contributing to unwanted side effects¹

The only other non-daily transdermal patch currently available delivers a high dose of estrogen²

Potential to reduce burden associated with daily pills

49% of contraception users prefer non-daily method³
52% are frustrated with taking the pill daily³

May be preferred by some women⁴

Some women prefer to avoid injections, implants, and intrauterine devices



1-Poindexter, A., Fertility and Sterility 2001; 2-Xulane Package Insert; 3-Mansour D., International Journal of Women's Health 2014; 4-Qualitative and guantitative HCP research, Kantar Health 2010; Third party research, 2017

Twirla Designed to Fill A Hormonal Birth Control Market Need







30µg/day Ethinyl Estradiol (EE) 120µg/day Levonorgestrel (LNG)

Patch Regimen: Once-a-week

S	м	т	w	т	F	S	
1	2	3	4	5	6	7	
8	9	10	11	12	13	14	
9						-	
15	16	17	18	19	20	21	
22	23	24	25	26	27	28	
7 days no patch							

Pill Regimen: Once-a-day

SUN	MON	TUE	WED	THU	FRI	SAT
		• ³	• ⁴	• ⁵	6	
• ⁸	• ⁹			1 2		
15	16		18	19	20	21
22	23	24	25	26	27	28

Less invasive than some methods (vaginal ring, IUDs, injections, implants)

"I want to eliminate the forgetfulness... but I don't want to lose that control either." – Consumer, October 2016



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Source: Qualitative consumer market research, Adelphi Research 2016

U.S. Hormonal Contraceptive Market is a Significant Opportunity US Market Estimates (2018)

Combined Hormonal Contraception Long Acting Reversible Contraception **Progestin-Only** (CHC) (P-Only) (LARC) CHC Pill, Ring, Patch P-only Pill, Injection IUD, Implant \$3.7 Billion \$300 Million \$1.3 Billion Rings Patches (18%) (5%) CHC Pills + Ring + Patch = \$3.7 Billion **CHC Pills** (48%) **IUDs** Potential Addressable Market for (16%) Implants (8%) Injectables **P-Only Pills** (5%) (1%) NASDAQ: AGRX

\$5.3 Billion U.S. Contraceptive Market

P-only Pills category includes emergency contraceptive prescriptions. Not Shown: "All Other" category with <1M TRx Sources: IQVIA NSP through Dec 2018; ACOG FAQs

Twirla has the Potential for Significant Market Share

Peak TRx Share Estimate Based on Consumer & Physician Market Research and Market Analogs

HCP Market Research (% CHC Market TRx)						
Study Year	Study Year Stated Share Calibrat Overstat					
2019	20%	14%				
2016	23%	14%				

Consumers "Extremely Likely" to Ask for Twirla	Average of Analog Brands
15%	9.6%





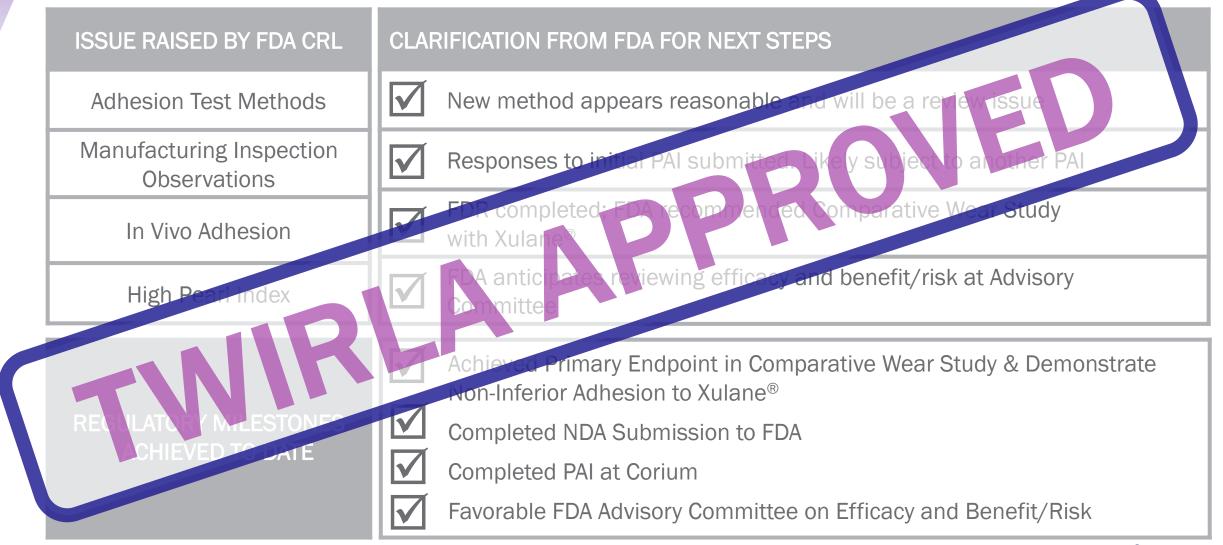
Sources: IMS NPA, 2002-2014 Qualitative and Quantitative HCP and Consumer market research, Adelphi Research 2016 Quantitative HCP market research, MarketVision Research 2019







The Path To Potential Twirla Approval



PDUFA GOAL DATE: February 16, 2020



Agile Has Activated Partners to Prepare for Twirla Commercial Readiness

MANUFACTURING	MARKET ACCESS	LAUNCH NETWORK	SALES FORCE				
 Corium is an experienced contract patch manufacturer Qualification of commercial scale equipment in final stages Plan for completion of validation in fourth quarter 	 Agile knows its market Top 8 payers expected to cover majority of commercial lives¹ Strategic contracting inteded to place Twirla in competitive reimbursement position 	 Relationships with experienced vendors to facilitate commercial launch Vendors have expertise in marketing, PR, market access, and supply chain 	 Small, targeted sales force (70-100 reps) to launch Phased hiring linked to formulary acceptance Focus on high-prescribing Ob/Gyns and women's health NP/PAs 				
Sources 1.Berchick E. Hood E. Barnett I. Health Insurance Coverage in the United State 2017							

Sources 1-Berchick E, Hood E, Barnett J,. Health Insurance Coverage in the United State 2017 Haefner, M. America's largest health insurers in 2018

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Phased Approach to Commercial Strategy

PRE-MARKET PREP	PRODUCT ACCESS				
Set up trade distribution	Launch manufacturing	HCP ENGAGEMENT			
Plan payer strategy Marketing Analytics	Payer strategy Formulary access	Launch sales force	CONSUMER ACTIVATION		
& Strategy	Hire & train sales force	Implement HCP Campaign Samples Availability	Initiate consumer campaign		
Pre-Validation	Valid	ation	Commercial Launch		
Manufacturing Preparations					

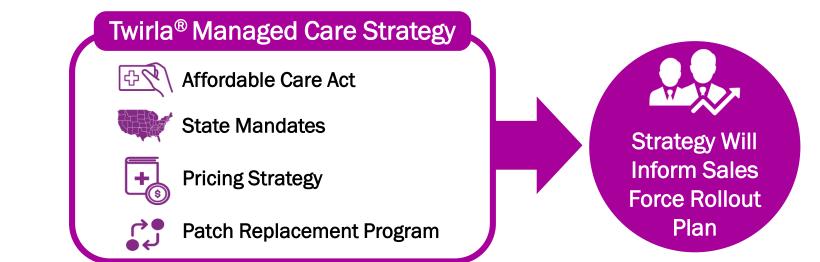
FDA post marketing requirement and commitment:

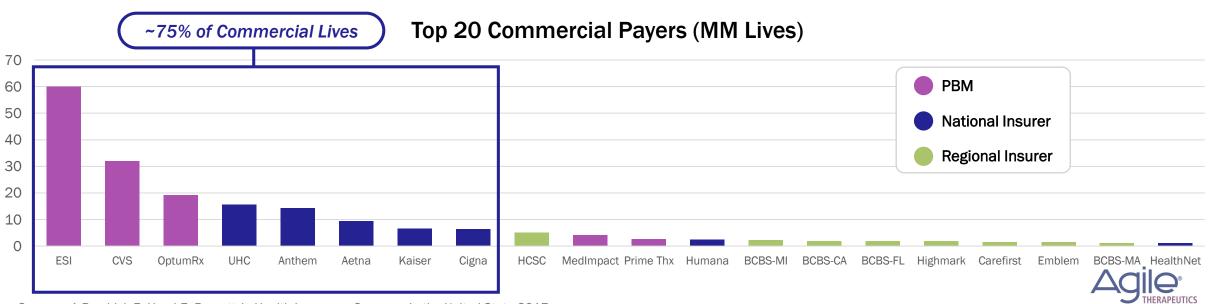
• Long-term prospective, observational post-marketing study comparing risks of venous thromboembolism (VTE) and arterial thromboembolism (ATE) in new users of Twirla to new users of other CHCs



Small residual drug study to analyze EE and LNG content after prescribed wear and to monitor adhesion

Managed Care Strategy: Minimize Access Barriers





Sources 1-Berchick E, Hood E, Barnett J,. Health Insurance Coverage in the United State 2017 Haefner, M. America's largest health insurers in 2018

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AGRX Financial Overview

BALANCE SHEET

Cash Balances

\$34.5 million in cash and cash equivalents as of December 31, 2019

\$35.0 Million debt facility signed February 10, 2020

- FEB. 2020 PERCEPTIVE DEBT FACILITY
- \$20 million disbursed
 - \$5 million in proceeds at signing
 - \$15 million in proceeds at Twirla[®] approval
- \$15 million upon \$20 million TTM revenue milestone

FEB. 2020 PUBLIC OFFERING

\$48.4 Million estimated net proceeds from public offering of common stock

- 17.3 million shares sold including underwriters exercise of option
- 87.1 million estimated common shares outstanding at February 25, 2020



Summary of Agile Therapeutics Opportunity

WHAT IS OUR INITIAL FOCUS?	 A non-daily, less invasive contraceptive option – Twirla[®] Expect to launch into \$3.7B addressable market 5-8% peak TRx market share estimate 			
WHY ARE WE WELL- POSITIONED TO EXECUTE OUR PLAN?	 Experienced management team with the ability to plan and execute Activated partners to prepare for commercial readiness Building out internal capabilities 			
WHAT DID WE SUCCESSFULLY COMPLETE IN 2019?	2019 MILESTONE Conduct Comparative Wear Study & Meet Primary Endpoint Pre-Approval (PAI) Inspection at Manufacturer Advisory Committee on Twirla	DATE Completed Feb 2019 Completed Oct 2019 Completed Oct 2019		
WHAT'S NEXT FOR 2020?	2020 MILESTONE Twirla FDA-Approval Initial Shipment of Product	DATE Completed Feb 2020 Projected 2H 2020		



Appendix



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Contraceptive Use by U.S. Women

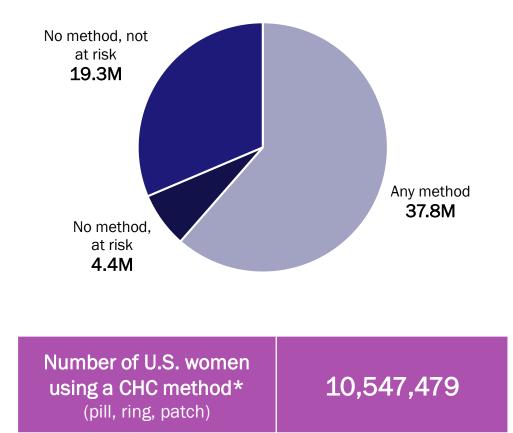
CONTRACEPTIVE METHOD CHOICE

Most effective method used in the past month by U.S. women, 2014

METHOD	No. of women	% of women aged 15–44	% of women at risk of unintended pregnancy	% of contraceptive users
Pill	9,572,477	15.6	22.7	25.3
Tubal (female) sterilization	8,225,149	13.4	19.5	21.8
Male condom	5,496,905	8.9	13.0	14.6
IUD	4,452,344	7.2	10.6	11.8
Vasectomy				
(male sterilization)	2,441,043	4.0	5.8	6.5
Withdrawal	3,042,724	5.0	7.2	8.1
Injectable	1,481,902	2.4	3.5	3.9
Vaginal ring	905,896	1.5	2.1	2.4
Fertility awareness-				
based methods	832,216	1.3	2.0	2.2
Implant	965,539	1.6	2.3	2.6
Patch	69,106	0.1	0.2	0.2
Emergency contraception	69,967	0.1	0.2	0.2
Other methods*	234,959	0.4	0.6	0.6
No method, at risk of				
unintended pregnancy	4,408,474	7.2	10.5	na
No method, not at risk	19,302,067	31.4	na	na
Total	61,491,766	100.0	100.0	100.0

*Includes diaphragm, female condom, foam, cervical cap, sponge, suppository, jelly/cream and other methods. NOTE: "At risk" refers to women who are sexually active; not pregnant, seeking to become pregnant or postpartum; and not noncontraceptively sterile. na=not applicable.

Contraceptive Method Choice (Number of U.S. Women*)





Average Price Per Cycle for Branded CHCs (\$WAC)

