

SECOND QUARTER 2022 FINANCIAL RESULTS

AUGUST 4, 2022

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AGENDA

Introduction

Charlie Wagner, Executive Vice President and Chief Financial Officer

CEO Perspective and Pipeline Update

Reshma Kewalramani, M.D., Chief Executive Officer and President

Business Update

Stuart Arbuckle, Executive Vice President and Chief Operating Officer

Financial Results

Charlie Wagner, Executive Vice President and Chief Financial Officer

SAFE HARBOR STATEMENT & NON-GAAP FINANCIAL MEASURES

This presentation contains forward-looking statements as defined in the Private Securities Litigation Reform Act of 1995, as amended, including, without limitation, the information provided regarding future financial performance and operations, the section captioned "Full-Year 2022 Financial Guidance", and statements regarding (i) the expectations, development plans, anticipated timelines for and potential benefits of the company's products and product candidates, including study designs, clinical site initiations, patient enrollment, data availability, anticipated regulatory filings, approvals, and timing thereof. (ii) expectations for continued growth in the number of CF patients treated with our products, including reaching more CF patients who can benefit from our marketed products, (iii) our plans to treat additional CF patients with mRNA, including plans for a CFTR mRNA IND filing in 2022, (iv) expectations for our next-in-class, once-daily, oral triple regimen for CF patients, including further enhancements of patient benefit, our Phase 3 program expectations, enrollment plans and related economics, (v) expectations for the exa-cel program, including the continued potential of exa-cel to be a curative approach for patients with TDT and SCD, expectations for program approval and launch, and potential commercial opportunity, (vi) our plans regarding our pivotal program underway for inaxaplin in AMKD, and our beliefs regarding anticipated results of the study and the possibility for accelerated approval in the U.S., (vi) expectations regarding the potential benefits of our pain program and products, and plans for the advancement of VX-548 into a Phase 3 program in acute pain in the fourth quarter of 2022 and into Phase 2 dose-ranging study for neuropathic pain by year-end 2022, and our beliefs regarding the possibility for accelerated approval in the U.S., (vii) expectations for uptake of and expanded access to the company's products, including additional reimbursement agreements, label expansions and approvals in new markets, (viii) the potential benefits and safety of VX-880, and our plans to continue to progress the Phase 1/2 program for VX-880, (ix) our plans and expectations regarding our additional programs in T1D, including the completion of IND-enabling studies for the encapsulated islet cell program and anticipated regulatory filings in 2022. (x) plans to advance one or more novel small molecule Z-AAT correctors into the clinic in 2022. (xi) our plans regarding our DMD program, and (xii) our investments and expectations in external innovation, including collaborations and acquisitions, and (xiii) beliefs about delivering treatments and potential cures for more patients in multiple new disease areas, including potential commercial opportunities in the disease areas in which we focus. While Vertex believes the forward-looking statements contained in this presentation are accurate. these forward-looking statements represent the company's beliefs only as of the date of this presentation and there are a number of risks and uncertainties that could cause actual events or results to differ materially from those expressed or implied by such forward-looking statements. Those risks and uncertainties include, among other things, that the company's expectations regarding its future financial and operating performance may be incorrect (including because one or more of the company's assumptions underlying its expectations may not be realized), that the company may not be able to submit anticipated regulatory filings on expected timelines, or at all, that external factors may have different or more significant impacts on the company's business or operations than the company currently expects, that data from preclinical testing or clinical trials, especially if based on a limited number of patients, may not be indicative of final results, that actual patient populations able to participate in our trials or eligible for our products may be smaller than we anticipated, that data from the company's development programs may not be available on expected timelines, or at all, and may not support registration or further development of its potential medicines due to safety, efficacy or other reasons, and other risks listed under "Risk Factors" in Vertex's annual report and subsequent guarterly reports filed with the Securities and Exchange Commission (SEC) and available through the company's website at www.vrtx.com and on the SEC's website at www.sec.gov. You should not place undue reliance on these statements or the scientific data presented. Vertex disclaims any obligation to update the information contained in this presentation as new information becomes available.

In this presentation, Vertex's financial results and financial guidance are provided in accordance with accounting principles generally accepted in the United States (GAAP) and using certain non-GAAP financial measures. In particular, non-GAAP financial results and guidance exclude from Vertex's pre-tax income (i) stock-based compensation expense, (ii) gains or losses related to the fair value of the company's strategic investments, (iii) increases or decreases in the fair value of contingent consideration, (iv) acquisition-related costs, (v) an intangible asset impairment charge and (vi) other adjustments. The company's non-GAAP financial results also exclude from its provision for income taxes the estimated tax impact related to its non-GAAP adjustments to pre-tax income described above and certain discrete items. These results should not be viewed as a substitute for the company's GAAP results and are provided as a complement to results provided in accordance with GAAP. Management believes these non-GAAP financial measures help indicate underlying trends in the company's business, are important in comparing current results with prior period results and provide additional information regarding the company's financial position that the company believes is helpful to an understanding of its ongoing business. Management also uses these non-GAAP financial measures to establish budgets and operational goals that are communicated internally and externally, to manage the company's business and to evaluate its performance. The company's calculation of non-GAAP basis. The guidance regarding combined R&D, Acquired IPR&D and SG&A expenses and effective tax rate on a non-GAAP basis. The guidance regarding combined GAAP and non-GAAP R&D, Acquired IPR&D and SG&A expenses does not include estimates associated with any potential future business development transactions, including collaborations, asset acquisitions and/or licensing of third-party intellectual property rights. The company does not provide guidance regarding it

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A NEW INFLECTION POINT FOR VERTEX

Unique and differentiated R&D strategy delivers success

Accelerating CF leadership

- Treating more patients with our CF medicines
- TRIKAFTA real-world data continue to raise the bar
- Advancing our next-gen CFTR regimen through Phase 3
- Plan to file IND for CFTR mRNA therapy in 2H22

Advancing broad and deep R&D pipeline

- Proof-of-concept established in five disease areas outside CF
- Multiple programs in pivotal development
- Next wave of therapies approaching the clinic

Strong financial profile

- On track for 8th consecutive year of doubledigit revenue growth
- Industry-leading profitability
- Strong balance sheet and cash flow allow flexibility to invest

VERTEX IS ADVANCING A BROAD AND DEEP CLINICAL PIPELINE ACROSS **MULTIPLE MODALITIES**

		RESEARCH	PHASE 1	PHASE 2	PHASE 3	APPROVED
	KALYDECO					
	ORKAMBI					
	SYMDEKO/SYMKEVI					
Custia Fibracia	TRIKAFTA/KAFTRIO					
Cystic Fibrosis	VX-121/tezacaftor/VX-561					
	Additional Small Molecules					
	mRNA Therapeutics	*	moderna"			
	CRISPR/Cas9		,			
Sickle Cell Disease	Exa-cel (CTX001, CRISPR/Cas9)	THERAPEUTI	3			PR
Sickle Cell Disease	Small Molecule				THERAPE	UTICS
Beta Thalassemia	Exa-cel (CTX001, CRISPR/Cas9)					
Deta malassemia	Small Molecule					τις
APOL1-Mediated Kidney Disease	Inaxaplin (VX-147, APOL1 inhibitor)					
APOLI-IMediated Kidney Disease	Additional Small Molecules					
	VX-548 (NaV1.8 inhibitor) – Acute Pain					
Pain	VX-548 (NaV1.8 inhibitor) – Neuropathic Pain					
	Additional Small Molecules (NaV1.8 inhibitors)					
Type 1 Diabetes	VX-880 (islet cells alone)					
	Combination Therapy (islet cells + device)					

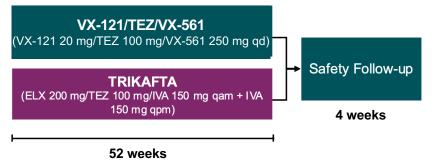
Cell therapy or nucleic acid therapy (mRNA, gene editing) 🌟 Complementary BD



VX-121/TEZACAFTOR/VX-561 TRIPLE REGIMEN MAY FURTHER ENHANCE PATIENT BENEFIT IN CYSTIC FIBROSIS

Two Phase 3 global, randomized, double-blind, active-controlled trials underway (N=950 total):





Next-in-Class, Once-Daily, Oral Triple Regimen

- Preclinical and Phase 2 clinical data demonstrate potential for superior efficacy over TRIKAFTA
- Once-daily regimen
- Enhanced economics
- More than 250 clinical sites active across both studies
- On track to complete pivotal program enrollment by late 2022/early 2023
- RIDGELINE study initiated in patients ages 6 to 11

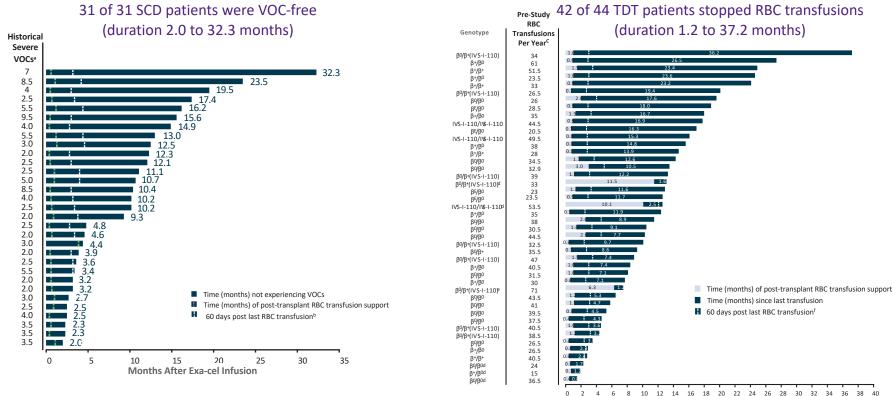
EHA 2022: EXA-CEL DATA CONTINUE TO DEMONSTRATE CURATIVE POTENTIAL



7

Months After Exa-cel Infusion

Data from 75 patients with follow up to 37 months show compelling efficacy in patients with SCD and TDT



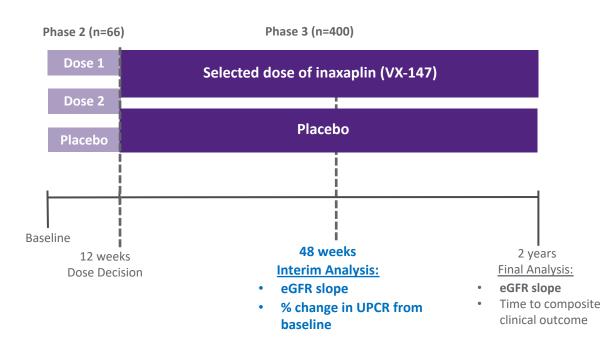
RBC, red blood cell; SCD, sickle cell disease; VOC, vaso-occlusive crisis; Hb, hemoglobin; TDT, transfusion-dependent β-thalassemia. Each row in the figures represents an individual patient.

^aPre-study severe VOCs annualized over 2 years; ^bPatients are evaluated for elimination of VOCs starting 60 days after their last transfusion. ^cNumber of transfusion units annualized over 2 years; ^dReceived RBC transfusions at or after data cut; ^ePatient stopped transfusions after data cut; ^fPatients are evaluable for elimination of transfusions starting 60 days after their last transfusion.



INAXAPLIN PIVOTAL PROGRAM UNDERWAY FOR PATIENTS WITH APOL1-MEDIATED KIDNEY DISEASE (AMKD)

Program targets broad AMKD label; interim analysis at 48 weeks may provide path to accelerated U.S. approval



Small Molecule Targeting the Underlying Cause of AMKD

- Single, adaptive Phase 2/3 study in patients with AMKD
- 150 sites planned globally
- Interim analysis at 48 weeks: if data are positive, potential to file for accelerated approval
- Breakthrough Therapy designation in the U.S. and PRIME designation in Europe

VX-548: INITIATING PIVOTAL DEVELOPMENT FOR ACUTE PAIN



Program targets broad moderate to severe acute pain label in the U.S.; studies to include an opioid treatment arm



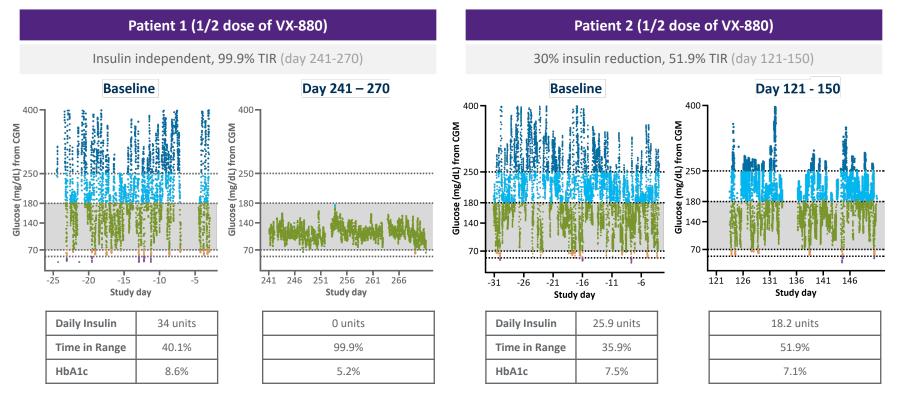
Novel, Selective NaV1.8 Inhibitor for Pain

- Novel MOA with potential to redefine the treatment of pain
- Breakthrough Therapy designation secured and Phase 3 program for acute pain to initiate in Q4 2022
- Phase 2 dose-ranging study for neuropathic pain to initiate by year-end 2022

ADA 2022: ADDITIONAL DATA FROM FIRST TWO VX-880 PATIENTS CONTINUE TO SHOW TRANSFORMATIVE POTENTIAL

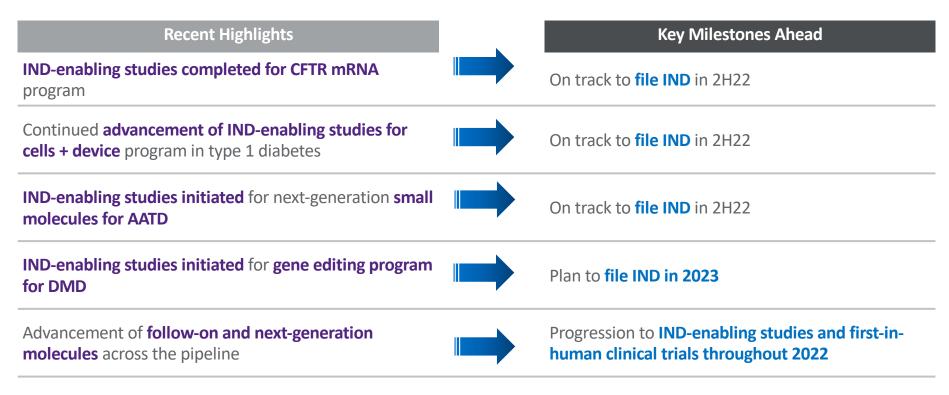


Significant increases in time in range (TIR); both patients have demonstrated glucose-responsive insulin production



CGM, continuous glucose monitoring; TIR, time in range. Data from the latest cut evaluated, Day 241-270 for patient 1 and Day 121-150 for patient 2. *Time in range 70-180 mg/dL.

NEXT WAVE OF INNOVATION ADVANCING RAPIDLY





CONTINUED UPTAKE OF OUR CFTR MODULATORS AROUND THE WORLD



UNITED STATES

- Q2 TRIKAFTA growth in younger age groups (ages 6-11)
- Consistently strong performance, high persistence and compliance rates for TRIKAFTA in the U.S.



EUROPE and OTHER MARKETS

- Rapid uptake of KAFTRIO/TRIKAFTA in markets with recent reimbursement
- KAFTRIO/TRIKAFTA available and reimbursed in more than 25 countries



CONTINUED GROWTH AHEAD IN CF

83,000 patients with CF in U.S., Europe, Australia and Canada

....

→ 1. >25,000 patients that are

addressable with triple combination are still untreated

- Continued uptake
- New reimbursements
- Label expansion to younger ages

2. NEW: potential to treat approximately 5,000 additional patients with CFTR mRNA; IND planned for 2H 2022

Rapid uptake for our CF medicines in currently • eligible patients

Note: Estimated CF patient population and population breakdown as of January 2022.

COMMERCIALIZATION HIGHLIGHTS FOR PROGRAMS IN PIVOTAL DEVELOPMENT

Sickle Cell Disease and Beta Thalassemia

32,000 Patients in U.S. and EU



Vast Majority of 25,000 Patients with Severe Sickle Cell Disease are in the U.S.

- Identified "centers of excellence"
- Teams in place across multiple functions
- Engaging with payors

MAAs expected in 4Q22 Discussions with FDA ongoing <section-header>APOL1-Mediated Kidney Disease 100,000 Patients in U.S. and EU OGOO Vast Majority (>80%) of AMKD Patients are in the U.S.

- Raising disease awareness among physicians and patients
- Initiatives to increase genetic testing for APOL1

Phase 2/3 Ongoing

	Acute Pain
>1.58 Tre	eatment Days (U.S.) \$4B U.S. Market Despite 90% Generic RXs
the U.S. i	e acute pain market in is related to hospital discharges

Phase 3 to Initiate in Q4 2022

Q2 2022 FINANCIAL HIGHLIGHTS

(\$ in millions except where noted or per share data and percentages)	Q2 21	FY 21	Q2 22
Total CF product revenues	<u>\$1.79B</u>	<u>\$7.57B</u>	<u>\$2.20B</u>
TRIKAFTA/KAFTRIO	\$1.26B	\$5.70B	\$1.89B
SYMDEKO/SYMKEVI	134	420	43
ORKAMBI	221	772	122
KALYDECO	183	684	139
Combined non-GAAP R&D, acquired IPR&D and SG&A expenses	<u>1.50B</u>	<u>3.44B</u>	<u>750</u>
Non-GAAP operating income	71	3.23B	1.19B
Non-GAAP operating margin %	4%	43%	54%
Non-GAAP net income	43	2.51B	930
Non-GAAP net income per share – diluted	\$0.17	\$9.67	\$3.60
Cash, cash equivalents & marketable securities (period-end)	\$6.7B	\$7.5B	\$9.3B

Notes: Starting in the first quarter of 2022, Vertex no longer excludes research and development charges resulting from upfront or contingent milestone payments in connection with collaborations, asset acquisitions and/or licensing of third-party intellectual property rights from its Non-GAAP financial measures. These charges are included as "Acquired in-process research and development expenses," and were previously included in "Research and development expenses," in Vertex's consolidated statements of operations. Non-GAAP financial measures for the second quarter of 2021 and FY 2021 have been recast to reflect this change. An explanation of non-GAAP financial measures and reconciliation of combined non-GAAP ReD, Acquired IPR&D and SG&A expenses, non-GAAP operating income and non-GAAP net income to corresponding GAAP measures are included in the company's Q2 2022 press release dated August 4, 2022. Non-GAAP financial measures are presented to corresponding GAAP measures in the appendix of this presentation. Totals above may not add due to rounding.

FULL YEAR 2022 UPDATED FINANCIAL GUIDANCE

	Current FY 2022 Guidance	Previous FY 2022 Guidance	FY 2022 Commentary
Total CF Product Revenues	\$8.6 - \$8.8B	\$8.4 - \$8.6B	Increase primarily reflects recent reimbursements and uptake of KAFTRIO/ TRIKAFTA in countries outside the U.S.
Combined GAAP R&D, Acquired IPR&D and SG&A Expenses	\$3.48 - \$3.63B	\$3.30 - \$3.45B	Increase driven by the clinical pipeline advancement and incremental expenses from BD activity
Combined Non-GAAP R&D, Acquired IPR&D and SG&A Expenses	\$ 3.0 - \$3.1B	\$2.82 - \$2.92B	
Non-GAAP Effective Tax Rate	Unchanged	21% - 22%	

RECENT ADVANCES POSITION VERTEX FOR MULTIPLE CLINICAL MILESTONES AHEAD

Key Milestones Ahead
Regulatory approval in the U.S. expected in 2H22
Submit global regulatory filings by the end of 2022
Submit for regulatory approval in Europe and the U.K. by the end of 2022; complete discussion with U.S. FDA
Complete enrollment by late 2022 or early 2023
Ramp enrollment in pivotal program
Initiate pivotal development in acute pain in 4Q22
Initiate Phase 2 study in neuropathic pain by year end 2022
Complete Part B enrollment, additional data from Part B of the trial



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APPENDIX

GAAP TO NON-GAAP FINANCIAL INFORMATION

(\$ in millions except as noted, per share data and percentages)	Q2 21	FY 21	Q2 22
Combined R&D, Acquired IPR&D and SG&A			
GAAP	1.60B	3.89B	877
Non-GAAP	1.50B	3.44B	750
Operating income			
GAAP	(38)	2.78B	1.11B
Non-GAAP	71	3.23B	1.19B
Operating Margin %:			
GAAP	(2)%	37%	50%
Non-GAAP	4%	43%	54%
Net income			
GAAP	67	2.34B	810
Non-GAAP	43	2.51B	930
Net income per share - diluted			
GAAP	\$0.26	\$9.01	\$3.13
Non-GAAP	\$0.17	\$9.67	\$3.60

Note: Starting in the first quarter of 2022, Vertex no longer excludes research and development charges resulting from upfront or contingent milestone payments in connection with collaborations, asset acquisitions and/or licensing of third-party intellectual property rights from its Non-GAAP financial measures. These charges are included as "Acquired in-process research and development expenses," and were previously included in "Research and development expenses," in Vertex's consolidated statements of operations. Non-GAAP financial measures for the second quarter of 2021 and FY 2021 have been recast to reflect this change. An explanation of non-GAAP financial measures and reconciliations of combined non-GAAP Reperted in-process research and development expenses," and were previously included in "Research and development expenses," and were previously included in "Acquired In-graces" and were previously included in the company's Q2 2022 press release dated August 4, 2022.