



NASDAQ: BIOC www.biocept.com

Forward-Looking Statements

This presentation contains, and any accompanying oral presentation would no doubt contain, forward-looking statements, within the meaning of the Private Securities Litigation Reform Act of 1995, regarding Biocept, Inc. and our business. Forward-looking statements include all statements that are not historical facts and generally can be identified by terms such as anticipates, believes, could, estimates, expects, intends, may, plans, potential, predicts, projects, should, will, would, or the negative of those terms and similar expressions.

Forward-looking statements involve known and unknown risks, uncertainties and other 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. For details about these risks, please see our SEC filings.

All forward-looking statements contained in this presentation speak only as of the date hereof, and except as required by law, we assume no obligation to update these forward-looking statements whether as a result of any new information, future events, changed circumstances or otherwise.



Corporate Profile

NASDAQ: BIOC, Listed 2014 Market Cap: +/- \$22M Shares Out: 32.3M ADTV: ~330K

Patented technology used for liquid biopsy in cancer

Provide actionable information to help physicians make treatment decisions

CLIA – CAP accredited laboratory located in San Diego Large potential market - \$10B plus Worldwide



Rapidly growing adoption and reimbursement

Collaborations and partnerships with renowned institutions

Future as IVD kits to be performed in labs around the world

High concordance with tissue biopsy



Large Market Opportunity

Liquid Biopsy market segments

Today

Emerging

Profiling

~\$7B worldwide market by 2020*

Companion diagnostics

~\$2B worldwide market by 2020*

Future



Monitoring

~\$5B worldwide market by 2020*

Screening

Including detection of asymptomatic patients ~\$9B worldwide market by 2020*

Future

"We sized the [global] market opportunity for liquid biopsy as \$22B by 2020..."

*J.P. Morgan Industry Report – May 27, 2015



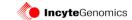
The Executive Team

Michael Nall President & CEO	 25+ years in healthcare sales, marketing and commercial operations 16 years in cancer diagnostics and genomics Most recently General Manager N. American Sales and Marketing for Clarient—a GE Healthcare Company 	
Tim Kennedy CFO & SVP of Operations	 30+ years of financial experience, 25+ years in the clinical diagnostics industry Instrumental in 2.1B restructuring of Millennium Health, a privately-held urine drug lab Numerous senior management positions – helped transform PLUS Diagnostics into largest independent U.S pathology lab; merged National Health Labs and Roche Biomedical Labs to form LabCorp 	
Lyle Arnold, Ph.D. SVP, R&D & CSO	 Senior R&D leadership at Gen-Probe, Incyte Genomics, Genta Founder/ Co-founder Oasis Biosciences, Molecular Biosystems, Aegea Biotechnologies Former faculty member, UCSD School of Medicine and member, UCSD Cancer Center 47 issued US and more than 140 issued and pending patents worldwide 	
Veena Singh, MD SVP & Sr. Medical Director	 Board certified AP/CP and Molecular Pathology, UCSD, Cedars Sinai trained Numerous publications, serves on CAP committees Most recently Medical Director – bioTheranostics 	
Michael Terry SVP, Commercial Operations	 25+ years commercial leadership experience in molecular Dx and med-tech companies Former GE Healthcare executive, certified in Six Sigma Recent experience in liquid biopsy field; EVP commercial operations at both Sequenom and Trovagene 	
David Moskowitz, RPh VP Strategy & Corporate Communications	 16-year Wall Street professional - sell-side equity analyst and research director 25+years of healthcare industry experience; #1 biotech stock-picker 2011 (Starmine) Strategic consultant to numerous companies in pharma, biotech, and diagnostics sectors 	























Board of Directors, Clinical & Scientific Advisors

Board of Directors

David F. Hale

Chairman

M. Faye Wilson, CPA, MBA

Lead Independent Director, Chair - Audit Committee, Member - Compensation Committee, Member -Nominating and Governance Committee

Marsha A. Chandler, PhD

Director, Chair - Nominating and Governance Committee. Member - Science and **Technology Committee**

Director, President & CEO

Bruce E. Gerhardt, CPA

Director, Member Audit Committee

Ivor Royston, MD

Director, Chair - Science and Technology Committee, Member - Nominating and **Governance Committee**

Bruce A. Huebner

Director. Chair -Compensation Committee, Member - Science and **Technology Committee** Member – Audit Committee

Michael W. Nall

Scientific Advisory Board

David Rimm, MD, PhD

Professor of Pathology and Medicine (Oncology) Yale University School of Medicine

Marileila Garcia, PhD

Professor, University of Colorado Division of Medical Oncology

Clinical Advisory Board

Lee Schwartzberg, MD

Chief, Division of Hematology Oncology: Professor of Medicine, University of Tennessee

Jenny Chang, MD

Director, Methodist Hospital Cancer Center, Houston, Texas

Edgardo Santos, MD

Medical Director, Lvnn Cancer Institute, Boca Raton, Florida

Fred Hirsch, MD, PhD

CEO. Int'l Assoc.of Study of Lung Cancer: Professor of Medicine, University of Colorado

Santosh Kesari, MD. PhD

Chair, Dept. of Translational Neuro-oncology and Neurotherapeutics, John Wayne Cancer Institute, Santa Monica California

David Carbone, MD

Director, James Thoracic Center, James Cancer Hospital and Solove Research Institute, Ohio State University

Michael Kosty, MD

Scripps Clinic Torrey Pines, San Diego California

Daniel Rubin, ND, FABNO

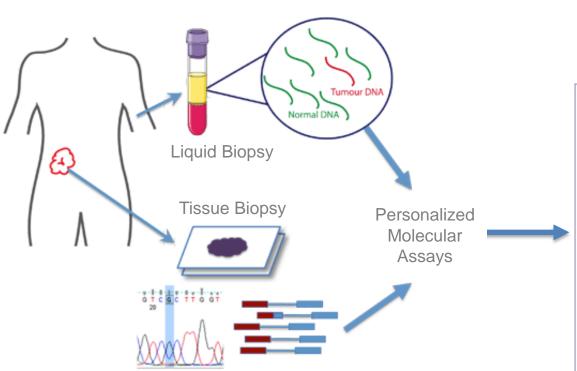
Medical Director, Naturopathic Specialists, Scottsdale, Arizona

Melissa Johnson, MD

Medical Oncologist. Tennessee Oncology, Nashville, Tennessee



Molecular Profiling of Cancer biomarkers: The Standard of Care in Personalized Treatment

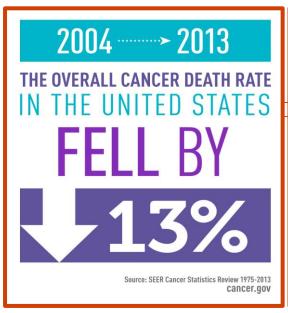


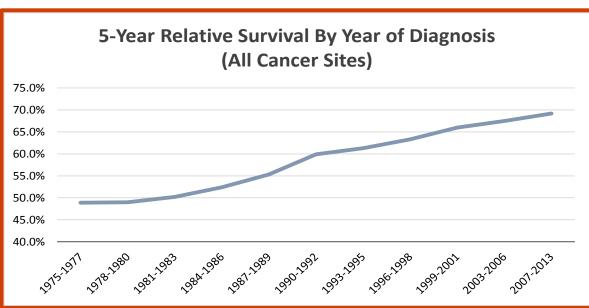
Identification of Molecular
Biomarkers Required to
Qualify Patients for
Targeted Therapy





Personalized Treatment > Improved Outcomes





*NCI Cancer Statistics https://seer.cancer.gov/csr/1975_2014/browse_csr.php?sectionSEL=2&pageSEL=sect_02_table.08.html

1999 Evolution of Targeted Therapies for Cancer Treatment
Herceptin Tarceva Erbitux Zelboraf Xalkori Gilotrif Tagrisso Keytruda Opdivo



Some Patients Missing the Opportunity to Benefit from Personalized Cancer Treatment

Molecular profiling is not feasible or inadequate



Patient Status



Limited Tissue



Bone Biopsies



Intra-tumor Heterogeneity



Inter-tumor Discordance

Financial Constraints
Tissue Biopsy = \$15,000 to \$45,000



Biocept Addressing Highest Medical Need

Why Liquid Biopsy?

25% CRITICAL GENE ALTERATIONS are missed in BIOPSIES.



And only 57% of tissue biopsies have sufficient tissue for analysis.

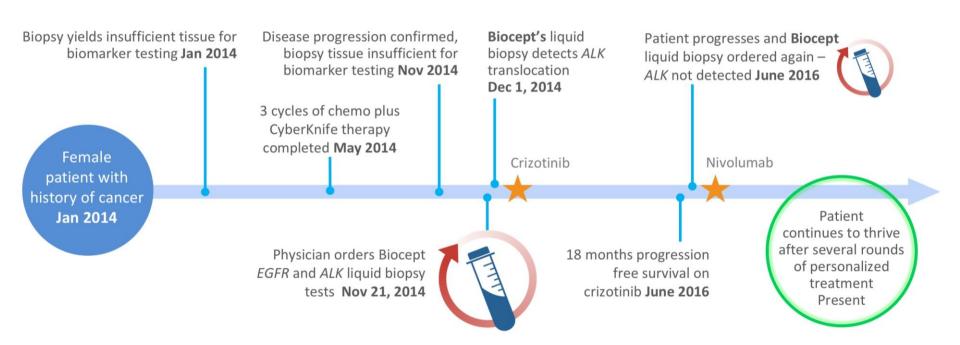
Biocept's Target Selector™

- Complements tissue biopsy by increasing the chance to identify critical biomarkers
- Yields results in 7 days or less enabling targeted therapy as first-line treatment
- Costs significantly less than the \$15,000 to \$45,000 for tissue biopsy approx \$1200
- Is non-invasive



Patient Case Study – "The Gift of Time"

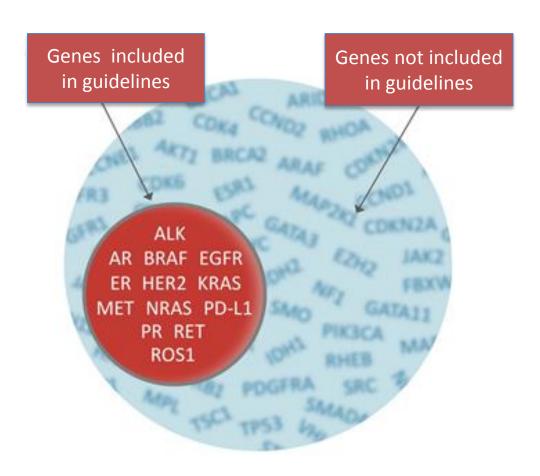
Biocept's Liquid Biopsy Enables Personalized Treatment for Non-Small Cell Lung Cancer (NSCLC) Patient After Tissue Biopsy Proves Inadequate





Biocept Addressing Unmet Medical Need

- Menu of Medically appropriate biomarkers that are clinically actionable and have demonstrated utility for predicting treatment response to targeted therapies
- ✓ Assays demonstrating high concordance with tissue
- ✓ Individual gene testing for specific cancers vs costly multigene panels from other labs
- ✓ Cost effective vs. repeat biopsy
- ✓ Solves an unmet medical need where tissue biopsies are impossible, inadequate or not clinically indicated





Highly Relevant Test Menu: 14 Actionable Biomarkers Found in Guidelines

Cancer	Target Selector CTC	Target Selector ctDNA
Breast	HER2*, ER*, FGFR1, AR, PDL1, PR*	ESR1 mutations
Gastric	HER2*, FGFR1	
Lung	ALK*, ROS1*, MET*, FGFR1, PDL1*, RET	EGFR*, KRAS*, BRAF* mutations, ALK mutations
Colon	EGFR amplification	KRAS*, BRAF*, NRAS* mutations
Prostate	AR, ARv7	
Melanoma		BRAF*, NRAS* mutations

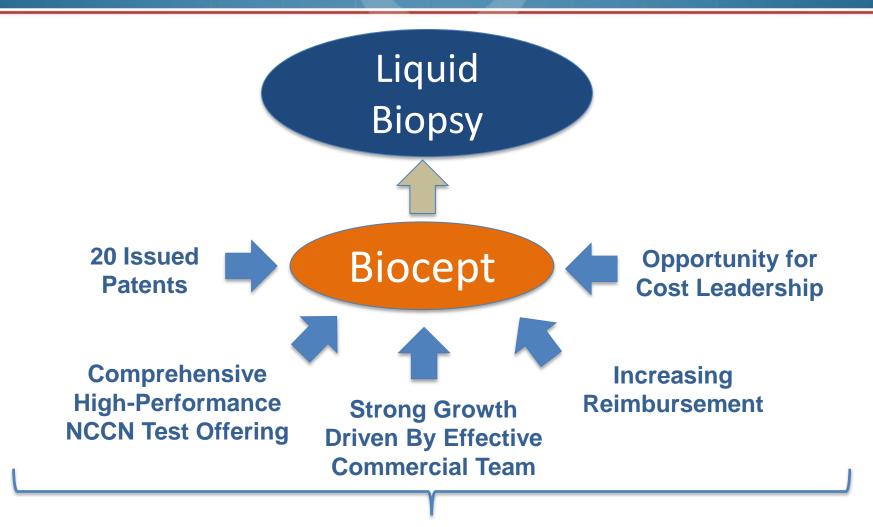
^{*} In NCCN guidelines

Biomarkers currently available for clinical use

Biomarkers under development

Biocept

Premier Commercial Platform in Liquid Biopsy



Evolution to IVD Kit Model



Biocept: Completing the Answer...

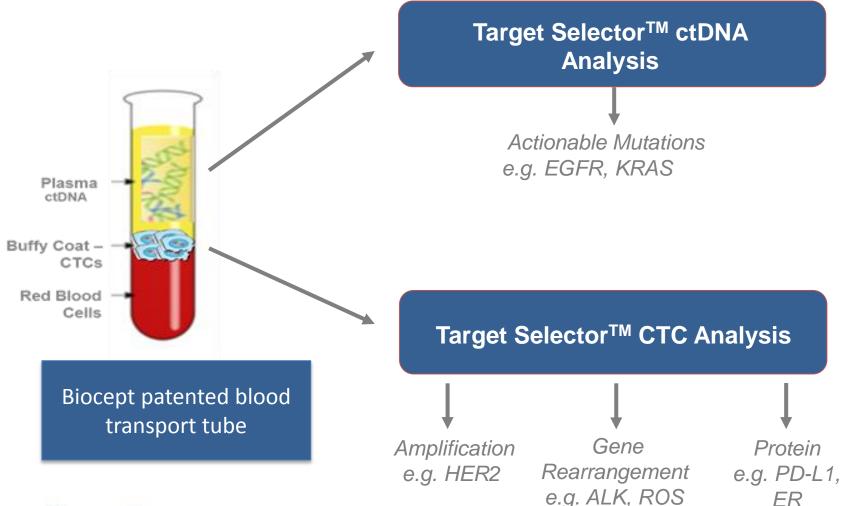
Company	CTCs / Whole Cells	ctDNA / DNA Fragments
Genomic Health (GHI)		X
Epic Sciences (private)	X	
Foundation Medicine (FMI)		X
Guardant Health (private)		X
Biocept (BIOC)	X	X

Biocept advantage

- Leading company commercializing both CTCs and ctDNA from a single blood sample
- Demonstrated high concordance with tissue
- Assays for most appropriate tumor target from blood for each biomarker
- Blood more likely to contain intact cells and is less fragmented than other fluids such as urine
- Broad, international patent coverage
- Cost and reimbursement advantages



Patented Target Selector™ Platform Enables both CTC and ctDNA Analysis

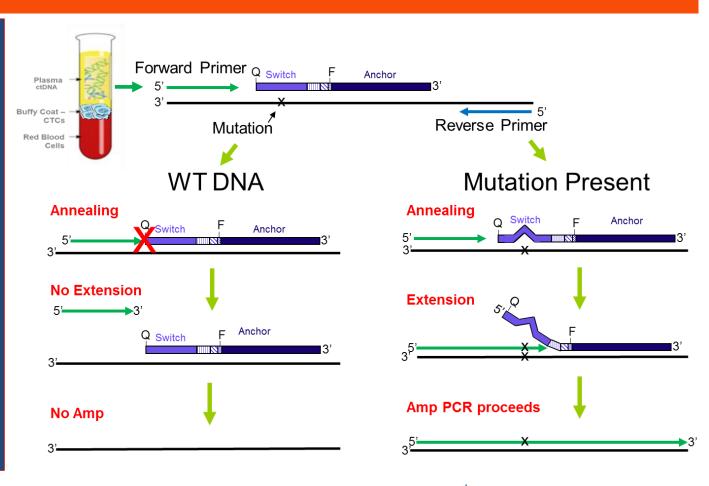




Target Selector[™] ctDNA Testing for Oncogene Mutation Analysis

Industry-leading accuracy with >99% specificity, >95% sensitivity*

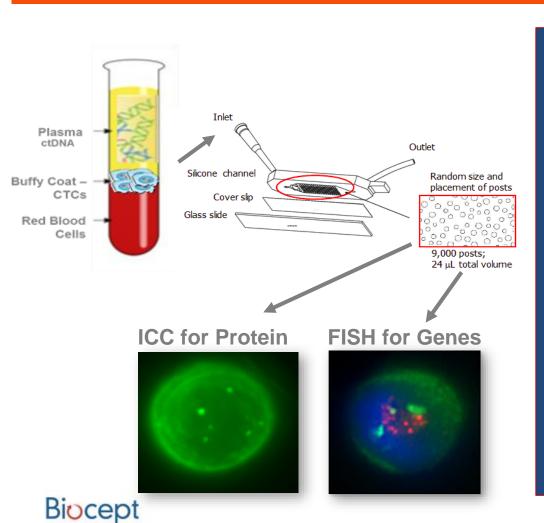
- Superior enrichment of mutant DNA targets vs. wild-type (normal) DNA
- Complete suppression of wild-type DNA amplification
- Quantitatively detects cancer-associated mutations present at low levels in plasma
- Multiple mutations
 within a single genomic
 region detected and
 confirmed by
 sequencing
- Multiplexing expected to drive cost leadership enables profitable testing at NGS reimbursement rates





Target Selector[™] CTC Testing for Whole Cell Analysis

Detection, enumeration and biomarker analysis all within the patented channel



Industry-leading accuracy

>99% specificity and sensitivity

Cells captured in patented, clear microfluidic channel

- Same specimen can be microscopically analyzed for DNA and protein targets
- Cells can be released for further molecular analysis such as Next Generation Sequencing
- Conducive to partnerships with Pathology practice and hospitals (TC/PC model)

Industry-Leading Assay Performance

Controlled Validation Concordance (standard criteria) – 99.3%

CTC Biomarkers + ctDNA Analytical Validation	CTC Biomarkers + ctDNA Analytical Combined
Data Size (N)	4641
Accuracy	4610/4641 (99.3%)
Sensitivity	99.2%
Specificity	99.6%

Concordance to Tissue (real-world experience) - 87%

CTC Biomarkers + ctDNA Clinical Validation	CTC Biomarkers + ctDNA Clinical Combined
Data Size (N)	407
Accuracy	354/407 (87%)
Sensitivity	74%
Specificity	94.6%



Partners in Establishing Clinical Utility

- Collaborations with major cancer centers
- Participating in medical meetings and symposia
- **Engaging KOL Advisors**
- Building relationships with patient advocacy groups
- Expanding strategic partnerships with pharma and biotech for personalized diagnostics

























Comprehensive Cancer Center designated by the National Cancer Institute

















Biocept Publications, Posters, and Abstracts

36 Scientific/Clinical Presentations

- 6 Peer-Reviewed Journal Publications
- 23 Poster Presentations at Leading Scientific/Clinical Meetings
- 1 Technology Description
- 6 Abstracts: Scientific/Clinical Meetings





















Landmark Clinical Trial for Liquid Biopsy

The Addario Lung Cancer Medical Institute (ALCMI) is an international research consortium driving clinical research via a world-class team of investigators from 25 member institutions in the U.S. UK, and Europe. It is supported by a dedicated centralized research infrastructure including standardized biorepositories and data systems.



- 400 Lung Cancer Patients
- 25 Treatment Sites (U.S. and International)
- 1 Year Study Duration Evaluating Clinical Utility of Biocept Liquid Biopsy Testing
- Up to 2,400 Liquid Biopsy Data Points
- Key Endpoints:
 - Demonstrate Concordance vs. Tissue
 - Evaluate Response To Drug Therapy
 - Identify Resistance Mechanisms
 - Predict Treatment Failure Early



"AND" Campaign debut at ASCO 2017



Target Selector™ Liquid Biopsy

Increasing Targeted Therapies via Liquid Biopsy

When treating cancer patients, it's no longer an either/or world.

At Biocept, we're all about the

AND.

It's time to consider molecular information from both tissue **AND** blood.

Biocept is the industry's first to offer cancer biomarker testing using both ctDNA **AND** CTCs.

Focused on approved NCCN biomarkers, Biocept's tests include targeted therapy **AND** immunotherapy markers.

Visit Booth #25160 to learn about Biocept's Liquid Biopsy Technology. www.biocept.com



Market Development



16 Direct Sales Reps Today On Track With Goal of 15-20 by Year-End 2017



Customer Focus

- Target select cancer center regions
- Focus on community oncologists (80% of cancer care)
- Partner with integrated delivery networks and local pathologists

Commercial team

- Experienced leadership
- Regionally based team with significant oncology sales experience
- Managed care expertise

Commercial Progress









- Executing on strategy to contract with major cancer treatment institutions, GPOs, and distributors
- Increasing patient access
- Accelerating adoption of liquid biopsy
- Leveraging sales and marketing resources by increasing awareness of Biocept's liquid biopsy platform within large health systems
- Roll out new tests and service offerings including molecular pathology partnering model (ie "TC-PC")



Health Plan Access Continues to Expand



















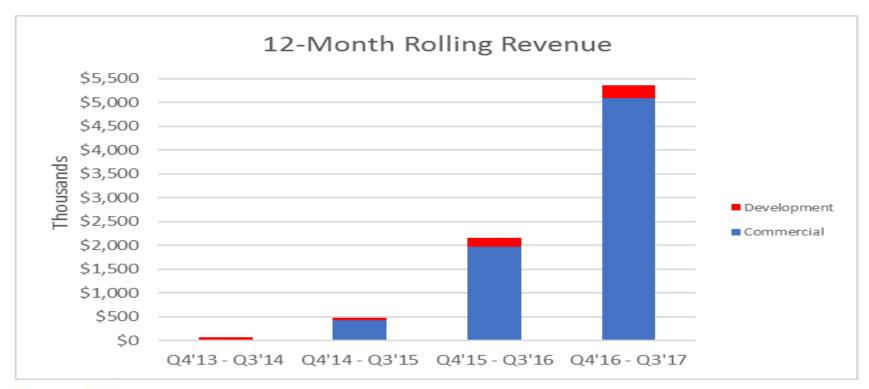


- Managed Care agreements in place covering >190 million lives
- Dedicated managed care leadership with years of experience from GE, LabCorp and Quest
- Payors have positive coverage for biomarkers listed in guidelines
- Aligns with goals of healthcare reform
- Improved outcomes while reducing costs
- Utilize established CPT codes



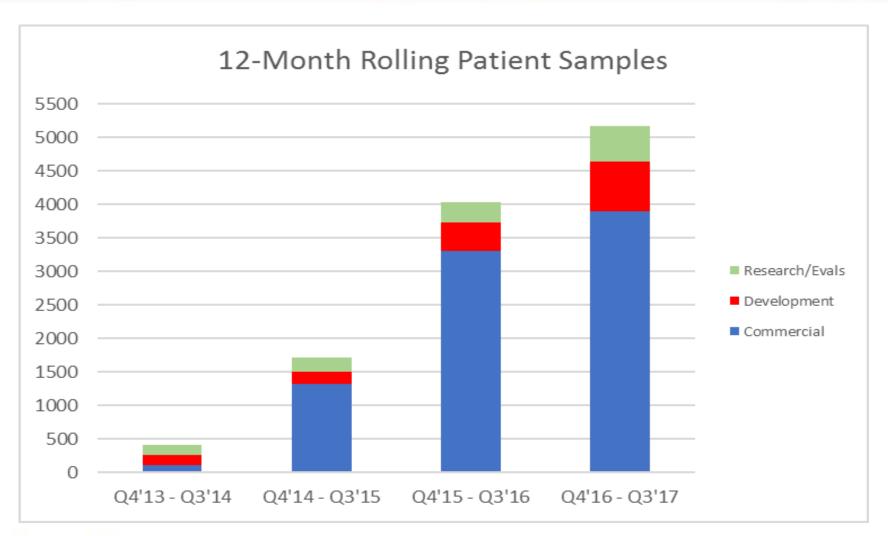
Favorable Collections Support Revenue Growth

- Invoice approved CPT codes for ctDNA and CTC detection, as well as biomarker staining
- Moved from cash accounting to accrual accounting in 1Q 2017
- Payments received from Medicare, UHC, Aetna, and BCBS
- Average of \$1,100 per claim based on payments from third parties
- Clinical study planned to gain additional reimbursement for proprietary CTC microchannel capture



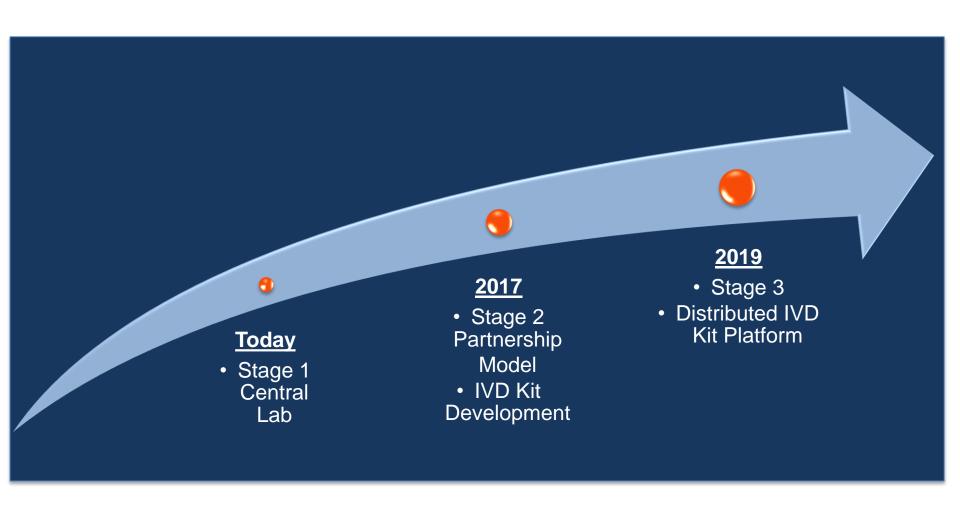


Growing Volume & Establishing Market Share





Long-Term Growth Strategy





Achievements since going public

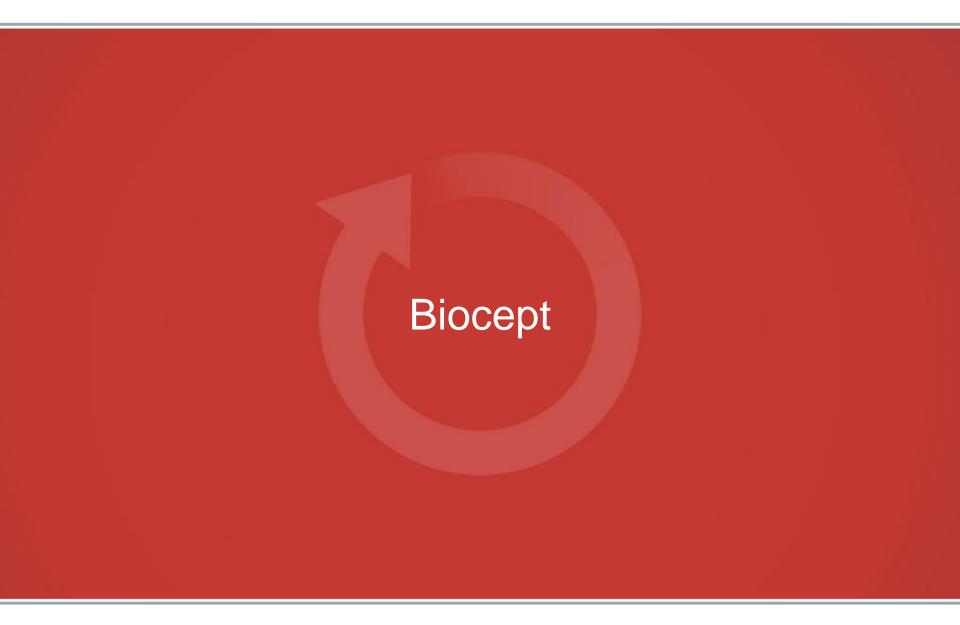
- Revenue to \$4.1M in the First 9 Months of 2017 -vs- \$0 at IPO
- ✓ In-house billing and collections –vs- outsourced at IPO
- 20 Issued Patents -vs- 1 at IPO
- 15 validated assays -vs- 1 at IPO
- 20 members on commercial team -vs- none at IPO
- Multiple healthplan agreements signed including BCBS plans covering over 200M lives -vs- none at IPO
- 4 Pharma agreements -vs- none at IPO
- Nearly 30 Ongoing Clinical Studies & Numerous Published Papers and Presentations at Medical and Scientific Conferences -vs- less than 6 studies at IPO
- Multitudes of patients helped -vs- minimal at IPO



Anticipated Milestones

- Growth in YoY Test Volume & Revenue
- Health Plan Agreements to Further Solidify Reimbursement
- Greater Operational Cash Flow Reducing Cash Burn/Need
- Implement Pathology Partnerships
- Enter Into Contracts with Healthcare systems
- Expand Intellectual Property Position Globally
- Execute on Strategic Options: U.S. and International
- Present & Publish Clinical Study Results
- Launch Additional Oncology Marker Assays
- Continued progress toward stand-alone breakeven





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