Q2 2023 Earnings Call Presentation

Disclosed August 2, 2023

Intercept

Cautionary Note Regarding Forward-Looking Statements ("FLS")

This document contains FLS, including regarding: our finances, financial guidance, and financial results, including expectations regarding sales, expenses, cash position, and balance sheet position; corporate strategy and priorities; corporate financial performance and profitability; timing of profitability; growth in product sales; our operational performance; timing and results of our R&D, clinical trials, and new product initiatives; drug efficacy, safety, and tolerability; trends in prescriber and patient behavior and adoption of our products; our plans regarding product development and launch; timing, substance, and results of interactions with regulators, including meetings and regulatory submissions and the review and prospects for approval thereof; and our intellectual property rights and patent portfolio.

Important factors could cause actual results to differ materially from the FLS, including: we may be less effective than expected in executing on our strategic priorities and implementing strategic changes; restructuring and clinical trial wind-down may be slower and have greater costs than expected; we may fail to achieve profitability due to lower revenues or higher expenses than expected; our future financial needs and results may be different from our current estimates; we may not be able to increase sales as expected; regulatory interactions could take longer than expected; our regulatory submissions could not receive FDA approval in a timely manner or at all; the FDA could require us to provide additional information that is not timely or economical to provide; there could be efficacy, safety, or tolerability concerns about our products or product candidates; our products and product candidates could have less commercial potential than anticipated or could be superseded by competing products; if approved, we could be less effective than anticipated in launching sales of new products; we may not be able to obtain or maintain regulatory approvals; we may not be able to satisfy post-marketing requirements, including using real-world evidence; the initiation, timing, cost, conduct, progress, and results of our R&D activities, preclinical studies, and clinical trials, including regarding safety and efficacy; adverse medical, clinical, efficacy, quality, safety, or pharmacovigilance events or results from clinical trials; the safety and efficacy of, or potential side effects associated with, our products and product candidates; the timing and outcomes of interactions with regulators regarding clinical trials, safety, and efficacy, products and product candidates, and regulatory approvals; marketing conditions, limitations, or warnings required by regulators; the degree of market acceptance of our products among physicians, patients, and healthcare payors; our ability to execute on the drivers of product sales growth (including estimated market size, market penetration, patient satisfaction, refill rates, and sales prices); the success of our competitors and our failure to outperform or outcompete them; competition from new or existing drugs; our ability to manage expenses; our ability to manage successfully our commercial and operational performance and legal, operational, and other risks; our ability to attract and retain key personnel; our estimates of future financial needs and results; our ability to obtain and maintain intellectual property protection for our products and product candidates, including our ability to cost-effectively file, prosecute, defend and enforce any patent claims or other intellectual property rights; and other factors discussed in the FLS and Risk Factors sections of our Form 10-Q and Form 10-K filings, and in our Form 8-K reporting our quarterly earnings.

Strengthening Our Focus in Rare and Serious Liver Diseases

Maximize performance of Ocaliva in PBC

FY 2023 net sales guidance of $320M to $340M

Real-world evidence demonstrates improvements in death or liver transplant

On track for 2023 regulatory submission to support post-marketing requirements

Realize best-in-class potential of OCA-bezafibrate combination

Potential to redefine efficacy in treatment of PBC

Completed enrollment of both ongoing Phase 2 studies

Necessary data expected in 2023 to request End-of-Phase 2 meeting with FDA

Progress next-generation FXR agonist INT-787

Ph1 study demonstrated favorable safety and tolerability

Ph2a study ongoing in severe alcohol-associated hepatitis

MOA holds potential in other areas of high unmet need

Build on strong financial position to achieve profitability

Strengthen focus and reduce OpEx by ~$140M**

Focus on cash generation to meet strategic objectives

Maintain expense discipline as we transition toward profitability

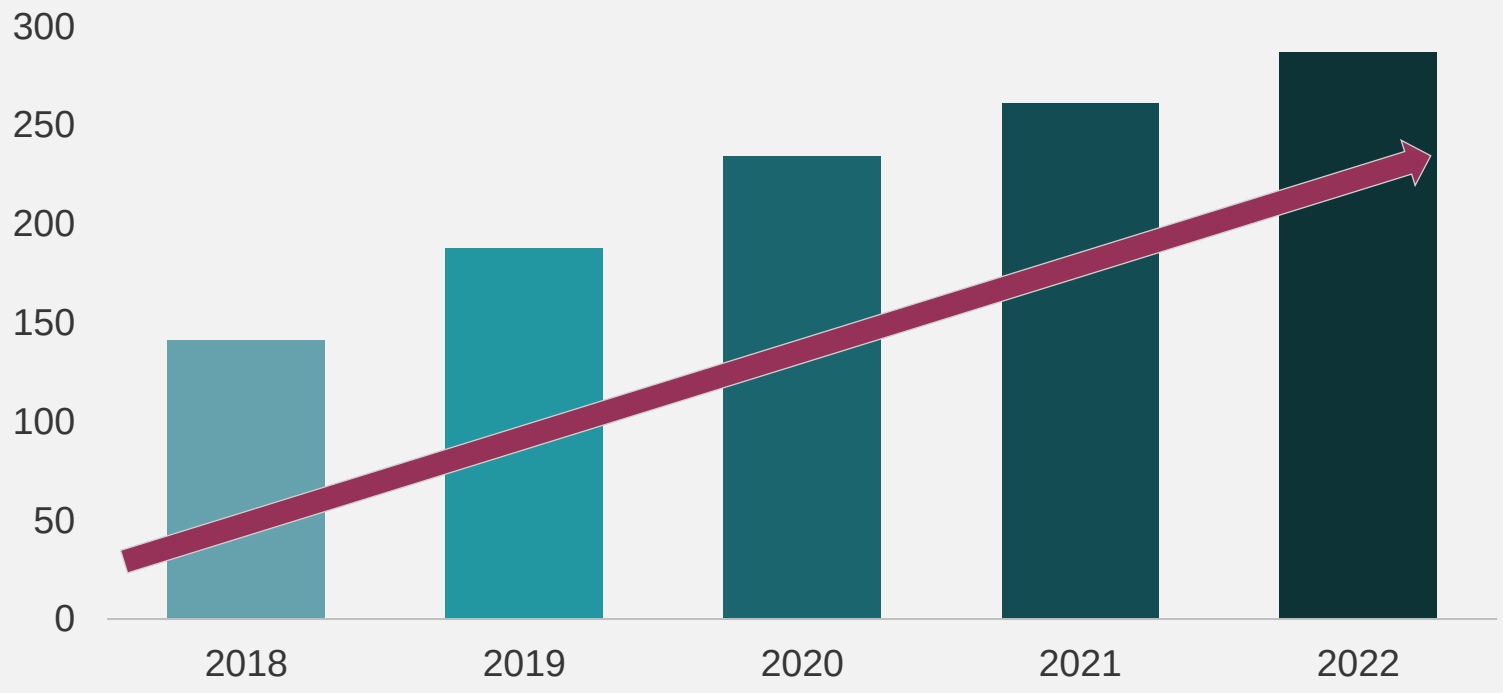
Abbreviations: FDC, fixed dose combination, FXR, farnesoid X receptor
** Relative to updated 2023 non-GAAP adjusted operating expense guidance of $350M to $370M

Key Business Updates

- U.S. Ocaliva® net sales of $83.7 million for the second quarter 2023; 17% growth over the prior year quarter
- Updated full-year 2023 Ocaliva net sales guidance of $320-$340 million, 12-19% projected growth vs. 2022; 2023 non-GAAP adjusted operating expense guidance of $350-$370 million
- Restructuring plan on track to reduce operating expenses by approximately $140 million; Company expects to achieve meaningful profitability in 2024
- OCA-bezafibrate combination program completed enrollment of both ongoing Phase 2 studies; expected to have necessary data in 2023 to request End-of-Phase 2 meeting with FDA
- Phase 2a FRESH study progressing to evaluate INT-787 in patients with severe alcohol-associated hepatitis (sAH)
- Cash, cash equivalents, restricted cash, and investment debt securities available for sale of $415 million as of June 30, 2023

Ocaliva Continues to Show Double-Digit Year-over-Year Growth

Ocaliva 5-Year Net Sales ($USD millions)



Ocaliva has been sold commercially since 2016

Reported Ocaliva net sales of
$83.7 million in Q2 2023

17% growth
vs. prior year quarter

4th consecutive quarter
of double-digit sales growth

Full-year 2023 Ocaliva net sales guidance of
$320M to $340M

12-19% projected growth vs. 2022

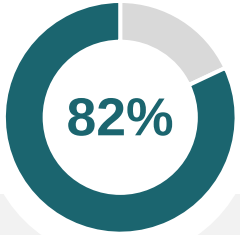
Ocaliva Business Driven by Strong Persistency and High Patient Satisfaction

Strong base business driven by persistency

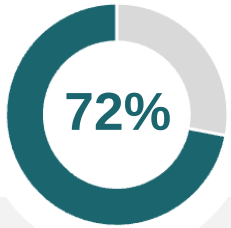
of business driven by existing patients[1]

Refill rate in 2Q23[1]

Persistency on Ocaliva superior to the average of multiple chronic disease[2]

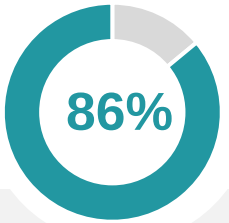


Persistency rate at **3 months**

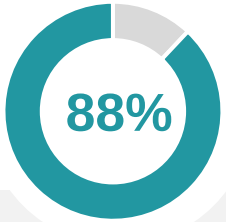


Persistency rate at **6 months**

Satisfaction remains high among Ocaliva patients



of current patients are satisfied to extremely satisfied with their Ocaliva treatment experience[3]



report a strong intent to remain on therapy[3]

1. Data on file, April 2023. **2.** Data on file, April 2023. **3.** Data on file: Hawk Partners, May 2023 Patient ATU Study.

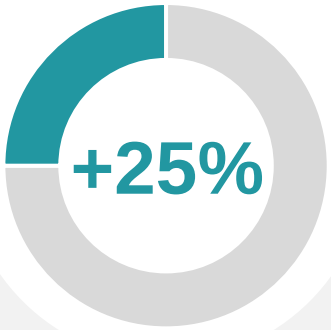
Ocaliva Continues to Expand as Second-Line Therapy for PBC

Continued expansion of new prescribers

5 out of 10

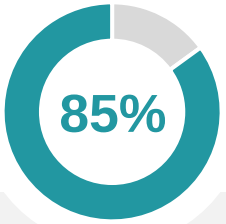
prescribers of new patients in 2Q23 were first-time Ocaliva writers[1]

All time high in unit demand during 2Q 2023

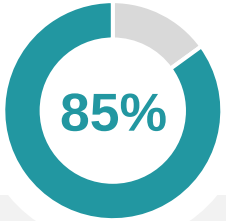


new-to-brand prescriptions growth[2]

Clinical outcomes are a top PBC treatment priority



of heps/GIs rate avoiding negative liver outcomes for PBC patients as most important treatment attribute[3]



of PBC patients consider preventing a future liver transplant as a top priority[4]

1. Data on file, April 2023. **2.** IQVIA National Prescription Audit, accessed July 2023. **3.** Data on file: Hawk Partners, May 2023 HCP ATU Study. **4.** Data on file, Hawk Partners, May 2023 Patient ATU Study.

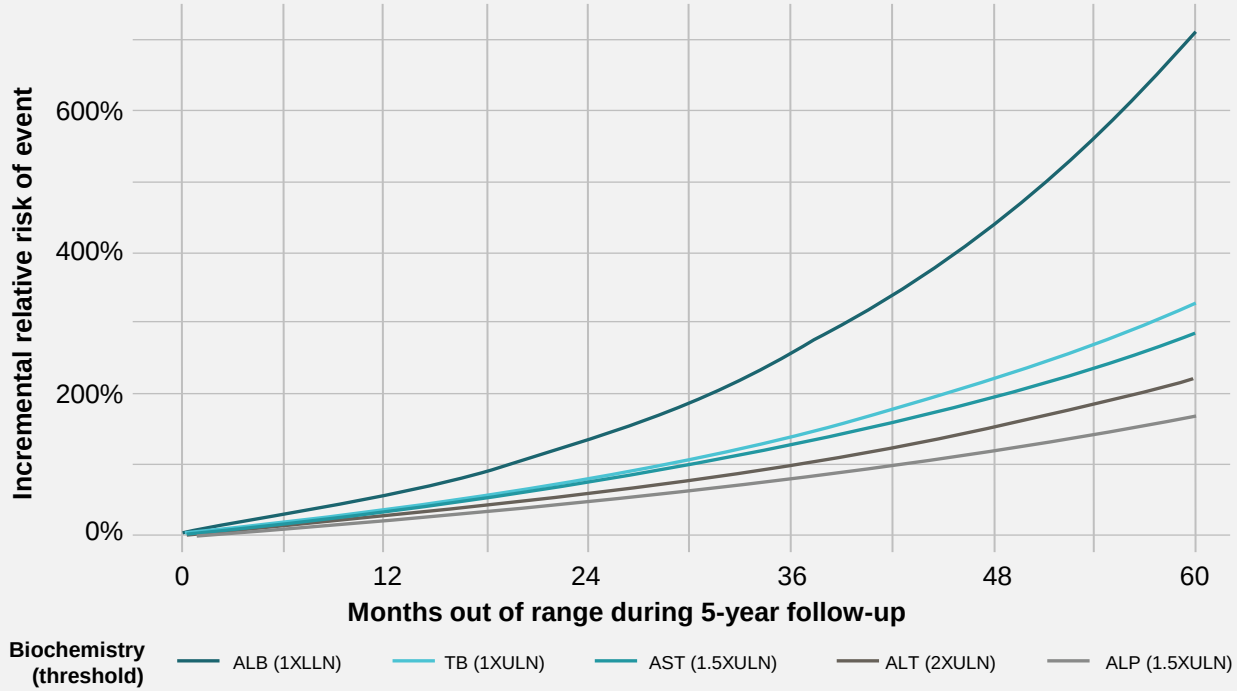
Range of Biochemical Markers Beyond ALP are Associated with Disease Progression and Negative Clinical Outcomes in PBC

ALP and bilirubin have long been recognized as surrogates for clinical outcomes[1]

Further studies have shown that GGT, in addition to ALP and bilirubin is also associated with negative clinical outcomes[2, 3]

Elevations in AST and ALT are associated with increased risk of hepatic decompensation, liver transplant or death in PBC[4]

Incremental relative risk of hepatic decompensation, liver transplant, or death as a function of proportion of time over liver biochemistry thresholds, 5-year follow-up example[4]

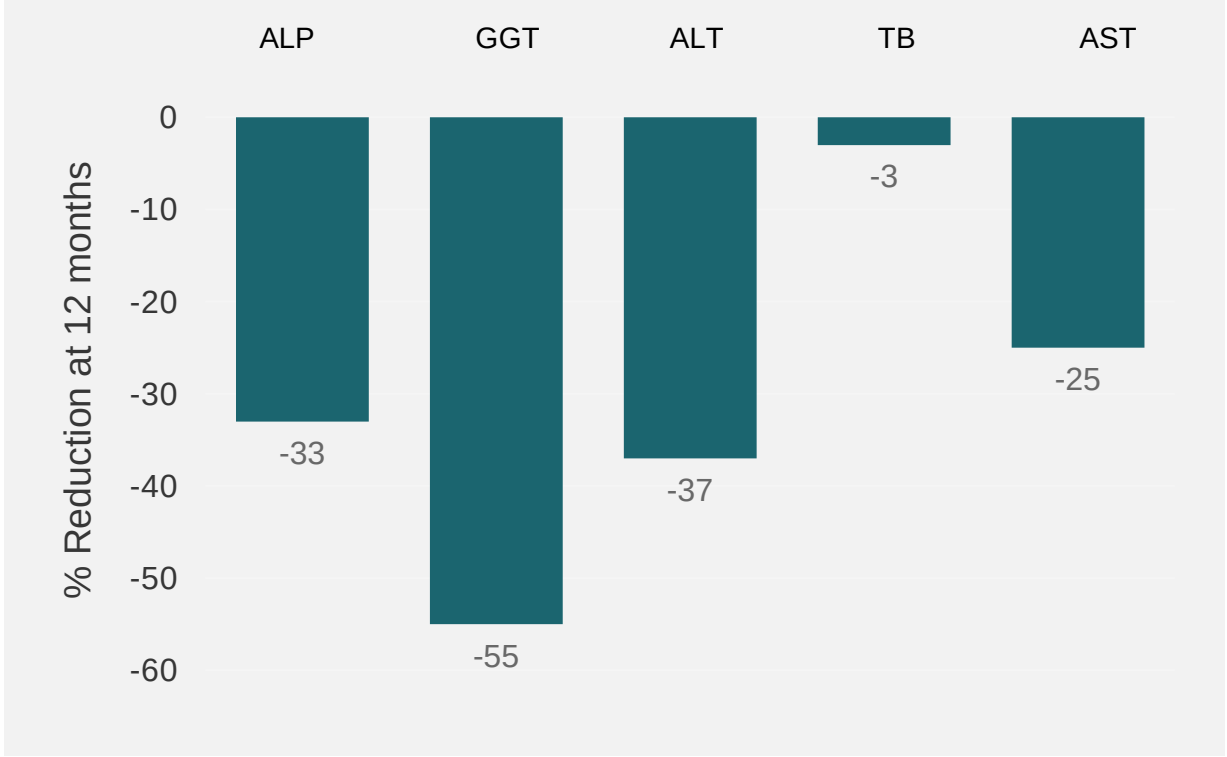


Data derived from 2,379 PBC patients from the Optum Clinformatics US administrative healthcare claims database with linked laboratory and death data for July 1, 2007 and March 31, 2021.

1. Lammers et al. "Levels of ALP and bilirubin are surrogate endpoints of outcomes of patients with PBC" *Gastroenterology* 2014; 147 (6) 1338-49. **2.** Murillo Perez et al. Goals of treatment for improved survival in PBC. *Am J Gastroenterol* 2020 115(7) 1066-1074. **3.** Gerussi et al. "Measurement of GGT to determine the risk of liver transplantation or death in patients with PBC". *Clin Gastroenterol Hepatol* 2021 19(8): 1688-1697. **4.** Ritter et al, Proportion of time and degree to which liver biochemistries are out-of-range predicts time to first occurrence of negative hepatic outcomes in people with primary biliary cholangitis. Poster, EASL Congress 2022.

Ocaliva Has Been Shown to Reduce a Range of Biochemical Markers Associated with Clinical Outcomes in PBC[1] (e.g., Risk of Death or Liver Transplant)

Impact of Ocaliva on Key Serum Biomarkers[1,*]



- Multiple real-world studies have shown that patients with PBC had greater transplant-free survival when treated with OCA[2,3]
- Ocaliva's demonstrated reduction of multiple biomarkers and real-world evidence data on transplant-free survival reinforces scientific evidence that several markers—beyond ALP—must be evaluated in patients with PBC

*% reductions based on the mean baseline and mean 12 month data for each biochemical marker, based on data published in the POISE manuscript

1. Nevens et al 2016. "A Placebo-Controlled Trial of Obeticholic Acid in Primary Biliary Cholangitis" *N Engl J Med*.; 375(7):631-43. **2.** Murillo Perez et al "Greater Transplant-Free Survival in Patients Receiving Obeticholic Acid for Primary Biliary Cholangitis in a Clinical Trial Setting Compared to Real-World External Controls" *Gastroenterology* 2022 163 (6) 1630-1642. **3.** Brookhart AASLD 2022. Results of the HEROES study: Treatment efficacy of Obeticholic Acid on Hepatic Real-World Outcomes in Patients with Primary Biliary Cholangitis"

OCA-Bezafibrate Investigational Combination Offers Potential to Establish Best-in-Class Clinical Benefits

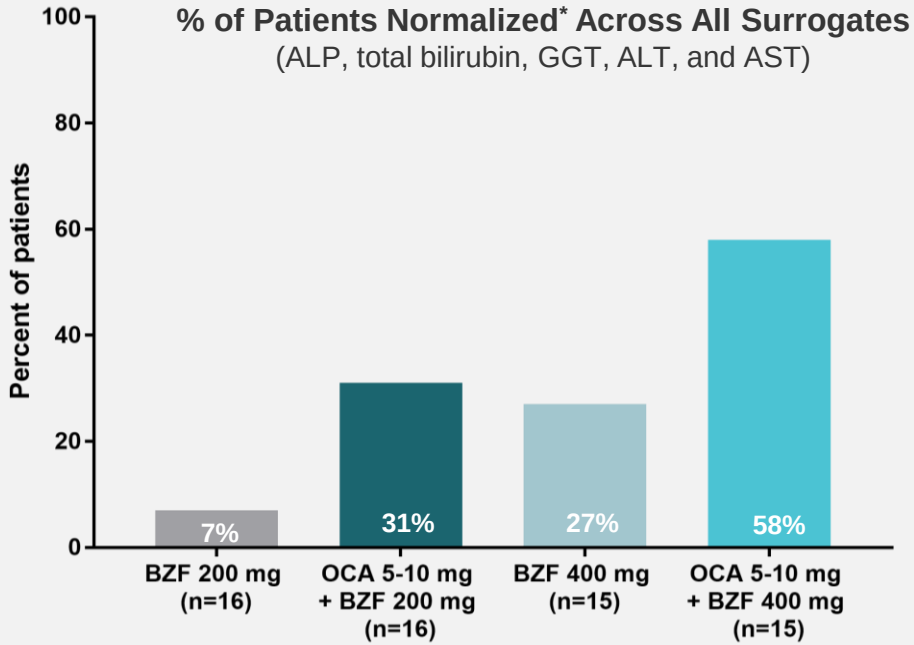
Distinct FXR and PPAR pathways may offer synergistic MOAs to normalize range of biomarkers associated with PBC outcomes (e.g., transplant-free survival)[1]

Two ongoing Ph2 studies exploring range of doses, with planned interim analyses (IA) from both studies expected by end of 2023

Expected to have necessary data in 2023 to request End-of-Phase 2 meeting with FDA

IP runway through 2036, with potential extension based on clinical and regulatory timelines

First Ph2 IA presented at EASL Congress 2023[2]



- Biochemical remission* of cholestasis induced in 58% of subjects taking OCA 5-10 mg + BZF 400 mg
- Significant reductions across range of biomarkers
- Well tolerated with low rates of adverse events

*Defined as ALP, GTT, ALT and AST all ≤ULN and total bilirubin ≤0.6 xULN

Abbreviations: FXR, farnesoid X receptor; PPAR, pan-peroxisome proliferator-activated receptor; MOA, mechanism of action; PBC, primary biliary cholangitis; Ph, phase; OCA, obeticholic acid; BZF, bezafibrate; IA, interim analysis; ALP, alkaline phosphatase; GGT, gamma-glutamyl transferase; ALT, alanine transaminase; AST, aspartate aminotransferase; ULN, upper limit of normal

1. Soret, et al. Ailment Pharmacology & Therapeutics. 2021;00:1-9. **2.** Nevens et al. Results from a Planned Interim Analysis of a Randomized, Double-Blind, Active-Controlled Trial Evaluating the Effects of Obeticholic Acid and Bezafibrate on Serum Biomarkers in Primary Biliary Cholangitis. EASL Congress 2023. Abstract #2495 published 7 June 2023.

Advancing INT-787 in Severe Alcohol-Associated Hepatitis

Alcohol-related liver disease as a cause of chronic liver disease is currently the leading indication for liver transplant (U.S.)[1]

INT-787 is a next-generation farnesoid X receptor (FXR) agonist

- 16-fold more water soluble than OCA[2]
- Modulates greater number of genes relative to OCA within the liver and intestine in preclinical liver disease models
- Characteristics provide opportunity to explore potential in diseases involving gut as well as liver

Phase 1 Program

Complete as of April 2023; demonstrated favorable safety and tolerability profile

Phase 2 Program

Progressing FRESH study, evaluating the safety, tolerability, efficacy and pharmacokinetics

1. Wong RJ, Singal AK. Trends in liver disease etiology among adults awaiting liver transplantation in the United States, 2014-2019. JAMA Network Open. 2020;3(2): e1920294. **2.** Pellicciari R, et all. "Discovery of 3α,7α,11β-Trihydroxy-6α-ethyl-5β-cholan-24-oic Acid (TC-100), a Novel Bile Acid as Potent and Highly Selective FXR Agonist for Enterohepatic Disorders". *Journal of Medicinal Chemistry*, vol. 59, issue 19, 2016. pp. 9201-9214.

Taking Decisive Action to Strengthen Focus on Rare and Serious Liver Diseases and Significantly Reduce Operating Expenses

Actions Underway

Progress on close-out of REGENERATE study
Company anticipates substantially completing shut-down by EOY 2023

Discontinue NASH-related investment
Company has stopped all NASH-related spending within R&D, commercial, medical affairs, and administrative functions

Reduce workforce across two waves*
Materially finished by EOY 2023

Expected Financial Impacts

- On track to **achieve meaningful profitability in 2024**
- Expected to achieve **net reduction in annual non-GAAP adjusted operating expenses of ~$140M,** relative to updated 2023 non-GAAP adjusted operating expense guidance
- In June 2023, non-GAAP adjusted **operating expense guidance was lowered to $350M to $370M**
- **Updated** full-year 2023 **Ocaliva net sales guidance of $320M to $340M**, as compared to 2022 Ocaliva U.S. net sales of $285.7M

* Company plans to maintain scale of its current field sales organization to support the growth potential of Ocaliva.

Q2 2023 Financial Highlights

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Total revenue	$83.7M	$71.8M	$151.7M	$130.9M
GAAP operating expenses	$90.8M	$85.1M	$190.4M	$171.0M
Non-GAAP adjusted operating expenses (1)	$84.5M	$79.6M	$178.1M	$181.6M
Cost of sales	$0.2M	$0.3M	$0.4M	$0.5M
SG&A Expenses	$53.3M	$40.0M	$111.0M	$77.7M
R&D Expenses	$37.3M	$44.8M	$79.0M	$92.7M

(1) Refer to the following slides for a reconciliation of non-GAAP adjusted operating expenses to total operating expenses

	6/30/23	12/31/22
Cash, cash equivalents, restricted cash & investment debt securities available for sale	$415.0M	$490.9M
Total current and long-term debt (2)	$333.4M	$332.7M

(2) Total outstanding principal debt is $336.3M; $109.8M of notes paid July 3, 2023; Remainder of notes due 2026

Leading Specialty Biopharma in Rare and Serious Liver Diseases

Strong Leadership Position

Pioneer in clinical development and commercialization of the first and only second-line treatment for PBC

Established & Growing Brand

Ocaliva double-digit, year-over-year growth supported by experienced specialty sales force and strong prescriber base

Potential Best-in-Class Combo

Pipeline anchored by novel OCA-Beza combination with potential to establish new treatment paradigm in PBC

Profitability by 2024

Focused operations with growing topline revenues to generate meaningful profitability

Solid Capital Structure

Strong balance sheet; net cash positive by ~$80 million*

Long IP Runways

Market exclusivity for Ocaliva through late 2031 and for FDC through 2036 (with potential PTE based on clinical and regulatory timelines)

* As of June 30, 2023, Intercept had cash, cash equivalents, restricted cash, and investment debt securities available for sale of $415.0 million.

Note Regarding Non-GAAP Financial Measures

This presentation refers to non-GAAP adjusted operating expenses on a historical and projected basis.

For the periods presented, non-GAAP adjusted operating expenses exclude from total operating expenses, as calculated and presented in accordance with GAAP, the effects of two non-cash items: stock-based compensation and depreciation.

This is a non-GAAP financial measure and is not necessarily consistently defined across companies. Investors should consider it in addition to, but not instead of, the GAAP measure. Our management uses this measure for budgeting, operational goals, and managerial purposes. We believe that presentation of this non-GAAP measure is helpful supplemental information for investors and management regarding operating performance and trends.

For a reconciliation table, please refer to the next slide. For non-GAAP adjusted operating expenses, regarding future, projected periods, a quantitative reconciliation would not be available without unreasonable effort, due to the difficulty of predicting with reasonable certainty future amounts of stock-based compensation expense.

Reconciliation of Non-GAAP Adjusted Operating Expenses to Total Operating Expenses

Reconciliation of Non-GAAP Adjusted Operating Expenses to Total Operating Expenses
(Unaudited)
(In thousands)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2023	2022	2023	2022
Total operating expenses	$ 90,837	$ 85,120	$ 190,427	$ 170,990
Adjustments:				
Stock-based compensation	6,262	5,489	12,126	10,870
Depreciation	90	70	179	411
Non-GAAP adjusted operating expenses	$ 84,485	$ 79,561	$ 178,122	$ 181,583