

# BETTER REWARDS

Benefits for a better you

# BENEFITS eCATALOG

Plan Year July 1, 2025 - June 30, 2026













# **Welcome to Your Benefits Experience**

At Hologic, we take pride in providing benefits that cater to the holistic needs of our employees. Whether you're just starting out or well into your life's journey, our progressive benefits are designed to empower you to thrive. Through our Better Rewards program, we affirm our commitment to your wellbeing, fostering a supportive environment that encourages a balanced and fulfilling life.





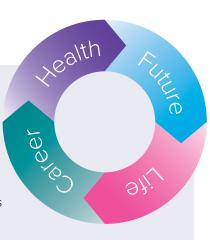
In our commitment to your overall wellbeing, we are pleased to provide a comprehensive benefits program, inclusive of rewards and opportunities aimed at fostering your personal and professional growth.

The Better Rewards program invites you to:

- Be at your best with Hologic's **health** plans and holistic support resources
- Plan for a sure **future** with savings plans and financial security benefits
- Feed your mind, body and spirit with time away from work, healthy living and a healthy work-life balance
- Realize your potential and take advantage of opportunities for **career** growth

#### **Disclaimer**

This eCatalog is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of the Hologic benefits program and does not constitute a contract. Consult your plan documents (Summary Plan Descriptions and Group Insurance Certificates) for a complete description of all governing contractual provisions, including benefits, exclusions, limitations and procedures relating to your plans. All of the terms and conditions of the plans are subject to applicable laws, regulations and policies. In case of a conflict between your plan documents and the information contained in this eCatalog, the plan documents will always govern.





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### **Make Smart Choices and Enroll**

- This eCatalog provides an overview of Hologic benefits for July 1, 2025 –
   June 30, 2026 to help you learn about the many available benefit options.
- Be sure to visit the Better Rewards Benefits page on MyHologic for in-depth information to help you make informed decisions.
- Contact the Benefits Service Center with questions at 844.319.3420,
   Monday through Friday 8 a.m. to 8 a.m. ET.
- Visit Benefits Self Service at HologicBenefits.com to enroll or make changes to your benefits within 31 days of a qualifying life event or during Open Enrollment.

# BENEFITS SELF SERVICE IS ACCESSIBLE FROM ANYWHERE, AT ANY TIME

If you haven't already registered, set up an account at **HologicBenefits.com** with your:

- Social Security number
- Date of birth
- Company key of "hologic" (all lower case)





#### **CLICK IT!**

Click the colored and bold text in the eCatalog for detailed information on specific benefits.



#### **Enroll or Make Changes in Just 3 Easy Steps**

1 2 3
PLAN CHOOSE ENROLL

Learn about your options and consider what would best meet your coverage needs and budget.

Consider other sources of coverage (such as through your spouse's or domestic partner's employer).

Compare your healthcare options to see what's best for you and your family.

Explore the tax savings offered by the Flexible Spending Accounts (FSAs) and Health Savings Account (HSA). Gather Social Security

Savings Account (HSA).
Gather Social Security numbers and dependent verification documents before you enroll (see page 5).

Select your benefits

using Hologic's online **Benefits Self Service**within 31 days of a
qualifying life event or
during Open Enrollment.

Print a Benefits Summary for your records.

# Who's Eligible?

#### **Employees**

Benefits eligibility depends on your work status as follows.

If you are...

- A regular full- or part-time employee scheduled to work at least 30 hours per week, you are eligible for all benefits summarized in this eCatalog.
- An intern working 30 hours or more per week, you are eligible to
  participate in the medical plan after a 90-day waiting period. You are
  immediately eligible for a prorated allotment of sick time and may join
  the 401(k) plan upon attainment of 1,000 hours worked and age 21.
- Scheduled to work between 20 and 30 hours per week, you are eligible for prorated vacation and sick time, the Employee Assistance Program and Employee Stock Purchase Plan.

**All employees** are eligible to enroll in the 401(k) plan with the exception of interns who are eligible after 1,000 work hours and attaining age 21.





#### For Newly Eligible Employees

If you want to enroll in benefits, you must make your elections within 31 days of your eligibility date. There is no waiting period for benefit coverage. If you do not enroll for coverage when you are first eligible, you will have to wait until the next Open Enrollment period or within 31 days of a qualifying life event to enroll.

Upon hire, you're instantly eligible and enrolled in various no-cost, Company-paid benefits detailed in this guide.

#### **Eligibility Effective and Termination Date**

Benefits start on your first day of work or upon a qualifying life event election.

Benefits end on your employment separation date (not the last day of the month), when you drop coverage due to a qualifying life event or if your working hours fall below the required threshold described above.

# Who's Eligible?, continued

#### **Your Dependents**

You may enroll eligible dependents for medical, dental, vision, optional life, accident insurance, critical illness and hospital indemnity coverages. Eligible dependents include your:

- Legal spouse or domestic partner
- Child(ren)\* up to the end of the month in which they turn 26
  - Natural, adopted, stepchild(ren), legal guardianship, child(ren) placed with you for adoption, child(ren) of your domestic partner, child(ren) of a covered dependent child

Your family members may also be eligible for additional benefits that you do not need to enroll in, including chronic disease prevention and lifestyle management, mental health benefits, employee assistance program and more.

\* For purposes of life insurance, stepchildren, foster children, children of your dependent child and children of your domestic partner who are not dependent on you for support are not eligible for child coverage.

#### **VERIFY YOUR DEPENDENTS' ELIGIBILITY**

Before starting, ensure you have proof of relationship documents for dependents and their Social Security numbers. Coverage won't start without submitting required documents like birth/marriage certificates or tax returns. Follow the provided instructions during enrollment.

For eligibility details and plan specifics, visit the **Eligibility for Health** and **Benefits Plans** page. Written plan documents are the definitive authority for program provisions.

#### **Enrollment Basics**

#### **Open Enrollment**

You may enroll in or change your benefit elections every spring during Open Enrollment. These changes will have an effective date of July 1. You will not be able to make any changes to this coverage until the next Open Enrollment period unless you have a qualifying life event.

### **Qualifying Life Event**

You have the opportunity to make benefit changes within 31 days of a qualifying life event. However, you can make changes to your Health Savings Account (HSA) contributions (if enrolled in the Consumer Driven Health Plan (CDHP)), 401(k) elections or optional life insurance coverage at any time.

Find more information about qualifying life events here.



# **Manage Your Benefits**

#### **Using Hologic's Benefits Self Service System**

- LOG ON to HologicBenefits.com.
  - Accessible from anywhere, at any time.
  - Register for an account with your Social Security number, date of birth and the Company key of "hologic" (all lower case).
- ENROLL or make changes to your benefits.
- DESIGNATE a beneficiary as required for basic and optional life insurance, accident insurance and critical illness insurance.
- **PRINT** a Benefit Summary.
- SUBMIT required documents (for example, to prove a qualifying life event).
- **REVIEW** important messages.
- LIVE CHAT online for technical support, enrollment guidance, etc.



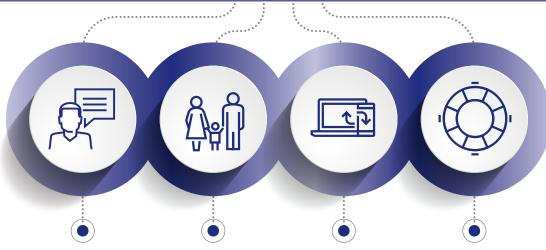
#### **MYCHOICE MOBILE APP**

The MyChoice mobile app provides 24/7 access to benefits information right from your mobile device...enroll or update your elections, upload and save pictures of your ID cards, update your beneficiaries, find benefit information and more! Download the MyChoice app from the **App Store** or **Google Play**.

You'll need to login to **HologicBenefits.com** and click on **"Access the App"** to obtain your personalized QR code to scan and complete your registration.

You can also easily find the app on your Hologicassigned smartphone or tablet home screen.

#### **Benefits Service Center**



# Enrollment guidance

- How to enroll
- How to make qualified changes
- How to access resources

# Eligibility advisement

- Information on qualifying events
- Dependent verification and documentation assistance

#### Technical/ navigational support

- Website assistance
- Help downloading benefit confirmations and resources
- Help uploading dependent verification documentation

#### **Advocacy**

- Guidance to help you understand your plans
- Assistance in resolving eligibility and coverage issues
- Help with ID cards

#### **QUESTIONS?**

#### **Contact the Benefits Service Center:**

**Telephone 844.319.3420** / Monday through Friday 8 a.m. to 8 p.m. ET

Live chat HologicBenefits.com / Monday through Friday 8:30 a.m. to 7:30 p.m. ET

#### 3 Ways to Receive Important Alerts!

- Opt in to texting for benefits information on the MyChoice app or through Benefits Self Service at HologicBenefits.com (under your profile).
- Check your Message Center on your home page.
- Watch for email notifications from Messenger@HologicBenefitSelfService.com.



# **Your Benefits At-a-Glance**

## Health...Future...Life...Career...Benefits at Your Fingertips

Benefit Plan	Coverage Highlights	Cost	
HEALTH			
Medical Blue Cross Blue Shield of MA (BCBSMA)	<ul> <li>Consumer Driven Health Plan (CDHP) with Health Savings Account (HSA)</li> <li>PPO</li> <li>PPO Plus</li> </ul>	You and Hologic share the cost Your premiums are pre-tax	
Telehealth and Virtual Primary Care Visits BCBSMA	On-demand, video access to board-certified physicians and behavioral health therapists from your mobile device or computer anywhere, 24/7	Included with medical plan premium  No cost share for medically necessary visits (subject to deductible when enrolled in the CDHP with HSA)	
Prescription Drug Plan CVS Caremark	Coverage for generic, preferred brand name, non-preferred brand name and specialty medications purchased through retail pharmacies or mail order for maintenance medications	Included with medical plan premium	
Fertility and Family Building Benefits Progyny	Customize your treatment journey with evidence-based care decisions and have equitable access to the tools needed to achieve your goal of growing your family	BCBS member cost share applies	
Peri/Menopause Support Progyny	Hot flashes, mood swings and more – tackle peri/menopause and midlife care head on with dedicated resources	BCBS member cost share applies	
<b>Dental</b> Delta Dental of MA	Core plan Enhanced plan with orthodontia	You and Hologic share the cost Your premiums are pre-tax	
<b>Vision</b> EyeMed	Coverage for no-cost routine annual exams, as well as frames, lenses and contact lenses	You pay the cost Your premiums are pre-tax	
Virtual Physical Therapy and Pelvic Health Support Sword Health	Comprehensive virtual care for back, joint and muscle pain, as well as female pelvic health support	Hologic pays the full cost  Must be a BCBS member	

Benefit Plan	Coverage Highlights	Cost			
HEALTH, continued	HEALTH, continued				
Health Savings Account (HSA) HealthEquity	Hologic contributes \$700 for employee only coverage or \$1,400 for employee + 1 and family coverage per rolling 12 months; in addition, you can contribute up to the IRS maximum	Both you and Hologic make contributions to the plan			
Healthcare Flexible Spending Account (FSA) HealthEquity	Contribute up to \$3,300 per plan year  You contribute pre-tax dollars to your account				
Mental Health Benefit Lyra Health	Your go-to for evidence-based mental healthcare; receive mental health services with 1-on-1 coaching or therapy sessions with a mental health provider or utilize the self help guides and programs  Hologic pays the full cost				
Chronic Disease Prevention and  ifestyle Management Program  Dmada®  Ongoing support that combines the latest digital technology and personalized approach for those that are at risk for certain chronic diseases such as obesity, type 2 diabetes, hypertension or heart disease and more		Hologic pays the full cost			
Expert Medical Opinions and Support Included Health	Provides you and your family members with help navigating a health condition, discussing treatment options, assistance with finding high-quality physicians and/or obtaining a second opinion				
Medicare Decision Support SmartConnect	Receive assistance in navigating, understanding and enrolling in Medicare	Hologic pays the full cost			

Benefit Plan	Coverage Highlights	Cost
FUTURE		
Basic Life and AD&D Insurance  Lincoln Financial  Full Commission Sales plan eligible: Flat \$175,000  All others: 2x base annual salary up to \$500,000  AD&D coverage is equal to basic life coverage		Hologic pays the full cost
Optional Life and AD&D Insurance for Yourself Lincoln Financial	Increments of \$10,000, not to exceed \$1,000,000 AD&D coverage is equal to optional life coverage	You pay the cost with after-tax premiums
Dependent Life Insurance Lincoln Financial	the lease of \$500,000 and a selected be a selected and a selected as a s	
Short-Term Disability (STD)  Lincoln Financial  After a 1-week waiting period, 100% of pre-disability earnings* for weeks 2 through 8 60% of pre-disability earnings* for weeks 9 through 13  No maximum		Hologic pays the full cost
Long-Term Disability (LTD)  After 90 days of disability, 60% of pre-disability earnings* up to \$25,000 monthly maximum benefit		Hologic pays the full cost
Accident, Critical Illness and Hospital Indemnity Insurance Lincoln Financial	ospital Indemnity Insurance with unexpected out-of-pocket expenses associated with a qualified	
<b>401(k) Plan</b> Fidelity	Plan highlights include pre-tax, Roth and catch-up contributions, an employer match, 100% vested from day one, a match true-up, Roth conversions, rollovers and loans/withdrawals	Both you and Hologic make contributions to the plan
<b>Employee Stock Purchase Plan</b> Fidelity	A voluntary program that allows you to purchase Hologic stock at a 15% discount through payroll deductions	You can make contributions on an after-tax basis

<sup>\*</sup> Pre-disability earnings for non-sales employees include weekly gross base pay only. Pre-disability earnings for field sales employees include weekly gross pay plus commission.

Benefit Plan	Coverage	Cost
LIFE		
Healthy Living Program	Embrace a healthier lifestyle with Hologic Healthy Living and Personify Health. Earn cash rewards and improve your wellbeing	Hologic pays the full cost
Vacation	Hologic provides you with vacation time so you can take regular time away from work to maintain balance between work and your personal life	Hologic pays the full cost
Sick Time	Hologic provides 7 paid days per fiscal year, prorated if hired mid-fiscal year; the fiscal year ends on the last Saturday of September  Non-AK/CA/CO/MT/NE based employees may use 3 of these days as personal time absences	
Holidays	12 paid holidays per calendar year – a combination of nationally-observed holidays and one floating holiday	Hologic pays the full cost
Volunteer Time Off	Hologic provides you with paid time off to volunteer to participate in improving the health and wellbeing of our communities	Hologic pays the full cost
PerkSpot	Access to discounts on travel, entertainment, cell phones, restaurants, apparel and more	You pay a discounted rate when purchasing through this vendor
Parental Leave and Pay	Birth and non-birth parents may receive up to <b>16 weeks</b> (or more where required by state law) of job-protected parental leave for the care of a newborn or a newly-adopted child  Birth and non-birth parents are eligible for <b>8 weeks</b> of parental pay at 100%; for birth parents, this is in addition to receiving STD for weeks 2 through 8 at 100%	Hologic pays the full cost
Family Care Leave and Pay	You may take up to a total of <b>12 weeks (26 weeks</b> for military caregiver leave) of leave (except where state law mandates a different leave period) to care for a family member with a serious medical condition. You may receive up to <b>4 weeks</b> of pay at 100% when on an approved leave to care for a family member with a serious health condition	Hologic pays the full cost

Benefit Plan	Coverage	Cost
LIFE, continued		
Support to Help You Thrive Milk Stork	On-the-go breast milk storage, toting and transportation assistance while traveling for work, as well as lactation support consulting	Hologic pays the full cost
Care for Loved Ones Care@Work by Care.com	Access to ongoing and short-term care for children, adults, seniors, pets and more through a no-cost membership, along with 5 Hologic partially-subsidized back-up care days	Hologic pays the full cost of premium membership and partially subsidizes 5 back-up care days
Dependent Care Flexible Spending Account (FSA) HealthEquity	Contribute up to \$5,000  You contribute pre-tax dollars to	
Employee Assistance Program (EAP) Lyra	Balance work and life with services such as legal and financial advice, identity theft and dependent care needs	Hologic pays the full cost
Personal Legal Matters and Identity Protection MetLife Legal Plan	Assistance with personal legal matters as well as identity and data risk management, resolution and education services	You pay the cost with after-tax contributions
Adoption and Surrogacy Reimbursement	Reimbursement for eligible expenses related to the adoption and surrogacy of a child	Hologic pays up to \$10,000 each
Workplace Financial Education Program Ameriprise Financial	Periodic financial educational seminars  A free 30-minute consultation with a financial advisor	Hologic pays the full cost
Philanthropy Partners in Giving Program	Partner with Hologic to donate to your favorite non-profit organization	Both you and Hologic make contributions
Hologic Scholarship Program	Money is awarded for undergraduate college, vocational and technical school programs	Hologic-sponsored scholarship

Benefit plan	enefit plan Coverage	
CAREER		
Talent Investment	An ongoing partnership between you, your manager and your team to identify and commit to opportunities and experiences that generate results	No cost
Tuition Reimbursement	Provides reimbursement for eligible expenses related to undergraduate and graduate courses	Hologic reimburses up to \$5,250 per calendar year for undergraduate and graduate level classes

For benefit questions, contact the **Benefits Service Center** at **844.319.3420** or visit **HologicBenefits.com**.



# Health...be at your best

There's nothing more important than good health! Feeling your best enables peak performance every day. That's why we provide a wide array of comprehensive benefits empowering you to prioritize your health. From preventive care services to top-notch medical, dental, vision, mental health and more, we ensure access to quality care precisely when you need it. Additionally, our health support services and tax-advantaged flexible spending account are tailored to help you maximize your resources and prioritize your wellbeing.



#### **Healthcare Benefits**



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## **Know the Lingo – Terms to Know**



Review the following terms to help you make the most of your medical plan:



**Coinsurance** – The amount you pay after the deductible is met. For example, once you reach your deductible with the PPO Plan, the plan covers in-network inpatient hospital services at 80%. Your coinsurance is the remaining 20%.



Consumer Driven Health Plan (CDHP) – A high-deductible medical plan (as defined by the IRS) designed to give you more control over how your healthcare dollars are spent and allows you to participate in a Health Savings Account (HSA).



**Copay/Copayment –** The specified dollar amount you pay for certain services after meeting the deductible, such as doctor's visits and prescription drugs. For example, once you reach your deductible with the PPO Plan, you only need to pay a \$30 copay for primary care office visits.



**Health Savings Account (HSA)** – A tax-advantaged savings account available if you enroll in the CDHP. The HSA allows you to build tax-free savings to pay for qualified healthcare expenses, including deductibles, copayments, coinsurance and prescription drugs. Hologic contributes to your HSA each pay period. Unused HSA funds roll over and accumulate in your account for future use.

#### INDIVIDUAL MANDATE FOR HEALTH COVERAGE

Despite the federal health coverage mandate penalty being \$0, certain states still enforce their own mandates. To dodge state penalties, get insured via our benefits or through state/federal exchanges. For more on healthcare reform and mandates, check **healthcare.gov** or your state's exchange site.



**Out-of-Pocket Maximum –** The most you have to pay for covered services in a plan year. After you spend this amount on deductibles, copayments and coinsurance, your plan pays 100% of the cost for covered benefits for the remainder of the plan year. This puts a limit in place to avoid incurring extraordinary healthcare expenses.



**Plan Year Deductible –** The amount you pay each plan year before the plan begins to pay for certain medical services.



**Premium –** The amount you pay per paycheck to ensure access to covered healthcare services, separate from costs like copayments and deductibles.



**Routine Preventive Care** – This includes plan year checkups, immunizations and wellness exams to help identify potential health risks and keep you and your covered dependents healthy.



# **Understanding Your Medical Options**



Hologic offers three PPO medical plans to choose from through **Blue Cross Blue Shield of Massachusetts (BCBSMA)**:

- Consumer Driven Health Plan (CDHP) with a Health Savings Account (HSA)
- PPO
- PPO Plus

All three options offer quality coverage for a broad range of services.

They differ in the amount you pay for coverage (payroll premiums) and in how you pay at the time of service. It's important that you take the time to understand how each plan works so you can choose the coverage that's best for you and your family. Easily compare plans using the **Plan Comparison Tool** or by checking each plan's **Summary of Benefits and Coverage (SBC)**.

#### All plans:

- Provide 100% coverage for in-network preventive care
- Offer the same broad range of services and quality of care
- Use the BCBSMA nationwide network of preferred providers
- Include coverage for office visits, hospitalization, surgery, maternity care, vision exams and supplies, prescription drugs through CVS Caremark and more
- Require you to pay a deductible for most non-preventive medical services before plan payments begin

BCBSMA Medical Option	Payroll Premium	Deductible	Coinsurance (a % after deductible)	Copays (a flat \$ after deductible)
CDHP with HSA	Lowest	Highest (offset by Company-funded HSA)	Moderate	N/A
PPO	Moderate	Moderate	Moderate	Moderate
PPO Plus	Highest	Lowest	Lowest	Lowest

Are you eligible for Medicare? You have support options – see page 28.

#### **Know the Difference**

The CDHP, PPO and PPO Plus all utilize the same PPO network of providers...and work in similar ways. However, it's important to understand the differences in the way deductibles and out-of-pocket maximums are met under each option.

	CDHP with HSA Plan	PPO and PPO Plus Plans
How is the deductible met?	When enrolled as employee only, you must first meet the employee only deductible before the plan pays for non-preventive services.  When enrolled as employee + 1 or family, there is no individual deductible. All family members collectively must meet the family deductible before non-preventive services are covered.  Prescription costs do count toward the medical deductible.	The family deductible can be met by any combination of covered family members, but no individual family member will have to pay more than the per person deductible before coverage is provided.  Prescription costs do not count toward the medical deductible.
How is the out-of-pocket maximum met?	When enrolled as employee only and you meet the employee only out-of-pocket maximum, covered services will be paid at 100%.  When enrolled as employee + 1 or family, there is no individual out-of-pocket maximum. Covered services will be paid at 100% when all family members collectively meet the family out-of-pocket maximum.  Prescription costs do count toward the medical out-of-pocket maximum.	The family plan year out-of-pocket maximum can be met by any combination of covered family members, but no individual family member will have to pay more than the per person out-of-pocket maximum before that family member receives 100% coverage for the remainder of the plan year.  Note: There are separate out-of-pocket maximums for prescription costs.

Visit the **Medical** page of **MyHologic** to learn more about the Hologic medical plans, find plan summaries, compare medical plan costs and review the **CDHP** with **HSA** eGuide.



#### **CLICK IT!**

Click the colored and bold text in the eCatalog for detailed information on specific benefits.

#### **Medical Plans At-a-Glance**

	CDHP with HSA Plan	PPO Plan	PPO Plus Plan
	In-Network You Pay	In-Network You Pay	In-Network You Pay
Plan year deductible	\$2,000 employee only <sup>1</sup> \$4,000 family <sup>1</sup>	\$1,500 per person \$3,000 per family²	\$1,000 per person \$2,000 per family <sup>2</sup>
Plan year out-of-pocket maximum	\$4,000 employee only³ \$8,000 family³	\$4,000 per person \$8,000 per family <sup>4</sup>	\$3,000 per person \$6,000 per family <sup>4</sup>
Eligibility for tax-savings account	Health Savings Account (HSA) (see limits on <b>page 17</b> )	· ·	pending Account (FSA) on <b>page 26</b> )
Hologic annual contribution to HSA	\$700 employee only \$1,400 family Prorated and funded per pay period	N/A	N/A
Preventive visits	No cost	No cost	No cost
Telehealth visits	No cost <sup>5</sup>	No cost	No cost
Primary care office visit	20%5	\$30 copay <sup>5</sup>	\$25 copay⁵
Other covered providers (specialists) office visit	20%5	\$50 copay <sup>5</sup>	\$40 copay⁵
Diagnostic X-rays and lab tests (MRIs, CT scans, PET scans, nuclear cardiac imaging)	20%5	20%5	10%5
Breast health imaging (Ultrasounds, MRIs, CT scans, PET scans)	No cost⁵	No cost	No cost
Fertility and family building benefits		ed by Progyny. See <b>page 22</b> lical Plan cost share applies.	
Peri/menopause support	Women: Get Progyny expert help f aches, hormone changes and		
Inpatient hospitalization	20% <sup>5</sup>	20%5	10%5
<b>Chiropractic care</b> (90 visits per calendar year)	20%5	\$50 copay <sup>5</sup>	\$40 copay <sup>5</sup>
Acupuncture (20 visits per calendar year)	20%5	\$50 copay <sup>5</sup>	\$40 copay <sup>5</sup>
Emergency room	20%5	\$150⁵	\$150 <sup>5</sup>
Outpatient mental health/ substance use treatment	20%5	\$30 copay <sup>5</sup>	\$25 copay <sup>5</sup>
Prescription drug	See page 20	See page 20	See page 20

#### **Employee Premiums**

Rates shown are effective July 1, 2025 — June 30, 2026

	CDHP with HSA Plan	PPO Plan	PPO Plus Plan
Biweekly Rate* (26 pay periods)			
Employee Only	\$43.08	\$60.91	\$136.37
Employee + 1	\$101.54	\$138.56	\$280.75
Family	\$152.31	\$207.84	\$421.13

Semi-monthly Rate** (24 pay periods)			
<b>Employee Only</b> \$46.67 \$65.99 \$147.73			
Employee + 1	\$110.01	\$150.11	\$304.15
Family	\$165.01	\$225.17	\$456.22

<sup>\*</sup> Biweekly means you are paid every other Friday.

#### **MEDICAL PLAN PREMIUM CREDIT**

Take advantage of earning a \$300 medical premium credit for the following plan year (July 1, 2026 – June 30, 2027) with Healthy Living's Personify Health program. Review the **Wellness Guide** for more information.

- <sup>1</sup> CDHP with HSA: The entire deductible must be satisfied before benefits are paid.
- <sup>2</sup> PPO and PPO Plus: The family deductible can be satisfied by eligible costs incurred by any combination of covered family members. No individual family member will have to pay more than the per person deductible before benefits are provided for that family member.
- 3 CDHP with HSA: The out-of-pocket maximum must be satisfied before any covered member receives 100% coverage for the remainder of a plan year, including prescription drugs.
- 4 PPO and PPO Plus: The family plan year out-of-pocket maximum can be satisfied by eligible costs incurred by any combination of covered family members. No individual family member will have to pay more than the per person out-of-pocket maximum before the family member receives 100% coverage for the remainder of the plan year, excluding prescription drugs.
- <sup>5</sup> After the plan year deductible is met.

<sup>\*\*</sup> Semi-monthly means you are paid on the 15th and the last day of the month.

# **Understanding the CDHP with HSA**



The Consumer Driven Health Plan (CDHP) with Health Savings Account (HSA) has the lowest payroll premium and gives you the most control over healthcare spending. It has a higher yearly deductible, but the Company's contribution to your tax-friendly HSA eases the deductible expense, making the plan an affordable option.

#### **CDHP** with HSA Rules

There are incentives with the CDHP with HSA to keep you healthy and encourage you to spend your healthcare dollars wisely, though some special rules apply:

- To be eligible you must not be covered by any other medical plan, such as another employer's plan (as through a spouse, domestic partner or as a retiree), a government health plan such as Medicare or Medicaid or an individual medical insurance plan or have a Healthcare FSA.
- Your domestic partner, their children or your non-tax dependent can be enrolled in the CDHP plan, but are not eligible to use the HSA for their healthcare expenses.
- You can use your HSA funds to cover qualified healthcare expenses for any
  of your eligible dependents (as defined by the IRS), regardless of whether
  they are covered under a Hologic medical or dental plan.

# FIND MORE INFORMATION ON THE CDHP WITH HSA

Read Your Guide to the CDHP with HSA or watch this video to:

- Find out what's considered a qualified expense
- Learn how the plan works
- Know the difference between an HSA and FSA

#### **6 BENEFITS OF THE HSA**

- 1. Contributions from Hologic\* Hologic contributes \$700 for employee only coverage or \$1,400 for employee + 1 and family coverage per rolling 12 months. The employer HSA contribution is prorated and funded per pay period.\*\*
- 2. Contributions from you You can contribute to your HSA on a pretax basis, up to the annual IRS maximum. For 2025, you and Hologic (combined) can contribute up to \$4,300 for employee only coverage and \$8,550 for employee +1 and family coverage (Per the IRS, the family maximum applies per household). If you are age 55 or older in 2025, you can make an additional annual catch-up contribution of up to \$1,000.
- 3. Triple tax savings†
  - The money you put in is tax-free.
  - Interest and investment earnings are tax-free.
  - Distributions for qualified healthcare expenses are tax-free, even when you retire.
- **4.** Easy to use You will be provided with a HealthEquity Visa® Health Account debit card so you can easily pay qualified expenses directly from your account. You can also pay providers directly from your online account at **HealthEquity.com** or via the HealthEquity mobile app.
- **5. Choice** It is up to you to decide whether to use your funds for qualified expenses now or to save them for use in the future.
- **6. Convenient –** Since the money rolls over at the end of each year (unlike an FSA) and stays in the account that you own, you can take the account balance with you if you leave the Company for any reason.
- \* Company HSA contributions are subject to change in the future. You will not receive the Company contribution if you are not enrolled in the HSA.
- \*\* Company contributions are divided evenly over 24 pay periods, skipping any 3rd pay period within a month. The employer contribution will be funded up to the \$700 amount for those covering only non-tax dependents such as a domestic partner and domestic partner's child.
- <sup>†</sup> Contributions to the HSA are subject to state income taxes if you live in CA or NJ. Interest and investment earnings are subject to state taxes in CA, NJ, NH and TN.

# **Virtual Care from Anywhere**



Eliminate wait times and gain flexibility and convenient access to care with these solutions.

#### **Telehealth**

**Telehealth** enables 24/7 remote medical consultations with BCBSMA healthcare providers through digital devices, offering a convenient way to access care for non-urgent health needs from anywhere you are at no cost\* to you when enrolled in Hologic's medical plan.

#### **Virtual Primary Care**

BCBSMA members have access to **virtual primary care** at no cost\*. Virtual primary care allows patients to have routine check-ups, manage chronic conditions and receive general health guidance from primary care physicians online, without an in-person visit.



- \* Subject to deductible when enrolled in the CDHP.
- \*\* Subject to your Hologic medical plan deductible and coinsurance.

#### **Peri/Menopause Support**

Comprehensive benefits are provided to support you during the many transitions in a woman's life. When enrolled in Hologic's medical plan\*\*, this program can help you manage your unique symptoms – weight fluctuations, anxiety, insomnia, brain fog, fatigue, joint pain and hot flashes.

- Virtually connect to OB/GYNs, nurse practitioners, registered dietitians and mental health clinicians for integrative and ongoing care.
- Receive personalized hormonal and non-hormonal treatment plans, lifestyle support and symptom relief.
- Access early screenings for chronic conditions including cancer, cardiovascular and metabolic issues and more.

Provided through **Progyny**, get the care you deserve, manage your symptoms and boost your overall health.

#### **Virtual Physical Therapy and Pelvic Support**

Programs provided through **Sword Health** help prevent and relieve pain, improve strength, mobility and flexibility after an injury or pre/post a surgery from anywhere with a personalized plan designed by your dedicated physical therapist.

- Digital physical therapy utilizes best-in-class technology for data collection, real-time feedback, check-ins and support to eliminate pain in your back, joint and muscles.
- Work with a physical health specialist and a tracking device to keep moving and eliminate recurring chronic pain and injury with the Move program.
- Women have access to comprehensive care for pelvic disorders, reproductive health, bladder and bowel disorders right from the comfort of their own home through the Bloom program, which utilizes the Elvie pod trainer.

You must be enrolled in a Hologic medical plan to use this free benefit.

# Stay In-Network – and Save



Hologic's medical plans use the Preferred Provider Organization (PPO) network. Utilizing in-network **BCBSMA** providers saves you money due to their reduced negotiated rates.

#### In-network:

- The plan pays a higher percentage of the covered charge.
- Preventive care is fully covered, with no deductible.
- Your network provider files claims on your behalf.

#### **Out-of-network:**

- There is a separate higher out-of-network deductible you must pay first.
- The plan will pay a lower percentage of the cost, based on usual and customary charges.
- You are responsible for any charges over usual and customary and they do not apply towards the out-of-network deductible or the out-of-pocket maximum.
- You must complete and submit claim forms.



#### FIND A BCBSMA MEDICAL PROVIDER

#### Find a provider:

- 1. Visit provider.bcbs.com
- 2. Click on "Choose Location and Plan"
- **3.** Enter your zip code and **"HLX"** as the plan prefix

**Note:** Members residing in NH must first log in to their **MyBlue account** at **BlueCrossMA.org** to find an in-network provider.

#### **NEED MORE CARE ASSISTANCE?**

Find help navigating a health condition, discussing treatment options, assistance with finding high quality physicians and/or obtaining a second opinion with **Included Health**. Visit **IncludedHealth.com/Hologic** to get started.

# Feel Better - Prescription Drugs



**CVS Caremark** offers prescription coverage for all medical plans, covering generic and brand name drugs, which can be obtained at network pharmacies or via mail order for maintenance medications.

## **In-Network Coverage At-a-Glance**

When enrolled in:	CDHP with HSA Plan <sup>1</sup>	PPO or PPO Plus Plan
Fill at <sup>2</sup> : CVS Caremark Network Pharmacy: 30-day supply CVS Retail Store Pharmacy using Maintenance Choice: 90-day supply <sup>3</sup> Mail Order: 90-day supply <sup>3</sup>		
Generic (Tier 1)	\$10 copay at retail <sup>4</sup> \$20 copay at mail order <sup>4</sup>	\$10 copay at retail \$20 copay at mail order
Preferred brand name (Tier 2)	25%4	\$40 copay at retail \$80 copay at mail order
Non-preferred brand name (Tier 3)	35%4	\$60 copay at retail \$120 copay at mail order
Specialty medication (Tier 4) <sup>5</sup>	Covered within	\$150 copay through
Save with PrudentRx - find information on the following page	respective tier level or \$0 with PrudentRx <sup>6</sup>	specialty pharmacy or \$0 with PrudentRx
Out-of-pocket maximum	Combined with medical out-of-pocket maximum \$4,000 per employee only coverage	A separate out-of-pocket maximum applies PPO: \$4,000 per person \$8,000 per family
	\$8,000 per family coverage	PPO Plus: \$3,000 per person \$6,000 per family

- <sup>1</sup> Certain preventive drugs are not subject to the medical plan year deductible.
- <sup>2</sup> Fill options may be limited for specialty and diabetic medications.
- <sup>3</sup> If you fill a maintenance medication at a CVS retail pharmacy or through mail order, you may receive a 90-day supply for the cost of a 60-day supply when enrolled in the PPO or PPO Plus plan and a discount when enrolled in the CDHP plan.
- <sup>4</sup> After medical plan year deductible is met.
- 5 These medications are typically used to treat complex conditions such as autoimmune disorders, multiple sclerosis and hemophilia, for example.
- <sup>6</sup> Specialty medications filled through PrudentRx on the CDHP with HSA Plan apply toward the deductible but not out-of-pocket maximum.

#### **FIND A PHARMACY**



Find an in-network pharmacy near you with CVS Caremark's **Pharmacy Locator** or call a Customer Care Representative at **855.271.6598**.

#### **Know the Difference**

the plan year.

#### **PPO or PPO Plus Plan CDHP with HSA Plan** Prescription costs count toward Prescription costs are exempt the medical plan deductible. from medical plan deductible in PPO and PPO Plus plans. Deductible must be met for Separate out-of-pocket maximum prescription copays/coinsurance applies to prescription drugs. to begin. • Certain preventive care drugs are Refer to the table for out-ofexempt from the deductible. pocket maximum. • Visit the **Prescription** page on **MyHologic** for the exempt drug list. • Out-of-pocket maximum must be met for full coverage for rest of



# Feel Better – Prescription Drugs, continued



## **Cost Saving Prescription Programs**

#### **Generics**

Maximize your prescription coverage and minimize your out-of-pocket costs when you use generics as a practical and cost-effective option to managing your healthcare needs.

#### **Maintenance Medications**

Save on maintenance medications when you purchase a 90-day supply for the cost of a 60-day supply through mail order or at a local CVS retail pharmacy.

Refer to the **Prescription** page of **MyHologic** for more information on prescription drug coverage.



### **PrudentRx Specialty Drug Discount Program**

When enrolled in a Hologic medical plan, some specialty medications are eligible for a copay discount when you enroll in the PrudentRx program, a partner of Caremark. Specialty medications are typically used to treat complex conditions such as autoimmune disorders, multiple sclerosis and hemophilia.

This program is designed to lower your out-of-pocket costs when **filling a non-essential medication** by assisting you with enrollment in drug manufacturers' copay card assistance programs.

- When enrolled in the PrudentRx Copay Program and filling a covered medication, your copay lowers to \$0.\*
- When filling a medication not available at a CVS Specialty Pharmacy, and therefore not part of the PrudentRx Copay Program, you pay a \$150 copay per fill when enrolled in the PPO or PPO Plus plans and the respective tier coinsurance when enrolled in the CDHP plan.\*
- If you choose to not enroll in the PrudentRx Discount Program for which
  there is a manufacturer discount copay card available, you pay 30% of the
  cost of the medication.\*
- Medications considered an Essential Health Benefit are excluded from this
  program and have a \$150 copay per fill when enrolled in the PPO or PPO Plus
  plans and the respective tier coinsurance when enrolled in the CDHP plan.\*

Members on eligible specialty medications will receive communications directly from Caremark and PrudentRx. You must enroll to take advantage of significant cost savings.

#### A NOTE FOR PROGYNY USERS

Fertility medications that are prescribed by a Progyny provider are filled through a Progyny pharmacy and not CVS Caremark. Find more information on the Progyny Fertility and Family Building Benefit on the **next page**.

<sup>\*</sup> For those enrolled in the CDHP with HSA Plan, the discounts are applicable after the medical plan deductible has been met.

# Fertility and Family Building Benefits – Progyny



Inclusive fertility and family building benefits are available through Progyny, providing superior clinical outcomes, flexible treatment plans and exceptional member experience. The journey to become a parent can be physically, emotionally and financially challenging. With this in mind, the Progyny benefit includes:

- Comprehensive treatment coverage leveraging the latest technologies and treatments
- · Access to high-quality care through a premier network of fertility specialists
- Integrated fertility medication coverage with Progyny Rx
- Personalized emotional support and guidance for every path to parenthood from dedicated Patient Care Advocates (PCAs)

To make your fertility benefit easier to understand and utilize, Progyny bundles all the individual services, tests and treatments you may need into Smart Cycles. Each treatment or service is valued as a portion of a Smart Cycle and is expressed as a fraction, so you always know your benefit balance. You and your physician work together to create a customized treatment path.



Coverage is available for three Smart Cycles. Covered services, treatments and tests include, but are not limited to:

- In vitro fertilization (IVF) fresh cycle, freeze-all, reciprocal
- Frozen Embryo Transfer (FET)
- Intrauterine Insemination (IUI)
- Pre-Transfer Embryology Services
- Egg, Embryo and Sperm Freezing

#### FIND MORE INFORMATION

Call your dedicated Progyny Patient Care Advocate at **866.946.0633** Monday - Friday from 9 a.m. to 9 p.m. ET to learn more and activate your benefit.

Visit **Progyny.com/Education** for podcasts, expert interviews, video tutorials and information on treatment options.

#### **Adoption and Surrogacy Resources**

Hologic offers assistance to cover adoption-related and surrogacy services up to \$10,000 each through Hologic's **Adoption Reimbursement Policy** and **Surrogacy Reimbursement Policy** for all eligible full-time employees.

Additionally, BCBSMA members can contact a Progyny Patient Care Advocate who can provide counseling related to these paths to parenthood, including:

- Details and average costs
- Explanation of various processes and pathways
- Resources to find legal advice for state-specific laws that impact your options
- Specific counseling for same-sex and transgender couples

NOTE: Elective services may be considered a taxable benefit and the value of which will be imputed in your income.

# **Something to Smile About – Dental**



You have two options for dental coverage through **Delta Dental of Massachusetts**:

- Core plan
- Enhanced plan with orthodontia

You will have easy access and great value through Delta Dental's PPO Plus Premier network of providers with either plan.

#### **About the Network**

Delta Dental's PPO Plus Premier network provides access to Delta PPO and Premier providers for savings. While discounts are available in both networks, the Delta Dental PPO network typically offers the largest savings, with discounts up to 30%.

#### **Using Non-Participating Dentists**

If you receive care from non-participating dentists, you will pay higher out-of-pocket costs since the Delta Dental contract rates do not apply. You must pay the difference between the non-participating maximum plan allowance and the full fee charged by the dentist. You will also need to file claims yourself.

#### RIGHT START 4 KIDS<sup>SM</sup> BENEFIT

The earlier good oral health habits are created, the easier it is to prevent cavities, pain and infections. That's why Right Start 4 Kids covers 100% of the cost of covered care with in-network dentists for children up to their 13th birthday. This means no deductibles or coinsurance for covered preventive, diagnostic, basic and major services up to the annual plan year maximum.

#### **Dental Plans At-a-Glance**

	Core Plan	Enhanced Plan
Plan year deductible	\$100 per individual \$300 per family	\$50 per individual \$150 per family
Plan year maximum benefit	\$750 per individual	\$2,000 per individual
	In-Ne	twork
Preventive <sup>1</sup> Exams, cleanings, sealants, X-rays	100%	100%
Restorative Fillings, extractions, root canals, oral surgery	80%²	80%²
Major treatment Crowns, dentures	50%²	60%²
Orthodontia Adults and children	Not covered	50%
Separate lifetime orthodontia maximum	N/A	\$2,500 per individual

#### **Employee Premiums**

	Core Plan	Enhanced Plan
	Biweekly Rate <sup>3</sup> (26 pay periods)	
Employee Only	\$3.95	\$9.20
Employee + 1	\$7.53	\$17.57
Family	\$11.05	\$25.77
	Semi-monthly Rate	e <sup>4</sup> (24 pay periods)
Employee Only	\$4.28	\$9.97
Employee + 1	\$8.16	\$19.04
Family	\$11.98	\$27.92

<sup>&</sup>lt;sup>1</sup> The cost of preventive care services do not count toward the plan year maximum benefit.

Note: Percentages above apply to discount contracted rates for Delta Dental dentists.

#### **FIND A DENTIST**

Visit **DeltaDentalMA.com** or call Member Services at **800.872.0500** to find a network dentist (Group Number: **001495**).

<sup>&</sup>lt;sup>2</sup> After dental plan year deductible is met.

<sup>&</sup>lt;sup>3</sup> Biweekly means you are paid every other Friday.

<sup>&</sup>lt;sup>4</sup> Semi-monthly means you are paid on the 15th and the last day of the month.

## Something to Smile About - Dental, continued



#### **Rollover Max Feature**

If you meet certain criteria, you can roll over dental plan dollars from one year to the next. This feature gives you the ability to plan ahead and save money for more expensive procedures like root canals, bridges and crowns. You must be enrolled for dental coverage before the 4th quarter (April 1, 2026 – June 30, 2026) of the plan year to be eligible for the Rollover Max Feature.

#### **ROLLOVER FEATURE**



year (July 1 – June 30).

You'll have access to additional plan dollars... if you have one cleaning or oral exam in the plan



And
your total yearly claims
don't exceed:

Core \$300 Enhanced \$800



Then
you can roll over to use
each year:

Core \$200 Enhanced \$600



Rollover amount is capped at no more than:

Core \$500 Enhanced \$1,500





#### **Know Before You Go**

If you require a procedure that exceeds \$300, your dentist must submit a **pre-treatment estimate** to Delta Dental. Having an estimate in advance will help you plan for any out-of-pocket expenses you may incur and also confirm if the services are covered in your plan.

To learn more, visit **DeltaDentalMA.com** or call Member Services at **800.872.0500** (Group Number: **001495**).

# **Seeing Brighter – Vision**



Brighten your view with routine exams, lenses, frames, contact lenses and even prescription sunglasses.

All benefit-eligible employees can enroll in this standalone vision plan through **EyeMed**. You do not need to be enrolled in the medical plan.

Save money by using an in-network or PLUS Provider. To find one in your area, visit **EyeMed.com** or call **866.800.5457**.

#### FRAMES OR CONTACTS?

There's no need to choose! You can get both frames AND contacts in the same year. That's a \$500 value!

#### **ADDITIONAL SAVINGS**

Don't miss out on these additional in-network discounts:

- 40% off a second pair of glasses
- 20% off blue light filtering and non-prescription sunglasses
- Hearing aids discounts
- Lasik or PRK from U.S. Laser Network



#### **Vision Plan At-a Glance**

All services and material are covered once every plan year (July 1 – June 30).

Covered Services/Material	In-Network You Pay	Out-of-Network You are Reimbursed
Eye exam	\$0	Up to \$57
Frames	Covered up to \$2501, then 20% discount	Up to \$200

Lenses (Choose either Eyeglass Lenses OR Contact Lenses)		
Eyeglass Lenses		
Single, bifocal, trifocal, lenticular, standard progressive	\$0	Between \$47 and \$113, depending on the lens type
Progressive premium tier 1-4	Covered between \$85-\$215	Up to \$95
Contact Lenses		
Conventional	Covered up to \$250, then 15% discount	Up to \$200
Disposable	Covered up to \$250	Up to \$200
Medically necessary	\$0	Up to \$300

#### **Employee Premiums**

Biweekly Rate <sup>2</sup> (26 pay periods)
\$5.42
\$10.30
\$15.12
Comi monthly Date 3/24 new newledge
Semi-monthly Rate <sup>3</sup> (24 pay periods)
\$5.87

<sup>&</sup>lt;sup>1</sup> Coverage increases to \$300 when you visit a PLUS Provider.

<sup>&</sup>lt;sup>2</sup> Biweekly means you are paid every other Friday.

<sup>&</sup>lt;sup>3</sup> Semi-monthly means you are paid on the 15th and the last day of the month.

# Stretch Your Dollars – Healthcare Flexible Spending Account (FSA)



Save on healthcare costs with the pre-tax **HealthEquity** Healthcare FSA. Enroll to have contributions taken from your paycheck over 24 pay periods, skipping the third pay period in a month.

Reimburse yourself for qualified expenses with your FSA funds.

**Note:** Enrollees in the CDHP with HSA cannot join the Healthcare FSA and must deplete any prior year FSA funds by July 1.

Account Feature	Healthcare FSA
Purpose	Pay for qualified healthcare expenses for yourself and eligible family members.
Plan year pre-tax election	Minimum amount: \$100 Maximum amount: \$3,300
Qualified	Medical, dental and vision out-of-pocket expenses
healthcare expenses	Over-the-counter medications without a prescription, including feminine care products
	Glasses and contact lenses not already paid for by the vision plan, as well as LASIK surgery
Reimbursement	Use your HealthEquity Visa® Health Account debit card or complete a claim form and submit it along with your receipts via fax, mail or online at <b>HealthEquity.com</b> . A <b>2 ½ month grace period applies</b> . All claims incurred by September 15, 2026 must be submitted for reimbursement within 90 days of the plan year end date (June 30) which is September 28, 2026. The plan does not allow for any unused funds to be rolled over. Unused funds will be forfeited at the end of the grace period.
Managing your Healthcare FSA account	You can use your HealthEquity Visa® Health Account debit card at qualified merchants where Visa® is accepted. Manage account expenses online or through the HealthEquity mobile app.

#### **FSA TOOLS AND RESOURCES**

Visit **HealthEquity.com** for education and planning tools, such as:

- A calculator to help you estimate your healthcare expenses and tax savings
- A reference library on FSAs
- Learning tools and helpful forms to assist you with your FSAs

Visit the **Eligibility and Changes** page on **MyHologic** for more information on making changes throughout the year.



#### **MORE INFORMATION**

- For information on the Dependent Care FSA account, see page 45.
- For a list of qualified healthcare expenses, visit **HealthEquity's website**.

## Cultivate a Foundation of Mental Wellbeing – Lyra Mental Health Benefits



**Lyra Mental Health Benefits** is a Hologic-sponsored benefit that provides evidence-based care for your and your dependents' emotional and mental health how, when and where you need it with **up to 16 no-cost sessions**.

**In as little as 5 minutes,** Lyra will match you to care options based on your needs and lifestyle whether that's working with a mental health coach, therapist, a medication physician\* or accessing self-led mental health tools. Receive therapy right from home virtually or in person with a highly-skilled therapist who will develop a care plan personalized to you, along with support between sessions.

#### Who is eligible for Lyra Mental Health Benefits?

All regular full- or part-time employees scheduled to work at least 30 hours per week and their spouse/domestic partner and dependent children to age 26.

#### Lyra's Mental Health Benefits include:

#### **Mental Health Coaching**

- Virtual meetings and messaging with a coach
- Evidence-based support to tackle challenges and achieve lasting change

#### **Mental Health Therapy**

- Immediate appointments with top providers, both virtually and in-person
- Personalized care plans for conditions like depression, anxiety, PTSD, etc.
- Tools and support to practice skills and track progress

#### **Guided Self-Care**

- Personalized 6-week self-care plan after initial session
- · Exercises and strategies to practice independently
- Digital tools and coach support through messaging

#### **Self-Led Mental Wellness Tools**

- On-demand resources for meditation, stress management and sleep
- · Accessible anytime, anywhere on mobile device or computer
- $^{st}$  Medication management is only available to members enrolled in Hologic's BCBSMA medical plan.



# **Chronic Disease Prevention and Lifestyle Management – Omada**



# Expert Medical Opinion and Support – Included Health



**Omada**® combines the latest digital technology and a personalized approach for ongoing support to those that are at risk for certain chronic diseases such as type 2 diabetes, heart disease or hypertension due to weight, blood pressure, cholesterol, family history or health habits (nutritional, physical activity and smoking).

This program will help you make small, meaningful changes to the way you eat, move, sleep and manage stress. Lose weight, gain energy and take control of your health.

#### **Omada includes:**

- A personalized home page to inspire action
- A professional health coach for support and guidance
- Smart device integration for seamless tracking
- Weekly online lessons to educate and empower you
- A small online peer group for real-time motivation

Even if you are not enrolled in the Hologic medical plan, the Omada program is available at **no cost** to you, your spouse or domestic partner and your dependent children over the age of 18 who meet the health risk criteria.

Find out more at **Go.OmadaHealth.com/Hologic** and take a short survey to find out if you or your eligible family members qualify for Omada.

**Note:** The Omada program does not currently support individuals with type 1 diabetes because this condition requires different types of support and technology integrations. However, type 1 diabetes support is provided by CVS Caremark's diabetes care program which offers comprehensive clinical support and savings.

Feel confident while navigating a health condition discussing treatment options, assistance with finding high-quality physicians and/or obtaining a second opinion. **Included Health** is here to help and is offered to you and your immediate family members at **no cost**.

#### **Included Health provides:**

- **Expert second medical opinions** World-leading experts will review your medical records and help you and your doctor define and optimize the right treatment plan for your situation.
- Treatment decision support Receive information about a new diagnosis
  or treatment, support deciding if surgery is right for you or advice on
  recommendations your doctor has made.
- **An extra hand** Get help finding top-ranking highly-qualified physicians in your area, booking specialist appointments or gathering medical records.

Find out more about what Included Health can do for you at IncludedHealth.com/Hologic.

# **Medicare Support – SmartConnect**

65+

Receive guidance and support when considering Medicare options as you become eligible. Whether you are still working or are starting to transition into retirement, this is available at **no cost**.

#### **SmartConnect includes:**

- Concierge call center Connect with licensed Medicare agents.
- Online resources Utilize the plan comparison website, Medicare 101 eBook and FAQs.
- Webinars Get your questions answered.

Explore your options at gps.smartmatch.com/hologic or call 833.859.1160.

# Future...plan for a sure tomorrow

As a part of our Better Rewards program, we're dedicated to securing a brighter future for you and your loved ones. We offer a comprehensive suite of benefits tailored to provide peace of mind and stability. This includes valuable income protection through life and disability insurance, ensuring financial security during challenging times. Additionally, we provide retirement and investment options to help you build a solid financial foundation for the future.



## **Financial Security**



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Hologic, Inc. Savings and Investment Plan – 401(k)	37
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### Value to You - Basic Life and AD&D Insurance

To help protect your family from the financial burden of death or severe injury, Hologic provides all eligible employees with life and accidental death and dismemberment (AD&D) insurance through **Lincoln Financial**. If you pass away from an accidental injury, your beneficiary will receive both the basic life and AD&D benefit. AD&D insurance also pays benefits if you are severely injured and suffer a loss, such as the loss of a limb or eyesight.

Coverage for:	Benefit Amount	Maximum
Full Commission Sales Plan eligible employees	\$175,000	N/A
All other eligible employees	2x base annual salary	Up to a maximum of \$500,000

#### **Name Your Beneficiaries**

It's important to designate a beneficiary for your life insurance policy, as this provides an easy way to pay out a life insurance benefit. It is important to keep your beneficiary information up to date so there are no unintended delays for the ones you planned to protect after you pass away. Beneficiary designations take priority over estate planning documents, such as a will or trust.

It is recommended that you review your beneficiary designations regularly and update them within **Benefits Self Service** to be sure the benefit is provided to your intended loved one.

#### **PLANNING AHEAD**

Do you have a will or trust in place? If not, the MetLife Legal Plan offers legal advice and services for a wide range of personal legal matters, including the preparation of wills, trusts and more for a small fee. See <a href="mailto:page-47">page-47</a> for details. You may only enroll during Open Enrollment or as a newly-eligible employee.



### **CLICK IT!**

Click the colored and bold text in the eCatalog for detailed information on specific benefits.



# **Protect Your Income – Optional Life**



To help you protect what counts, you may purchase optional life insurance coverage through **Lincoln Financial** for you and your family. The full cost will be paid by you with after-tax payroll deductions.

Coverage for:	Coverage Amount	Maximum
Employee	Increments of \$10,000	Up to a maximum of \$1,000,000
Spouse/domestic partner	Increments of \$10,000	The lesser of \$500,000 or your combined basic and optional employee life coverage amount
Child(ren)	\$2,500, \$5,000 or \$10,000	N/A

You may apply for coverage any time throughout the year. However, electing or increasing optional employee and spouse life insurance requires you to complete Evidence of Insurability (EOI) before coverage is approved. Child life insurance does not require EOI and can be elected at any time.



#### What is Evidence of Insurability (EOI)?

- Evidence of Insurability (EOI) is a health questionnaire that helps determine whether you, and/or your spouse or domestic partner qualify for new coverage or an increase in coverage.
- You may be eligible to enroll up to a guarantee issue amount without needing to complete EOI.

Guarantee Issue – the amount you can elect wit	hin
31 days of the following events without completing	g EOI

Type of coverage	Employee optional life and AD&D insurance	Spouse or domestic partner optional life insurance
New hire	\$200,000	\$40,000
Birth/marriage/ establishment of domestic partnership	\$200,000	\$40,000

#### Other features of optional life and AD&D insurance:

- Portability of insurance provision
- Accelerated benefit
- Repatriation benefit
- Right to convert provision
- · Waiver of premium

- Air bag benefit
- · Seat belt benefit
- · Child care benefit
- Child education benefit

#### How to apply for optional life insurance:

Log on to **Benefits Self Service** at **HologicBenefits.com** and select **"Update Life Insurance Elections"**. Once you elect your new coverage level, you will be provided instructions on how to complete EOI, if applicable. Amounts elected outside of a newly-eligible window or over the guarantee issue amount will be pended until approved by Lincoln Financial.



## Protect Your Income - Optional Life, continued



#### **Optional Life and AD&D Insurance for You**

Monthly rate per \$1,000 of coverage
\$0.068
\$0.078
\$0.098
\$0.118
\$0.128
\$0.168
\$0.268
\$0.478
\$0.718
\$1.378
\$2.210

#### How to calculate your cost

Assume you are 40 years old and wish to purchase **\$200,000** of optional life and AD&D insurance for yourself.

- Monthly rate per \$1,000 of coverage is \$0.128
- \$200,000 ÷ \$1,000 = **\$200**
- \$200 x \$0.128 = **\$25.60/month** \$25.60 x 12 = \$307.20
- ÷ by 26 for biweekly
  - = **\$11.82** biweekly
  - OR -
- $\div$  by 24 for semi-monthly
  - = \$12.80 semi-monthly

### **Optional Life Insurance for Your Child(ren)**

You may purchase optional life insurance for your child(ren) in the amount of **\$2,500**, **\$5,000** or **\$10,000**. EOI is not required, so you may elect this coverage at any time. The table below shows the cost for each coverage amount and includes coverage for all eligible children. See definition of eligible child on page **5**.

Coverage option	Biweekly cost	Semi-monthly cost
\$2,500	\$0.42	\$0.45
\$5,000	\$0.83	\$0.90
\$10,000	\$1.66	\$1.80

#### **Optional Life Insurance for Your Spouse/Domestic Partner**

Age	Monthly rate per \$1,000 of coverage	
Under age 25	\$0.050	
25-29	\$0.060	
30-34	\$0.080	
35-39	\$0.100	
40-44	\$0.110	
45-49	\$0.150	
50-54	\$0.250	
55-59	\$0.460	
60-64	\$0.700	
65-69	\$1.360	
70+	\$2.200	

#### How to calculate your cost

To calculate the cost of coverage for your spouse or domestic partner, follow the steps shown above to calculate the cost using the monthly rate shown here, based on the age of your spouse or domestic partner.



# **Have Peace of Mind – Disability Insurance**



Hologic provides short- and long-term disability insurance through **Lincoln Financial**. Disability insurance provides a safety net for your paycheck and savings should you experience an illness, accident or injury incurred outside of work that prevents you from working.

#### **Short-Term Disability (STD) Insurance**

After seven days, the STD plan pays:

- 100% of your pre-disability earnings for weeks 2 through 8
- 60% of your pre-disability earnings for weeks 9 through 13





#### **DISABILITY BASICS**

- Pre-disability earnings for non-sales employees include weekly gross base pay only. Pre-disability earnings for sales employees include weekly gross pay plus commissions.
- You are considered disabled under the STD and LTD plans if you are unable to perform with reasonable continuity the material duties of your own occupation, as a result of physical disease, injury, pregnancy or mental disorder. You must also suffer a loss of at least 20% of earnings when working in your own or any other occupation.
- STD and LTD benefits may be reduced by other sources of income such as Social Security disability or retirement benefits, workers' compensation, state disability benefits and similar programs.

#### **Long-Term Disability (LTD) Insurance**

After 90 days of disability, the LTD plan pays:

• 60% of your pre-disability earnings up to a maximum monthly benefit of \$25,000





The cost of the LTD premium is added to your taxable income so any LTD benefits you receive are tax-free. Pre-existing condition limitations and other plan limits may apply.

Benefits are paid for up to 24 months if you are disabled and cannot perform the duties of your own occupation. After 24 months, benefits will continue to be paid only if you are unable to perform the duties of any gainful occupation for which you are reasonably qualified by education, training or experience.



# **Mishaps Happen – Accident Insurance**



Accident insurance from **Lincoln Financial** can help with out-of-pocket expenses if you or a loved one is injured in a covered accident. This coverage pays a cash payment directly to you to help pay for medical expenses, the mortgage, car payments or even utility bills. You decide how to use the funds.

Some examples of benefits you or your covered family members will receive include:

Accident results in:	Your cash benefit*		
Ambulance	\$300		
Concussion	\$150		
Dislocation	\$100 – \$2,625		
Emergency care	\$200		
Fracture	\$100 – \$3,500		
Hospital admission	\$1,250		
Laceration	\$35 – \$400		

<sup>\*</sup> See plan policy for limitations, exclusions and maximums.

The Child Sport Injury Benefit increases the payable injury benefit by 25% if a child age 18 years or younger is injured in a sanctioned school sport or a competitive sport

\$

You may purchase accident insurance for the following premiums:

Coverage Level	Biweekly cost	Semi-monthly cost
Employee Only	\$4.40	\$4.77
Employee and Spouse/Domestic Partner	\$7.20	\$7.80
Employee and Child(ren)	\$7.74	\$8.39
Employee and Family	\$10.51	\$11.39

You are eligible to enroll and make changes to this coverage for yourself and your dependents each Open Enrollment. You may also make changes to your enrollment within 31 days of a qualified change in family status such as a birth, marriage or establishment of domestic partnership.



# Help Along the Road to Recovery - Critical Illness Insurance



**Lincoln Financial's** critical illness coverage offers a flexible cash benefit for you or an enrolled family member if diagnosed with a covered illness or event, helping with potential financial difficulties.

Depending on the coverage you elect and who the coverage is for, the lump sum ranges from \$2,500 to \$20,000. There are different levels and percentages of payment, depending on the specific illness, including but not limited to:

If you or a family member has:	Covered at:*	
Advanced COPD	100%	
Cystic fibrosis	100%	
Heart attack	100%	
Invasive cancer	100%	
Noninvasive cancer	30%	
Traumatic brain injury	100%	
Type 1 diabetes	100%	
Vascular disease	25%	

You can enroll or change this coverage for yourself and dependents during Open Enrollment or within 31 days of a family status change like birth, marriage or establishment of domestic partnership.

# EARN UP TO \$600 WITH PROACTIVE HEALTH MAINTENANCE

Receive \$100 per enrolled family member (up to \$600) per 12-month period with the critical illness insurance plan when you and your covered family members complete a policy-covered health screening, such as:

- Electrocardiogram
- Mammogram
- Colonoscopy
- Pap smear

- Diabetes screening
- Plus more see the plan summary and critical illness health assessment benefit document

With \$100 for each enrolled member, **critical illness coverage may pay for itself!** This benefit is **in addition to** the **\$300 Preventive Care Incentive** available to you through the **Hologic Healthy Living program**.

You may purchase critical illness insurance for:

- Yourself in coverage amounts of \$10,000 or \$20,000
- Your spouse/domestic partner in coverage amounts of \$5,000 or \$10,000
- Your child(ren) in coverage amounts of \$2,500 or \$5,000

You may only elect critical illness insurance for your spouse and child(ren) when you choose coverage for yourself. These amounts may not exceed 50% of the employee coverage elected.

# Critical Illness Insurance for You and Your Spouse/Domestic Partner and Child(ren)

Age	Monthly rate per \$1,000 of coverage**	
17-24	\$0.316	
25-29	\$0.412	
30-34	\$0.493	
35-39	\$0.621	
40-44	\$0.887	
45-49	\$1.319	
50-54	\$1.834	
55-59	\$2.437	
60-64	\$3.416	
65-69	\$4.776	
70-99	\$4.776	

#### How to calculate your cost

Assume you are 40 years old and wish to purchase **\$10,000** of critical illness insurance for yourself.

- Monthly rate per \$1,000 of coverage is \$0.887
- \$10.000 ÷ \$1.000 = **\$10**
- \$10 x \$0.887 = **\$8.87/month** \$8.87 x 12 = \$106.44
- ÷ by 26 for biweekly
  - = \$4.09 biweekly
  - OR -
  - ÷ by 24 for semi-monthly
  - = \$4.44 semi-monthly

#### The rate/\$1,000 of coverage is \$0.472 for dependent child(ren):

Coverage option	Biweekly cost	Semi-monthly cost
\$2,500	\$0.54	\$0.59
\$5,000	\$1.09	\$1.18

<sup>\*</sup> See plan policy for limitations, exclusions and maximums.

<sup>\*\*</sup> Premium rates for critical illness insurance are determined using your age for your coverage and your spouse/domestic partner's age for their coverage.

## Flexible Financial Security - Hospital Indemnity



This coverage from **Lincoln Financial** will pay you a cash benefit when you or an enrolled family member are admitted or confined to a hospital. Use the benefit to pay for any out-of-pocket medical expenses, or daily living expenses such as rent, gas, groceries, utilities and other necessities.

- The cash benefit can range from \$50/day to \$2,000/day depending on the reason for admission or confinement.
- There are no pre-existing limitations, for example, if you or your spouse/ domestic partner are pregnant or undergoing cancer care prior to enrolling in the coverage, the plan will still pay you a cash benefit.
- Review the plan summary and cost of coverage for more information.

Some examples of benefits you or your covered family members will receive include:

Benefit	Limits	Your cash benefit*	
ADMISSION – accepted for inpatient services for a period of more than 20 hours			
Hospital**	2 days/year	\$1,000	
ICU**	1 day/year	\$2,000	
CONFINEMENT – assigned to a bed as a resident inpatient for a period of no less than 20 consecutive hours			
Daily hospital**	30 days/year	\$200	
Daily ICU**	15 days/year	\$400	
Newborn care	2 days/year	\$200	
Rehabilitation facility	30 days/year	\$50	
Substance use treatment	30 days/year	\$50	
Mental disorder treatment	30 days/year	\$50	

<sup>\*</sup> Benefits are paid on a calendar-year basis.

You may purchase hospital indemnity insurance for the following premiums:

Coverage Level	Biweekly cost	Semi-monthly cost
Employee Only	\$7.36	\$7.97
Employee and Spouse/Domestic Partner	\$15.69	\$17.00
Employee and Child(ren)	\$11.26	\$12.20
Employee and Family	\$20.42	\$22.13

You can enroll or change this coverage for yourself and dependents during Open Enrollment or within 31 days of a family status change like birth, marriage or establishment of domestic partnership.

# EARN CASH FOR PROACTIVE HEALTH MAINTENANCE

Receive up to \$100 per 12-month submission period for each enrolled member of your hospital indemnity insurance plan who completes a policy-covered wellness screening, exam or immunization. With over 50 screenings to choose from, these are just a few:

- Annual physical exam
- Eye exam
- Cholesterol screening
- Immunizations

Colonoscopy

Mammogram

See the plan summary and hospital indemnity health assessment benefit document for more information and a complete list.

This benefit is in addition to the \$300 Preventive Care Incentive available to you through the Hologic Healthy Living program.



<sup>\*\*</sup>NICU admission or confinement pays an additional benefit of 25%.

## Saving for the Future – 401(k) Plan



Hologic offers a 401(k) plan through **Fidelity Investments** for immediate tax savings and retirement planning, with eligibility starting immediately.\*

#### Plan highlights:

- **Pre-tax contributions** You can contribute between 1% and 80% of your eligible pay on a pre-tax basis and/or Roth 401(k) basis, up to the annual IRS dollar limit. For 2025, the IRS limit is \$23,500. You may change your elections at any time throughout the year.
- Roth contributions You can also contribute between 1% and 80% of your eligible pay on an after-tax basis up to the combined annual IRS dollar limit. Earnings on Roth contributions will be tax-free when distributed provided you have the Roth 401(k) account for five years or more and are at least age 59½.
- Catch-up contributions If you are age 50 to 59, or 64 or older during the 2025 tax year, you are eligible to save \$7,500 more in the plan as a catch-up contribution. Those between the ages of 60-63 in tax year 2025, are eligible to contribute up to \$11,250 in catch-up contribution(s).
- **Employer match** Hologic will match 100% of the first 3% you contribute and 50% of the next 2% you contribute. The Hologic Company match is funded each payroll and is 100% vested from day one.
- Match true-up The plan includes a year-end match "true-up" feature
  that enables you to receive the matching contribution in situations where
  you max out your contributions mid-year and miss receiving the match in
  subsequent payrolls.
- In-plan Roth conversion option Allows you to convert eligible account balances from pre-tax to a designated Roth account within your Hologic 401(k) plan. Tax implications will apply. Contact Fidelity for details.

- Investment options The plan offers you a variety of investment options that range from more conservative to more aggressive. You may also invest in a self-directed brokerage account with Fidelity for additional investment choices.
- **Rollovers** You may roll over funds from another qualified retirement account at any time.
- Loans/withdrawals You may borrow up to 50% of your vested account balance to obtain either a general loan or a primary residence home loan. Withdrawals are also permitted when you terminate your employment, retire, reach age 59½, become permanently disabled or have a severe financial hardship, as defined by the plan.
- **Auto increase** The plan offers an auto increase feature that will allow you to set up an automatic increase to your 401(k) annually each December.

For more information about the 401(k) plan, refer to the Summary Plan Description under the 401(k) page on **MyHologic**.

## **NEW HIRES AND THE 401(K)**

There are several features of the 401(k) new hires must keep in mind:

- **Auto-enroll** Hologic will automatically enroll you at a contribution rate of 5% of your pre-tax eligible earnings after 45 days of employment.
- Auto increase If you are auto-enrolled, you will also be enrolled in the Automatic Increase Program.
- Participation If you do not want to be auto-enrolled at a 5% pre-tax contribution, you must elect to contribute 0% or another amount before your 45th day of employment.
- Changing contributions You can change your contributions at any time by logging into Fidelity's NetBenefits.com.



<sup>\*</sup> Interns are eligible after 1,000 work hours and attaining age 21.

## Sharing Success – Employee Stock Purchase Plan (ESPP)



Hologic wants you to feel invested in its success by offering a discounted Employee Stock Purchase Plan (ESPP) through **Fidelity Investments**. Eligibility requires a regular schedule of 20+ hours per week.

#### Plan highlights:

- **Enrollment periods** You may enroll in the ESPP twice per year in June and December. Once you are enrolled, you remain enrolled in the plan and do not need to re-enroll unless you are changing your contribution amount.
- Offering periods There are two offering periods:
  - January 1 June 30
  - July 1 December 31

During these periods, your contribution amount is deducted per pay period on an after-tax basis and deposited into your ESPP account.

- **Contributions** You may contribute up to 10% of your base pay\* to the program through payroll deductions on an after-tax basis. Once the offering period begins you can no longer increase your percentage, but can reduce your selected contribution amount one time.
- Stock discount At the end of each offering period, your accumulated funds
  will be used to purchase Hologic stock on your behalf at a 15% discount. The
  discount is applied to the lesser of the closing price on the:
  - Day the plan begins (offering commencement date)
  - Purchase date (offering termination date) you may purchase up to 500 shares during each offering period, up to a maximum of \$25,000 in value per calendar year

For more information, refer to the **ESPP** page on **MyHologic**.

# **Build Financial Security – Fidelity Investments**



There are many ways to boost your financial wellness. **Fidelity Investments** is more than just our 401(k) plan provider. They offer an array of solutions along with their third-party providers, including:

Protection	Savings and Investing	Long-Term Debt	Budgeting	Personal Services	College
Identity protection	Short-term saving and investing	Student debt refinancing	Credit counseling	Online legal services	College savings
Emergency savings	Tax preparation	Mortgages	Debt management	Estate planning	Student loans

Find out more at **NetBenefits.com**.

Test preparation

Admission counseling





<sup>\*</sup> Base pay for the ESPP is regular straight-time earnings and, if applicable, commissions, but excluding payments for overtime, bonuses, reimbursements and any other special payments.

# Life...feed your mind, body, spirit

Our Better Life programs provide essential tools and resources to help you and your family thrive, ensuring a healthy work-life balance which is key to your overall happiness and satisfaction. Benefits from paid time off, higher educational support for your family members and round-the-clock assistance enhance your wellbeing at work and home.



## **Wellbeing and Family Resources**



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## Discover your Healthy - Personify Health and the Healthy Living Program



Hologic offers many games, challenges, resources, tools, tips and support to help you and your family achieve your unique health goals. With Personify Health and other partners, we've got what you need to join in and win with Healthy Living.

Participate in healthy activities to unlock new levels for a healthier, happier you, with the added bonus of cash rewards. Personify Health supports not just your physical fitness, but also your emotional, social and financial wellness. Visit **Holx.co/HealthyLiving** to learn more.

## Earn Rewards and the Ultimate Jackpot

**Boost your earning power with Personify Health during the wellness plan year (April 1 – March 31).** 



healthyliving

For all the lives you lead.

Play every day, rack up points and earn more cash Advance to Level 3 and unlock your premium credit

Complete your
Biometric Screening,
Health Check Survey
and Two Preventive
Activities



## Discover your Healthy – Personify Health and the Healthy Living Program, continued



## **How to Participate**

Log into **Login.PersonifyHealth.com** or use the app. Download it here.





## Activities = Points = \$\$\$

The more healthy activities you participate in, the more points you receive, the more levels you reach and the more rewards you earn. Your points reset at the beginning of each quarter.

Points help you earn up to \$400 in Rewards Cash and a \$300 medical plan premium credit.

And, you can earn an additional \$300 each year by completing:

- · Biometric Screening
- · Health Check Survey
- Two specific preventive activities

## **Everyone Can Earn Rewards!**

You can still participate in Personify Health activities and earn rewards even if you are not enrolled in a Hologic medical plan, you just won't be able to receive a medical plan premium credit.

-0	Win Big with Me!
1	

Let me, Logic, be your host as you work toward earning the ultimate jackpot of \$1,000. There's some information on this page, but follow me to the **Healthy Living** page on **MyHologic** to learn more ways to help you on your quest for healthy living.

Level	Points Earned	Rewards Cash*	Medical Plan Premium Credit**	Preventive Care Incentive		
1	2,000	\$25	N/A			
2	7,000	\$25	N/A	There are 3 milestones		
3	14,000	\$25	\$75	to earn this reward.		
4	21,000	\$25	N/A	Click here to learn more.		
Total	Per Quarter	\$100	\$75			
Tota	ıl Per Year	\$400	\$300	\$300		
Ultimate Jackpot = Up to \$1,000						

- \* Program rewards are taxable when earned (not redeemed). However, Hologic will pay the tax on recipients' behalf for Rewards Cash and prizes. This will be reflected in YTD totals under PersonifyAwd on your pay statements.
- \*\* Employees enrolled in Hologic's medical plan will receive the premium credit in the following plan year.



Join the Healthy Living community and check out **Your Wellness eGuide** to learn more.

Get connected and be part of the conversation with your **Healthy Living community**.



## Time to Recharge – Time Off



### **Vacation**

Hologic encourages work-life balance by offering vacation time to full- and part-time employees from the start of employment. If you work a standard 40-hour week, you'll accrue vacation each pay period, as detailed in the accompanying chart.\*

Annual Vacation Accrual**
Three weeks (4.62 hours per pay period)
Three weeks and one day (4.92)
Three weeks and two days (5.23)
Three weeks and three days (5.54)
Three weeks and four days (5.85)
Four weeks (6.154)
Four weeks and one day (6.46)
Four weeks and two days (6.77)
Four weeks and three days (7.08)
Four weeks and four days (7.39)
Five weeks (Maximum 7.69)

<sup>\*</sup> Employees on a Full Commission Sales Incentive Plan who do not receive a base salary are excluded from the Vacation Policy as they are eligible for discretionary time off. Please see the **Discretionary Time Off policy** on **MyHologic** for details.

#### Vacation carryover

#### Residents of Alaska/California/Colorado/Montana/Nebraska

If you reside in one of these states, you will be able to accrue no more than  $1^{1/2}$  times your annual accrual rate on a rolling basis, based on state law. Once you reach the maximum accrual limit at any time during the year, you will not accrue additional vacation time until you use vacation time. You will not receive retroactive credit for missed accruals because you were at the maximum

#### Residents of all other states

Up to 120 hours of vacation time can be carried over each fiscal year (October through September). Any amounts over 120 hours will be forfeited.

Refer to the Vacation policy on the Policies page of MyHologic for more details.

### PLANNING A VACATION? REMEMBER PERKSPOT

Hologic employees can access **PerkSpot** for exclusive discounts, special deals and access to preferred seating and tickets to top attractions, theme parks, shows, sporting events, movie tickets, hotels and much more.



### **CLICK IT!**

Click the colored and bold text in the eCatalog for detailed information on specific benefits.





<sup>\*\*</sup> These amounts will be prorated for employees who are regularly scheduled to work 20 – 39 hours a week.

## Time to Recharge – Time Off, continued



### **Sick Time**

Hologic provides seven days (56 hours) of paid sick time per fiscal year\* to all employees who are regularly scheduled to work at least 20\*\* hours per week.

Sick time may be used for your personal illness, medical emergency or disability. You may also use a portion of your time to attend to an illness of your child, spouse, domestic partner or parent or other reasons as allowed by state or local law.

#### Residents outside Alaska/California/Colorado/Montana/Nebraska

Three of these days may be used to conduct personal business.

- \* Prorated to date of hire within the fiscal year, but no less than 40 hours will apply.
- \*\* Prorated for those working less than 40 hours per week.

## SICK TIME CARRYOVER

You can carry over up to three days of unused time to the following fiscal year if you do not use all of your sick time by the end of the fiscal year. Any time in excess of three days will be forfeited.



## **Holidays**

Each calendar year Hologic observes 12 paid holidays, including nationally-observed holidays and one floating holiday allotted each January 1. To be eligible for a floating holiday, you must be regularly scheduled to work 20 or more hours.

#### **Volunteer Time Off**

Volunteer up to one day to enhance and serve the community where you live and work. If you are regularly scheduled to work at least 20 hours per week, you are granted one volunteer day each January 1. Take time to work with a cause you care about and not have to use your vacation time.

## IMPORTANT INFORMATION FOR HOLIDAYS AND VOLUNTEER TIME OFF

Employees with a hire date between January 1 – June 30 will receive the floating holiday and volunteer day for that calendar year. Employees with a hire date after July 1 will not be eligible to receive these days until the following calendar year.

#### Residents of Alaska/California/Colorado/Montana/Nebraska

Unused floating holidays and volunteer time carry over to the following calendar year and a balance of no more than two unused floating holidays and volunteer days may be maintained.

#### Residents of all other states

Any unused floating holiday and volunteer time will not carry over to the following calendar year.

## **Welcoming a New Addition – Parental Leave and Pay**



Hologic's generous **Parental Leave and Pay policy** enables you to take time away from work to care for a new child. Birth and non-birth parents may receive up to **16 weeks** (or more where required by state law)<sup>†</sup> of job-protected parental leave for the care of a newborn or a newly-adopted child. Birth and non-birth parents are eligible for **8 weeks** of parental pay at 100%. For birth parents, this is in addition to receiving short-term disability (STD) for weeks 2 through 8 at 100%.

	Birth Parent (1-16 weeks)														
	2			5	6			9	10	11	12	13	14	15	16
PTO* 100%						Parental Pay 100%									
Non-Birth Pare															
					No	n-Birth	n Parer	nt** (1-'	16 wee	ks)					
1	2	3	4	5	No 6				16 wee		12	13	14	15	16

<sup>\* 7-</sup>day elimination period for STD; PTO (paid time off) can be used.

## **Short-Term Disability (STD)**

See page 33 for more information on STD.

## **Hologic Parental Pay**

Birth and non-birth parents can get **8 weeks** of paid Parental Leave from Hologic, in addition to other disability or state family leave benefits. The leave:

- Is allowed once per rolling 12-month period
- Must be taken in at least 4-week increments

## **Parental Flexible Return to Work Policy**

For an easier transition after childbirth or adoption, Hologic offers eligible parents a chance to work reduced hours with full pay for the first **4 weeks** postleave, with a minimum of 20 hours per week required.

Check out the **Leave and Pay Policies** on the **Better Rewards Benefit** pages on **MyHologic** to learn how much time you can take off, how you will be paid and if your job is protected.

## Milk Stork – Support Service to Help you Thrive



Visit **MilkStork.com/Hologic** for more information and to enroll.



<sup>\*\*</sup> Also includes leave for adoption.

<sup>&</sup>lt;sup>†</sup> For more information on state leave laws such as state disability and/or state paid family leave, please visit the **Leave of Absence Process** page on **MyHologic**.

## **Be Tax Savvy – Dependent Care Flexible Spending Account (FSA)**



The Dependent Care FSA, administered through **HealthEquity**, allows you to pay for qualified expenses incurred for custodial dependents (children under age 13) or elder care expenses you incur while you and your spouse work or search for work.

Account Feature	Dependent Care FSA
Purpose	Pay for qualified dependent care expenses
Plan year pre-tax election*	Minimum amount: \$100  Maximum amount: \$5,000** (\$2,500 if married but filing separate tax returns)
Reimbursement	Complete a claim form and submit it along with your receipts via fax, mail or online at <b>HealthEquity.com</b> . A <b>2</b> ½ month grace period applies. All claims incurred by September 15, 2026 must be submitted for reimbursement within 90 days of the plan year end date (June 30) which is September 28, 2026. The plan does not allow for any unused funds to be rolled over. Unused funds will be forfeited at the end of the grace period.

For a list of qualified dependent care expenses, visit HealthEquity's website.

Under IRS guidelines, you can only be reimbursed for dependent care that has already taken place and up to the amount you have already contributed to your Dependent Care FSA. Remember to save your receipts, as they may be needed to satisfy IRS rules.

### **FSA Tools and Resources**

Visit **HealthEquity.com** for education and planning tools, such as:

- A calculator to help you estimate your dependent care expenses and tax savings
- A library to reference on FSAs
- Learning tools and helpful forms to assist you with your FSAs

For information on the Healthcare FSA, see page 26.





<sup>\*</sup> The annual contribution elected is divided evenly over 24 pay periods, skipping any 3rd pay period within a month.

<sup>\*\*</sup> Highly-compensated employees may be limited in how much they are allowed to elect or experience a reduction.

# Find your Balance – Lyra EAP (Employee Assistance Program)



**Lyra** offers work-life services to help you and your family balance some of life's challenges:

- Up to 16 no-cost counseling sessions with an elite therapist. Lyra's diverse
  range of providers specialize in working with adults, couples, families,
  adolescents and children. Access care through Lyra Mental Health Benefits.
- Legal services include a free 30-minute consultation with an attorney or mediator and access to 24-hour emergency support.
- **Financial services** include a free 30-minute consultation with a financial counselor and a free 30-minute consultation with a CPA.
- **Identity theft services** include a free 30-minute consultation with a fraud resolution specialist and a free identity emergency response kit.
- **Dependent care services** include resources and referrals for child, elder, and pet care and 24-hour online and phone support.

## **NAVIGATE WORK-LIFE CHALLENGES**

Experts beyond mental health are available to resolve emergencies, guide you through challenges and help you stay on top of your busy life.

#### Contact Lyra:

- Call 877.301.0911
- Visit Hologic.LyraHealth.com/Worklife
  - Use Company Code "LyraHologic" when accessing dependent care services

For those working fewer than 30 hours, contact ComPsych at **888.628.4824** or visit **GuidanceResources.com** (username:

LFGsupport; password: LFGsupport1).

## Care@Work by Care.com



**Care@Work by Care.com** is a no-cost premium membership that provides flexibility in providing care for those who matter the most.

Feel assured in your care decisions with:

- 5 back-up care days partially subsidized by Hologic, for when your regular care coverage falls through. Care is available at a center or in a home.
- Referrals for ongoing and short-term care for children, adults, seniors, pets and more.
- Access to senior care advisors for a personalized, caring approach to match your loved one with the appropriate care.

For more information, visit Hologic.Care.com.





## Sound Advice - MetLife Legal Plan



## Life's Extras - Additional Perks



For help with your legal needs, Hologic offers an affordable solution with the **MetLife Legal Plan**. For a small premium, you have access to more than 12,000 attorneys and can receive legal advice and services for a wide range of personal legal matters, including:

- Protection from fraud and identity theft
- Preparation of wills, trusts and powers of attorney
- Debt collection defense
- · Real estate matters
- · Civil litigation defense

During your consultation, your attorney will recommend a course of action. If additional assistance is needed, your attorney will fully represent you up to four hours in a legal situation. For more information, refer to the **MetLife Legal Plan Overview**.

You may enroll in this program upon becoming newly eligible for benefits or during Open Enrollment. Once you are enrolled in the plan, you may not waive out of coverage until the following Open Enrollment period.

Visit Info.LegalPlans.com for more information (Access code: 6091281). You may also call the MetLife Legal Plan Client Service Center at 800.821.6400 Monday through Friday from 8 a.m. to 7 p.m. ET.

- Adoption Reimbursement Policy and Surrogacy Reimbursement Policy –
   Up to \$10,000 net reimbursement each to eligible employees who are
   adopting a child or using surrogacy services. To be eligible, you must work
   at least 30 hours per week and have completed 90 days of continuous
   service when the expenses are incurred.
- Ameriprise Financial Workplace Financial Education Program You will
  have access to periodic financial seminars through the Workplace Financial
  Education Program, administered by Ameriprise Financial. Topics include
  assessing your family's insurance needs, managing cash flow, reducing debt,
  reviewing your need for a will or a trust, opening a 529 plan for your child's
  education and more. You will also be eligible for a complimentary consultation
  with an Ameriprise financial advisor.
- Partners in Giving Partner with Hologic to donate to your favorite non-profit organization.
- Scholarship Program Through the Hologic Scholarship Program, employees' children, stepchildren and grandchildren are eligible to apply for a scholarship grant to help fund undergraduate college, vocational and technical school programs. Scholarships are awarded through a competitive process overseen independently by an outside foundation. The application period takes place each January to March.

## **MetLife Legal Plan**

Plan	Employee Only
Biweekly Rate*	\$8.08
Semi-monthly Rate**	\$8.75

Biweekly means you are paid every other Friday.

<sup>\*\*</sup> Semi-monthly means you are paid on the 15th and the last day of the month.





# Career...realize your potential

At Hologic, you are the essence of what sets us apart and empowers us to fulfill The Science of Sure.

We recognize that the talent and dedication of our employees drive our organization forward, enabling us to promote healthier lives, consistently and everywhere. It's you who makes the difference.

Our commitment extends to fostering your career growth and development. Through our employee-led, community-supported approach, you are empowered to take ownership of your career path.

We are steadfast in our dedication to nurturing an engaged workforce, providing you with the essential growth tools and experiences necessary to achieve high performance. Your success is our priority, and we are here to support you every step of the way.



## Grow Your Career



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Tuition Reimbursement 49





## **Tools for Growth - Talent Investment**



## Don't Break the Bank – Tuition Reimbursement

**CLICK IT!** 



#### Your Hands are on the Wheel

At Hologic, every individual is in the driver's seat of their development. We believe that meaningful learning and growth happens through applied, continuous and contextualized experiences, exposure and education. We call this **Talent Investment**.

Our employee-led, community-supported approach to Talent Investment enables individuals to apply their unique talents, skills and knowledge to drive high performance. This requires an ongoing partnership between you, your manager and your team to identify and commit to opportunities and experiences that generate results.

To encourage your ongoing growth and learning, you have access to a robust tuition reimbursement program. Hologic is dedicated to helping working adults navigate the process of going back to school and completing programs successfully and efficiently.

Hologic will reimburse tuition and book costs of approved courses if a grade of C or better is maintained for undergraduate courses and B for graduate courses. Reimbursement is up to \$5,250 per calendar year.

Read the **Tuition Reimbursement Policy** for more information.

## Make an Investment in Yourself Today

Join an onsite or virtual workshop or visit the e-Learning course library by visiting **Hologic's Learning Edge** page on **MyHologic**.





## **Plan Resources**

To review benefit plan summaries and documents, visit the **Better Rewards Benefits** page of **MyHologic** to help you make confident enrollment decisions:

#### Medical plan cost comparison tool

#### Medical and Dental plans At-a-Glance

Plan	Vendor	Website	Phone Number
Learn about all the benefits Hologic has to offer you and your family	<b>Better Rewards Benefits</b> page on MyHologic	Holx.co/MyHologic.USbenefits	N/A
Benefits Self Service	Benefits Service Center	Live chat: HologicBenefits.com	844.319.3420
Medical (including telehealth coverage)	Blue Cross Blue Shield of MA	BlueCrossMA.org	800.358.2227
Back-up Care Support	Care@Work by Care.com	Hologic.Care.com	855.781.1303
Prescription Drug Program	CVS Caremark	Caremark.com/wps/portal	855.271.6598
Dental	Delta Dental of Massachusetts	DeltaDentalMA.com	800.872.0500
Vision	EyeMed	Not yet enrolled:  EyeMedVirtualBenefitFair.com  Code: QU54ZHBP  Already enrolled: EyeMed.com	Not yet enrolled: 866.804.0982 Already enrolled: 866.800.5457
Financial Health	Fidelity Investments Ameriprise Financial	NetBenefits.com Email: Tom.g.duval@ampf.com	800.890.4015 617.367.1006
Health Savings Account (HSA), Flexible Spending Accounts (FSAs)	HealthEquity	HealthEquity.com	877.694.3938
Personal Healthcare Assistant, Second Medical Opinions and Treatment and Condition Support	Included Health	IncludedHealth.com/Hologic	800.929.0926
Life, AD&D, Short- and Long-Term Disability, Accident, Critical Illness and Hospital Indemnity Insurance	Lincoln Financial	LincolnFinancial.com	800.423.2765
Employee Assistance Program (EAP)	Lyra	Hologic.LyraHealth.com/worklife (Company code: LyraHologic)	877.301.0911
Mental Health	Lyra Mental Health Benefits	Hologic.LyraHealth.com	877.301.0911
Personal Legal Matters	MetLife Legal Plan	Info.LegalPlans.com Access code: 6091281	800.821.6400
Support for Nursing Moms	Milk Stork	MilkStork.com/Hologic	510.356.0221
Chronic Disease Prevention and Management Program	Omada	OmadaHealth.com/Hologic	888.409.8687
Personify Health Member Services	Personify Health	Login.PersonifyHealth.com	888.671.9395
Fertility and Family Building	Progyny	N/A	866.946.0633
Peri/Menopause Support	Progyny	N/A	866.946.0633
Medicare Decision Support	SmartConnect	gps.SmartMatch.com/Hologic	833.859.1160
Medicare Decision Support		, 3,	

#### Disclaimer

This eGuide is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of the Hologic benefits program and does not constitute a contract. Consult your plan documents (Summary Plan Descriptions and Group Insurance Certificates) for a complete description of all governing contractual provisions, including benefits, exclusions, limitations and procedures relating to your plans. All of the terms and conditions of the plans are subject to applicable laws, regulations and policies. In case of a conflict between your plan documents and the information contained in this eGuide, the plan documents will always govern.

## WHEN TO MAKE CHANGES TO YOUR BENEFITS

Open Enrollment is held every spring for a benefits effective date of July 1. If you have a qualifying event throughout the year, you have 31 days from the event to enroll or make changes in benefits.

## **Have Benefit Questions?**

- Chat live with a Benefits Service Center Representative or make benefit changes in the Benefits Self Service Center at **HologicBenefits.com**
- Need to speak to someone on the phone? **844.319.3420**
- For plan details, plan documents, summaries and more, visit the Better Rewards Benefits page on MyHologic.

