

**HOLOGIC®**

# Benefits Open Enrollment

For Benefits Plan Year July 1, 2026 – June 30, 2027

2026 eGuide



**Total Rewards**

[CONTENTS](#)

# Our Commitment to You

## Welcome to Hologic's Benefits Open Enrollment.

As Hologic continues its evolution, supporting you and your family remains a top priority. Your current benefits will stay mostly the same, with a few updates starting July 1.

Medical plan premiums will experience a modest increase to keep up with rising healthcare costs. Premiums for dental, vision, life, and voluntary plans (hospital indemnity, accident, critical illness and legal) will not increase. The IRS has raised the contribution maximums for FSA and HSA plans, which may help you save more on a tax-advantaged basis.

Hologic continues to offer benefits that support your health, wellbeing and financial security. Please review this guide to understand your options and choose what's best for you and your family.

As we move forward, your wellbeing and peace of mind remain central to our decisions. Thank you for being an important part of Hologic.



### CLICK IT!

Click the **colored/bold text** for detailed information on specific benefits.

# Our Commitment to You



## INSIDE

Benefit Updates	3
Choose Well	4
Who Is Eligible?	5
Enroll Today	6
Health...be at your best	7
Future...plan for a sure tomorrow	15
Life...feed your mind, body, spirit	18
Compensation...earn while innovating	20
Additional Benefits	21
ID Cards	22
Plan Resources	23

**It's Open Enrollment: May 13 – May 29**  
For the Benefits Plan Year July 1, 2026 – June 30, 2027

At Hologic, we believe living better starts right here — with you. Our Total Rewards program is built to help you feel your best, plan for the future, keep balance in your life and celebrate all the ways you make an impact.

Open Enrollment is the time to review, change or update your benefits. It's important to revisit current benefits and discover new ones, even if you're not making changes. See [page 4](#) for a list of benefits you may want to spend some time thinking about before the enrollment deadline.

This Benefits Open Enrollment eGuide highlights available benefit plans and key updates effective July 1, including how to enroll using **Benefits Self Service** at [HologicBenefits.com](https://HologicBenefits.com) (see [page 6](#)).

## DON'T MISS THE DEADLINE!

**Enroll by May 29**

After that, your next opportunity to make changes to your benefits will be during the next Open Enrollment period or within 31 days of a “qualifying life event,” such as a marriage, divorce or the birth or adoption of your child(ren).



# Benefit Updates Effective July 1, 2026

## Blue Cross Blue Shield of MA (BCBSMA) Medical Plans

All three PPO medical plans will continue to be offered through BCBSMA, with no changes to plan benefits. If you are not making changes to your medical enrollment, your current elections will automatically carry over to the new plan year; you do not need to re-enroll. Please note that all medical plans will have a modest increase in premiums as displayed below.

### Premiums Each Pay Period Effective July 1, 2026

	CDHP with HSA (9% increase)	PPO Plan (9% increase)	PPO Plus Plan (3% increase)
<b>Biweekly Rate<sup>1</sup> (26 pay periods)</b>			
<b>Employee Only</b>	\$46.96	\$66.39	\$140.46
<b>Employee + 1</b>	\$110.68	\$151.03	\$289.17
<b>Family</b>	\$166.02	\$226.55	\$433.76
<b>Semi-monthly Rate<sup>2</sup> (24 pay periods)</b>			
<b>Employee Only</b>	\$50.87	\$71.92	\$152.16
<b>Employee + 1</b>	\$119.91	\$163.62	\$313.27
<b>Family</b>	\$179.86	\$245.43	\$469.91

<sup>1</sup> Biweekly means you are paid every other Friday.

<sup>2</sup> Semi-monthly means you are paid on the 15th and the last day of the month.

## CVS Caremark

Our prescription formulary (drug list) is moving to the CVS Caremark Advanced Control Formulary, which focuses on effective, lower-cost drugs. Some medications that were covered before may not be covered effective July 1, 2026.

Most members won't be affected. If your medication is changing, CVS Caremark will contact you with options.

Your pharmacy network and cost-sharing is not changing for the 2026-2027 plan year. For questions, contact CVS Caremark using the information on your ID card.

## Re-Enroll in the Tax Advantaged Programs Each Year

To take advantage of tax savings with the HSA or either FSA plan, **you must re-enroll during this Open Enrollment period.**

### Health Savings Account (HSA)

If you enroll in the Consumer Driven Health Plan (CDHP), you can contribute to an HSA.

- Increased IRS maximum:
  - » \$4,400 (employee only)
  - » \$8,750 (employee + 1 or family)
- Hologic will continue to contribute:
  - » \$700 (employee only)
  - » \$1,400 (employee + 1 or family)

### Healthcare Flexible Spending Account (HCFSA)

If you enroll in the PPO or PPO Plus medical plan, you can contribute to this FSA.

- Increased IRS maximum: \$3,400
- Hologic does not contribute to the FSA

**Important:** Switching from the Healthcare FSA to the CDHP with HSA for July 1? You must use your FSA funds by June 30.

### Dependent Care Flexible Spending Account (DCFSA)

- Increased IRS maximum:
  - » \$7,500 per household
  - » \$3,750 (for married filing separately)

## Good News!

If you don't make any changes, your enrollment in these plans will automatically continue into the new plan year. You do not need to re-enroll, and there will be no changes to your premiums, deductibles, copays, or to the plans themselves for these benefits:

- Dental
- Vision
- Optional Life
- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance
- Legal Plan

Information on these benefits and more start on **page 7.**



# Choose Well

During Open Enrollment, you can elect or make changes to the following benefits:

- Medical Coverage
- Dental Coverage
- Vision Coverage
- Flexible Spending Accounts (FSAs)
- Health Savings Account (HSA)
- Optional Life Insurance\*
- Accident Insurance
- Critical Illness Insurance
- Hospital Indemnity Insurance
- Legal Plan

\*Evidence of Insurability may be required.

Most current plan choices will carry over, however you must actively (re)enroll in FSAs and the HSA (when enrolled in the CDHP with HSA Plan) for the new year.

## CLICK IT!

Click the **colored/bold text** for detailed information on specific benefits.



## Need Help with Your Decisions?

Find benefit program, plan, policy details and decision support tools available on the **Benefits Open Enrollment site** at [BenefitsOpenEnrollment.Hologic.com](https://BenefitsOpenEnrollment.Hologic.com) to learn about plan offerings. You can also click the hyperlinks below and throughout this document.

- [Find information on what's new July 1](#)
- [Read the Benefits eCatalog](#)
- [Review the cost of coverage](#)
- [Discover plan resources](#)
- [Use the decision support tools](#)
- [Register for a Benefit Information Session](#)
- [Learn how to enroll or make changes](#)



## Take Action

Take the time to review your options. It will help you make informed decisions about what's best for you and your family.

- 1** **READ** this **Benefits Open Enrollment eGuide** and the **2026/2027 Benefits eCatalog** to learn about your options.
- 2** **USE** [BenefitsOpenEnrollment.Hologic.com](https://BenefitsOpenEnrollment.Hologic.com) to help with your decisions.
- 3** **ENROLL** online using **Benefits Self Service** at [HologicBenefits.com](https://HologicBenefits.com) before May 29.

# Who Is Eligible?

## Employees

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 eGuide.
- 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 also eligible for a prorated allotment of sick time.
- **Scheduled to work between 20 and 30 hours per week**, you are eligible for prorated vacation and sick time and the Employee Assistance Program.

**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.

## Adding Dependents?

- You must provide a Social Security number and documentation (such as a birth or marriage certificate or tax returns) to verify your newly added dependents' eligibility by May 29, 2026. Otherwise, your coverage for any newly added dependent will not be effective as of July 1, 2026.
- You will receive additional information and instructions on how to submit this documentation when you add your dependent through **Benefits Self Service**.
- A list of acceptable documentation to verify **dependent eligibility** is available on **MyHologic**.

## Important Note

This is not a full description of the eligibility rules and each of the benefit plans may have variations from this general description. For a detailed explanation of eligibility, please refer to the applicable plan document and Wrap Plan Document found on the **Total Rewards Benefits** page on **MyHologic**.

## Dependents

You may enroll your dependents in certain plans. Eligible dependents include:

- Your legal spouse
- Your domestic partner (same sex or opposite sex) for whom you can provide proof of shared residency and financial interdependence (such as a joint lease or mortgage)
- Dependent children are covered up to the end of the month they attain age 26, regardless of their marital status, residence or eligibility for coverage elsewhere

More information about dependent eligibility is available on the **Total Rewards Benefits** page on **MyHologic**.







# Enroll Today

To make benefit changes or enroll, log on to **Benefits Self Service** at [HologicBenefits.com](https://HologicBenefits.com) from **May 13 – May 29**, or access the **MyChoice Mobile App** from your mobile device.

## This is Your Chance...

Take the time to reflect on your needs. For most benefits, once Open Enrollment closes, your only opportunity to make changes during the plan year is within 31 days of a **qualifying life event**, such as a marriage, divorce or the birth or adoption of your child(ren). More information about qualifying life events can be found on the **Total Rewards Benefits** page on **MyHologic**.

## Benefits Self Service: Our Enrollment System

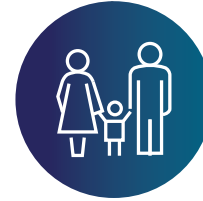
1		Log on to <b>Benefits Self Service</b> at <a href="https://HologicBenefits.com">HologicBenefits.com</a> from May 13 – May 29. If this is the first time you are accessing this site, register with your Social Security number, date of birth and the Company key of <b>“hologic”</b> .
2		You may also make enrollment updates using the <b>MyChoice Mobile App</b> after retrieving an access code by logging into your account at <a href="https://HologicBenefits.com">HologicBenefits.com</a> . You can easily find the app on your Hologic smartphone or tablet home screen.
3		Once you are logged into the system, follow the onscreen instructions to complete your enrollment.
4		A printable PDF <b>Benefit Confirmation Statement</b> will be posted to your <b>Personal Documents</b> on or around June 12, 2026 after you confirm your elections.

## Benefits Service Center



### Enrollment guidance

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



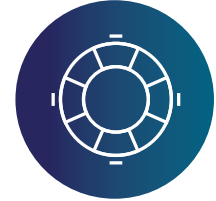
### Eligibility advisement

- 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](https://HologicBenefits.com)** / Monday through Friday 8:30 a.m. to 7:30 p.m. ET



## Message Alert!

Check your personal Message Center on your home page for important alerts. Watch for an email notification from [Messenger@HologicBenefitSelfService.com](mailto:Messenger@HologicBenefitSelfService.com).

## In Good Health – Medical

You have the choice of three PPO medical plans through **Blue Cross Blue Shield of MA (BCBSMA)**:

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

It's important to understand the terminology. [Click here](#) to view page 14 in the **2026/2027 Benefits eCatalog** to learn what these terms mean: deductible, copay, coinsurance, out-of-pocket maximum, premium and more.

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

### Need More Information About the Hologic Medical Plans?

Click on the links below:

- [Summary of Benefits and Coverage \(SBCs\)](#)
- [2026/2027 Benefits eCatalog](#)
- [Your Guide to the CDHP with HSA](#)



### Individual Mandate for Health Coverage

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

### Find a BCBSMA Medical Provider

#### It's Your Choice

All three medical plans provide access to the same PPO network saving you out-of-pocket money over a non-network provider.

1. Visit [provider.bcbs.com](https://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 **GA, NH** or **WI** must now use the BCBS **Open Access Network** to find in-network providers.





**CLICK IT!**  
Click the **colored/bold text** for detailed information on specific benefits.

## Medical Plans At-a-Glance

	CDHP with HSA	PPO Plan	PPO Plus Plan
	In-Network You Pay	In-Network You Pay	In-Network You Pay
<b>Plan year deductible</b>	\$2,000 per employee only <sup>1</sup> \$4,000 per employee + 1 or family <sup>1</sup>	\$1,500 per person \$3,000 per employee + 1 or family <sup>2</sup>	\$1,000 per person \$2,000 per employee + 1 or family <sup>2</sup>
<b>Plan year out-of-pocket maximum</b>	\$4,000 per employee only <sup>3</sup> \$8,000 per employee + 1 or family <sup>3</sup>	\$4,000 per person \$8,000 per employee + 1 or family <sup>4</sup>	\$3,000 per person \$6,000 per employee + 1 or family <sup>4</sup>
<b>Eligibility for tax-savings account</b>	Health Savings Account (HSA) (see <b>CDHP Guide for details</b> )	Healthcare Flexible Spending Account (FSA) (see limits on <b>page 13</b> )	
<b>Hologic annual contribution to HSA</b>	\$700 per employee only \$1,400 per employee + 1 or family Prorated and funded per pay period	N/A	N/A
<b>Preventive visits</b>	No cost	No cost	No cost
<b>Telehealth visits</b>	No cost <sup>5</sup>	No cost	No cost
<b>Primary care office visit</b>	20% <sup>5</sup>	\$30 copay <sup>5</sup>	\$25 copay <sup>5</sup>
<b>Other covered providers (specialists) office visit</b>	20% <sup>5</sup>	\$50 copay <sup>5</sup>	\$40 copay <sup>5</sup>
<b>Diagnostic X-rays and lab tests</b> (MRIs, CT scans, PET scans, nuclear cardiac imaging)	20% <sup>5</sup>	20% <sup>5</sup>	10% <sup>5</sup>
<b>Breast health imaging</b> (Ultrasounds, MRIs, CT scans, PET scans)	No cost <sup>5</sup>	No cost	No cost
<b>Fertility and family building benefits</b>	3 Smart Cycles provided by Progyny. See <b>page 14</b> for details. BCBS Medical Plan cost share applies.		
<b>Peri/menopause support</b>	Women: Get Progyny expert help for symptoms like hot flashes, weight gain, brain fog, aches, hormone changes and more. BCBS Medical Plan cost share applies.		
<b>Inpatient hospitalization</b>	20% <sup>5</sup>	20% <sup>5</sup>	10% <sup>5</sup>
<b>Chiropractic/Acupuncture care</b> (90 visits/20 visits per calendar year)	20% <sup>5</sup>	\$50 copay <sup>5</sup>	\$40 copay <sup>5</sup>
<b>Emergency room</b>	20% <sup>5</sup>	\$150 <sup>5</sup>	\$150 <sup>5</sup>
<b>Outpatient mental health/substance use treatment</b>	20% <sup>5</sup>	\$30 copay <sup>5</sup>	\$25 copay <sup>5</sup>
<b>Prescription drug</b>	See <b>page 9</b>	See <b>page 9</b>	See <b>page 9</b>

<sup>1</sup> CDHP with HSA: The entire deductible must be satisfied before benefits are paid.

<sup>2</sup> PPO and PPO Plus plans: 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.

<sup>3</sup> 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.

## Employee Premiums

Rates shown are effective July 1, 2026 – June 30, 2027

	CDHP with HSA	PPO Plan	PPO Plus Plan
<b>Biweekly Rate<sup>1</sup> (26 pay periods)</b>			
<b>Employee Only</b>	\$46.96	\$66.39	\$140.46
<b>Employee + 1</b>	\$110.68	\$151.03	\$289.17
<b>Family</b>	\$166.02	\$226.55	\$433.76
<b>Semi-monthly Rate<sup>2</sup> (24 pay periods)</b>			
<b>Employee Only</b>	\$50.87	\$71.92	\$152.16
<b>Employee + 1</b>	\$119.91	\$163.62	\$313.27
<b>Family</b>	\$179.86	\$245.43	\$469.91

<sup>1</sup> Biweekly means you are paid every other Friday.

<sup>2</sup> Semi-monthly means you are paid on the 15th and the last day of the month.

### Medical Plan Premium Credit



Participants who have earned a medical plan premium credit by participating in the Hologic Healthy Living wellness program through Personify Health from April 1, 2025 – March 31, 2026 will see their premium reduction effective July 1, 2026!

Be sure to get started on next year's \$300 medical plan premium credit today at **Login.PersonifyHealth.com**. Review the **Wellness Guide** for more information.

<sup>4</sup> PPO and PPO Plus plans: 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.



# Health...be at your best

## Feel Better – Prescription Drugs

All three medical plans include retail and mail order prescription drug coverage through **CVS Caremark**. View the [Summary of RX Benefits](#) for details. To find network pharmacies in your area, go to [Caremark's Pharmacy locator](#) page or call a Customer Care representative toll-free at **855.271.6598**.

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

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

<sup>5</sup> 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 towards deductible but not out-of-pocket maximum.



### PrudentRx

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





## Virtual Care from Anywhere – When Enrolled in Hologic’s Medical Plan

Eliminate the wait times found at traditional appointments with these solutions that increase the flexibility and convenience of access to the care you want and need. When you are enrolled in Hologic’s medical plan, you have access to these programs which may be subject to deductibles, copays and/or coinsurance.

### 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.

### Virtual Primary Care

BCBSMA members have access to **virtual primary care** which 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.

### Peri/Menopause Support

Comprehensive benefits are provided to support the many transitions in a woman’s life. 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 from anywhere you are 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 Pulse\* 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 a pod trainer.

\* Not available in Puerto Rico.





## Something to Smile About – Dental

You may choose from two dental plans offered through **Delta Dental of Massachusetts**: the Core plan or the Enhanced plan with orthodontia.

Both comprehensive plans have coverage for exams, cleanings, fillings, crowns, implants, bone grafts, periodontal services and coverage of white fillings. More information can be found on the **Dental** page on **MyHologic**.

### Dental Plans At-a-Glance

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

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

### Get the Max from Your Coverage

- Roll over a portion of your unused dental benefits from one plan year to the next with the **Rollover Max feature**.
- Preventive care services do not count toward the plan year maximum so you have more money available for bigger treatments like fillings or crowns.
- Routine dental exams bring you one step closer to the **\$300 Preventive Care Incentive**. Find out more on the **Healthy Living** page on **MyHologic**.

### Employee Premiums

Rates shown are effective July 1, 2026 – June 30, 2027

	Core Plan	Enhanced Plan
Biweekly Rate <sup>2</sup> (26 pay periods)		
<b>Employee Only</b>	\$3.95	\$9.20
<b>Employee + 1</b>	\$7.53	\$17.57
<b>Family</b>	\$11.05	\$25.77
Semi-monthly Rate <sup>3</sup> (24 pay periods)		
<b>Employee Only</b>	\$4.28	\$9.97
<b>Employee + 1</b>	\$8.16	\$19.04
<b>Family</b>	\$11.98	\$27.92

<sup>1</sup> After dental plan year deductible is met.

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

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

### 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 maximum benefit of the plan the child is enrolled in.





## CLICK IT!

Click the **colored/bold text** for detailed information on specific benefits.

## Seeing Brighter – Vision

All benefit-eligible employees can enroll in the standalone vision coverage with **EyeMed** even if not on the medical plan. Brighten your view with routine exams, lenses, frames, contact lenses and even prescription sunglasses.

Save money by using an in-network or PLUS Provider. Visit the **EyeMed Virtual Benefit Fair** to learn about this new coverage and locate a provider.

Code: **NH51XKKE**

Don't miss out – make sure to sign up to secure your vision coverage!

### 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
<b>Eye exam</b>	\$0	Up to \$57
<b>Frames</b>	Covered up to \$250 <sup>1</sup> , then 20% discount	Up to \$200
Lenses (Choose either Eyeglass Lenses OR Contact Lenses)		
Eyeglass Lenses		
<b>Single, bifocal, trifocal, lenticular, standard progressive</b>	\$0	Between \$47 and \$113, depending on the lens type
<b>Progressive premium tier 1-4</b>	Covered between \$85-\$215	Up to \$95
Contact Lenses		
<b>Conventional</b>	Covered up to \$250, then 15% discount	Up to \$200
<b>Disposable</b>	Covered up to \$250	Up to \$200
<b>Medically necessary</b>	\$0	Up to \$300

### 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 some non-prescription sunglasses
- Hearing aids from Amplifon Network
- Lasik or PRK from U.S. Laser Network

### Employee Premiums

Rates shown are effective July 1, 2026 – June 30, 2027

Biweekly Rate <sup>2</sup> (26 pay periods)	
<b>Employee Only</b>	\$5.42
<b>Employee + 1</b>	\$10.30
<b>Family</b>	\$15.12
Semi-monthly Rate <sup>3</sup> (24 pay periods)	
<b>Employee Only</b>	\$5.87
<b>Employee + 1</b>	\$11.16
<b>Family</b>	\$16.38

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

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

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

### 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!





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

The Healthcare FSA, administered through **HealthEquity**, offers a way to save money and pay for healthcare expenses on a tax-free basis. Set aside pre-tax dollars from your paycheck and reimburse yourself for qualified expenses.

Account Feature	Healthcare FSA
<b>Goal</b>	Pay for qualified healthcare expenses for yourself and eligible family members not already reimbursable by a medical or dental plan
<b>Plan year pre-tax election</b>	Minimum amount: \$100 Maximum amount: \$3,400
<b>Qualified healthcare expenses, such as</b>	<ul style="list-style-type: none"> <li>• Medical, prescription and dental out-of-pocket expenses</li> <li>• Glasses and contact lenses not already paid for by the vision plan, as well as LASIK surgery</li> <li>• And more</li> </ul>

### HSAs and FSAs Don't Mix

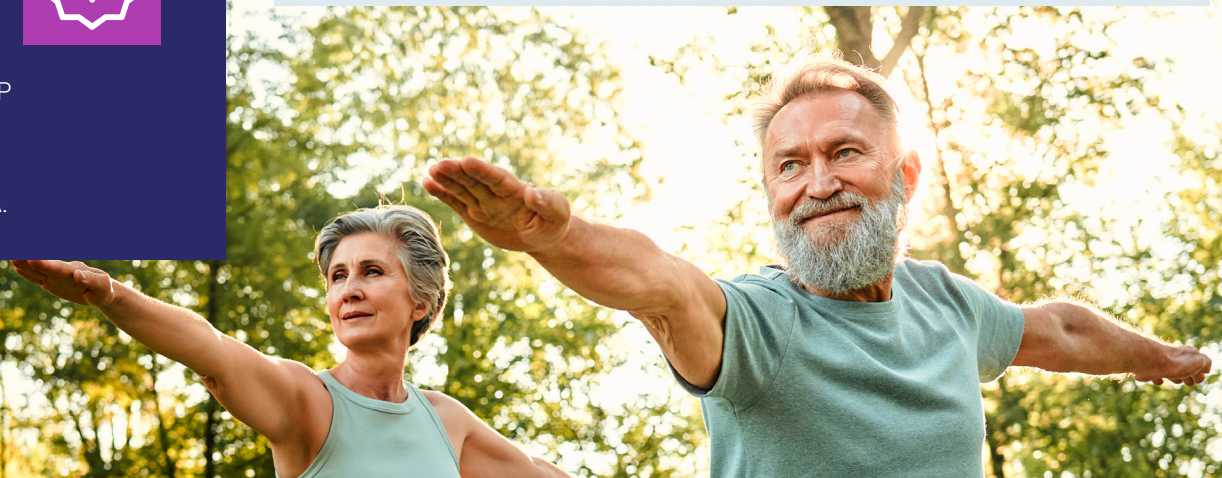
You cannot be enrolled in the HSA and Healthcare FSA at the same time. If you are currently enrolled in the Healthcare FSA and are considering enrolling in the CDHP with HSA, you will need to use your entire FSA balance by June 30, 2026. The IRS does not allow contributions into an HSA while funds are available in a Healthcare FSA.



### Important Rules

- You must enroll in the Healthcare FSA each year if you wish to participate; **elections do not carry forward.**
- **Plan Carefully!** The plan does include a grace period. A grace period is an extended period of coverage following the plan year end (June 30) that allows you extra time to incur expenses to use your remaining FSA funds. The grace period is 2½ months from June 30, which is September 15 each year. Claims submissions are due within 90 days of the plan year end, which is September 28.
- **Use It or Lose It!** Your FSA funds must be used and submitted per the grace period schedule. Any unused funds beyond the grace period deadline will be forfeited.
- You may not participate in the Healthcare FSA if you enroll in the Consumer Driven Health Plan (CDHP) with HSA.

For a list of IRS-qualified expenses and planning tools, visit [HealthEquity](#).





## Fertility and Family Support – Progyny

Your fertility and family building benefits are offered through **Progyny** (when enrolled in Hologic's BCBSMA plan). Progyny provides superior clinical outcomes, flexible treatment plans and exceptional member experiences.

Benefits include:

- 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 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:

- Genetic testing, including PGT-A, PGT-M/PGT-SR
- 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 Progyny Patient Care Advocate at **866.946.0633** to learn more and activate your benefit.





## Value to You – Basic Life and AD&D Insurance

Basic life insurance provides valuable financial security in the event of your death.

- **All full-time employees**, excluding Full Commission Sales plan eligible employees, receive Company-paid basic life and AD&D insurance equal to two times your base annual salary up to \$500,000.
- **Full Commission Sales** plan eligible employees will receive Company-paid basic life and AD&D insurance at a flat benefit of \$175,000.

Basic life and AD&D insurance is **paid for by Hologic** and administered by **Lincoln Financial**.



## Protect Your Income – Optional Life Insurance

In addition to basic life and AD&D coverage, you may purchase optional life insurance for yourself and/or dependents through **Lincoln Financial**.

Review the **plan summary** and the **cost of coverage** on the **Benefits Open Enrollment site** for more information.

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

\* Optional life insurance for yourself also includes AD&D coverage at the same coverage level.

### Check Your Beneficiary Information

If you do not have a beneficiary for your life insurance plans, you will be required to assign a beneficiary(ies) within **Benefits Self Service**. You can change your beneficiary information at any time.



## Peace of Mind – Disability Insurance

Hologic pays the full cost to provide you with short- and long-term disability coverage through Lincoln Financial.

	Short-term disability	Long-term disability
<b>Waiting Period</b>	7 days	90 days
<b>Benefit</b>	<p><b>Weeks 2-8:</b> 100% of your pre-disability earnings*</p> <p><b>Weeks 9-13:</b> 60% of your pre-disability earnings*</p>	<p>60% of pre-disability earnings* up to a maximum monthly benefit of \$25,000</p> <p>Benefits are payable 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.</p>

\* 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.

### Thinking About Increasing Your Life Insurance?

You may apply for coverage any time throughout the year, including during Open Enrollment. 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.





**CLICK IT!**

Click the **colored/bold text** for detailed information on specific benefits.



## Mishaps Happen – Accident Insurance

Accident insurance from **Lincoln Financial** can help with out-of-pocket expenses if you or an enrolled dependent 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:

- Ambulance transportation
- Emergency care
- Concussion
- And more

Review the **plan summary** and the **cost of coverage** on the **Benefits Open Enrollment site** for more information.



## Help Along the Road to Recovery – Critical Illness Insurance

No one likes to think about it, but a critical illness can occur at any time. Financial hardships can come along with these illnesses too. This coverage from **Lincoln Financial** provides a cash benefit to use however you want if you or a covered family member is diagnosed with a covered illness or event such as:

- Heart attack
- Invasive cancer
- Advanced COPD
- Vascular disease
- Childhood conditions
- And more

Depending on the coverage you elect and who the coverage is for, the lump sum ranges from \$2,500 to \$20,000.

Review the **plan summary** and the **cost of coverage** on the **Benefits Open Enrollment site** for more information.

### Enrollment Opportunity is Now!

If you are already enrolled in the accident or critical illness plans, you do not need to re-enroll to continue coverage. However, if you want to enroll for the first time in either plan, Open Enrollment is your only opportunity during the year.



### 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
- Stress test
- Mammogram
- Colonoscopy
- Pap smear
- Diabetes screening
- And other policy-qualified services

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





## Flexible Financial Security – Hospital Indemnity Insurance

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.

Receive benefits for admissions and confinements associated with:

- Hospital
- Newborn
- ICU/NICU
- Rehabilitation facility
- Substance use treatment
- Mental disorder treatment

Review the [plan summary](#) and [cost of coverage](#) on the **Benefits Open Enrollment site** for more information.

### Earn Cash With Proactive Health Maintenance

Receive **\$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 to choose from, these are just a few examples:

- Annual physical exam
- Cholesterol screening
- Colonoscopy
- Eye exam
- Immunizations
- 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](#).

### Enrollment Opportunity is Now!

If you are already enrolled in the hospital indemnity plan, you do not need to re-enroll to continue coverage. However, if you want to enroll for the first time, Open Enrollment is your only opportunity during the year.





## Sound Advice – MetLife Legal Plan

**MetLife Legal Plan** offers an affordable solution to help with your personal legal needs, including:

- Document preparation
- Powers of attorney
- Trusts
- Real estate matters
- Family law
- Financial matters
- Access to LifeStages Identity Management Services – fraud and identity protection
- Up to four hours for an attorney's consultative services for non-covered matters

The plan is available at the same low rate of \$8.08 biweekly or \$8.75 semi-monthly. For details, visit [Info.LegalPlans.com](https://www.info.legalplans.com) and enter access code **6091281**.



### Enrollment Opportunity is Now!

If you are already enrolled in this legal plan, you do not need to re-enroll to continue coverage. However, if you want to waive or enroll for the first time, Open Enrollment is your only opportunity during the year.





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

The Dependent Care FSA, administered through **HealthEquity**, offers a tax-favorable way to save money on qualified dependent care expenses. Set aside pre-tax dollars from your paycheck and reimburse yourself for qualified expenses.

Account Feature	Dependent Care FSA <sup>1, 2</sup>
<b>Purpose</b>	Pay for qualified dependent care expenses so you and, if you are married, your spouse can work
<b>Plan year pre-tax election</b>	Minimum amount: \$100 Maximum amount: \$7,500 <sup>3</sup> (\$3,750 if married and filing separate tax returns)
<b>Qualified expenses</b>	<ul style="list-style-type: none"><li>• Child and elder care provided in your home</li><li>• Child and elder care provided in an approved day care center</li><li>• Before- and after-school programs</li><li>• Day camp, but not overnight camp</li></ul>

<sup>1</sup> All dependent care providers must have a Social Security number or tax identification number.

<sup>2</sup> This account may be used for your dependent child(ren) under the age of 13 and your spouse or a person who is physically or mentally unable to care for him or herself, including parents or parent-in-laws, that you can claim as a dependent.

<sup>3</sup> Highly-compensated employees may be limited in how much they are allowed to elect or experience a reduction in contribution amount.

### Important Rules

- You must enroll in the FSA each year if you wish to participate; **elections do not carry forward.**
- **Plan Carefully!** The plan does include a grace period. A grace period is an extended period of coverage following the plan year end (June 30) that allows you extra time to incur expenses to use your remaining FSA funds. The grace period is 2½ months from June 30, which is September 15 each year. Claims submissions are due within 90 days of the plan year end, which is September 28.
- **Use It or Lose It!** Your FSA funds must be used and submitted per the grace period schedule. Any unused funds beyond the grace period deadline will be forfeited.
- A change in dependent care provider costs is considered a qualifying life event. You have the opportunity to make benefit changes within 31 days of a qualifying life event.

For a list of qualified expenses and planning tools, visit [HealthEquity](#).





## Financial Success – Compensation Strategy

Hologic believes in providing competitive compensation that aligns with the innovations you bring to women's health. Our compensation program is based on the below three principles.

### Pay for Performance

Hologic rewards high performance and innovation at every level for achieving both short- and long-term performance objectives.

### Competitive Pay & Benefits

We want to help you achieve financial success and help create future wealth. This is delivered through competitive pay across all elements and a diverse pay package via fixed and variable compensation.

### Fair Pay

Providing unbiased access to pay is integral to Hologic's compensation strategy. We are committed to fair pay based on each person's skills, experience, talents and performance, for both new hires and current employees.



## Extra Rewards – Performance Bonus Plan

The bonus structure is based on two factors:

- 1 Company Performance**  
The annual bonus pool is funded based on the company's performance against financial metrics. Depending on the results, the pool may be funded above or below 100%. If the company does not meet the minimum threshold financial goals, the bonus pool will not be funded.
- 2 Individual Performance**  
Your individual bonus payout is directly influenced by your annual performance, contributions and overall impact.



# Additional Benefits...for Added Protection, Value and Convenience



**CLICK IT!**

Click the **colored/bold text** for detailed information on specific benefits.

Hologic offers you a number of additional benefits to help you achieve a healthy work-life balance. Find even more information on each of these benefits by clicking on the benefit name.

## Health...be at your best



### **Included Health Expert Medical Opinions and Support**

This benefit 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.

### **Lyra Mental Health Benefit**

With this go-to for evidence-based mental healthcare, receive mental health services including 1-on-1 coaching or therapy sessions with a mental health provider, or utilize the self help guides and programs.

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

Access ongoing support that combines the latest digital technology (smart scale glucose monitoring and blood pressure cuff) and personalized approach for those that are at risk for certain chronic diseases such as type 2 diabetes, hypertension or heart disease.

### **SmartConnect Medicare Support**

Receive guidance and support when considering Medicare options as you become eligible. Whether you are still working or are starting to transition into retirement.

**These four benefits are at no cost and do not require medical plan enrollment.**

## Future...plan for a sure tomorrow



### **401(k) Plan**

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.

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



### **Adoption or Surrogacy Reimbursement**

Reimbursement of up to \$10,000 each is available for eligible expenses related to the adoption or surrogacy of a child.

### **Ameriprise Financial Workplace Education and Personal Consulting**

Periodic financial educational seminars are provided, as well as a free 30-minute consultation with a financial advisor.

### **CareBenefits by Care.com (formerly Care@Work)**

Access ongoing and short-term care for children, adults, seniors, pets and more through a no-cost premium membership, along with 5 Hologic partially-subsidized back-up care days.

### **Family Care Leave and Pay**

If eligible, you may take up to a total of 12 weeks (26 weeks for military caregiver leave) 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 4 weeks of pay at 100% when on an approved FMLA or Company-sponsored Family Care Leave.

### **Healthy Living Wellness Program**

Discover your healthy as you take an active role in your wellbeing. Personify Health, our cornerstone program, and other wellness providers offer tools, motivation and support to help you explore your wellness.

Earn quarterly and annual rewards and cash with Personify Health.

### **Lyra Employee Assistance Program by Carelon**

Balance work and life with services such as legal and financial advice, identity theft and dependent care needs.

### **Milk Stork**

On-the-go breast milk storage, toting and transportation assistance while traveling for work, as well as lactation support consulting are provided.

### **Paid Time Off**

Hologic provides time away from work with vacation, sick time, holidays and to volunteer within your community to help maintain balance between your mind, body and spirit.

### **Parental Leave and Pay**

Birth and non-birth parents may receive up to 16 weeks (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 8 weeks of parental pay at 100%; for birth parents, this is in addition to receiving STD for weeks 2 through 8 at 100% for those disabled by birth.

### **Partners in Giving Matching Gift Program**

Partner with Hologic to donate to your favorite non-profit organization.

### **PerkSpot Discounts**

Access discounts on travel, entertainment, cell phones, restaurants, apparel and more.

### **Tuition Reimbursement**

Reimbursement of up to \$5,250 per calendar year is provided for eligible expenses related to undergraduate and graduate courses.

# ID Cards

If you are enrolling in medical (including prescription), dental, vision or either Flexible Spending Account for the first time, you will receive member ID cards before July 1, 2026. If you are re-enrolling or switching plans, please see the chart below:

If you are currently enrolled in the below plan(s) for the 2025/2026 plan year:	And you enroll in the below plan(s) for the 2026/2027 plan year:	You will:
<b>CDHP with HSA</b> <b>PPO</b> <b>PPO Plus</b>	The same plan for the new plan year	Keep your current BCBSMA Medical ID card (one card for each covered member)  For CDHP with HSA, keep your current HealthEquity Visa® Health Account debit card and receive new debit card when your current card expires  Keep your current CVS Caremark prescription card
<b>CDHP with HSA</b>	PPO PPO Plus	Receive a new BCBSMA Medical ID card (one card for each covered member)  Receive a new CVS Caremark prescription card (two cards with your name on them)
<b>PPO or PPO Plus</b>	CDHP with HSA	Receive a new BCBSMA Medical ID card (one card for each covered member)  Receive a new CVS Caremark prescription card (two cards with your name on them)  Receive a HealthEquity Visa® Health Account debit card if enrolling for the first time
<b>PPO or PPO Plus</b>	You switch between the PPO and PPO Plus Plans	Receive a new BCBSMA Medical ID card (one card for each covered member)  Keep your current CVS Caremark prescription card
<b>Either Dental Plan</b>	Core Plan Enhanced Plan	Keep your current Delta Dental card
<b>Healthcare or Dependent Care Flexible Spending Account</b>	Healthcare or Dependent Care Flexible Spending Account	Keep your current HealthEquity Visa® Health Account debit card  Receive new card when your current card expires

If you reside in GA or WI, you will receive new BCBSMA ID cards due to an updated Select network in these states, regardless of whether you change your medical plan.

# Plan Resources

For more information about your benefits, visit the **Benefits Open Enrollment site** at [BenefitsOpenEnrollment.Hologic.com](https://BenefitsOpenEnrollment.Hologic.com) to help you make confident enrollment decisions:



[2026/2027 Benefits eCatalog](#)

[Benefit plan resources and summaries](#)

[Medical plan cost comparison tool](#)

Plan	Vendor	Website	Phone Number
<b>Learn about all the benefits Hologic has to offer you and your family</b>	<b>Total Rewards Benefits</b> page on MyHologic	<a href="https://Holx.co/Benefits">Holx.co/Benefits</a>	N/A
<b>Benefits Self Service</b>	Benefits Service Center	Live chat: <a href="https://HologicBenefits.com">HologicBenefits.com</a>	844.319.3420
<b>Medical (including telehealth coverage)</b>	Blue Cross Blue Shield of MA	<a href="https://BlueCrossMA.org">BlueCrossMA.org</a>	800.358.2227
<b>Home and Family Care Giving Resources</b>	CareBenefits by Care.com	<a href="https://Hologic.Care.com">Hologic.Care.com</a>	855.781.1303
<b>Prescription Drug Program</b>	CVS Caremark	<a href="https://Caremark.com/wps/portal">Caremark.com/wps/portal</a>	855.271.6598
<b>Dental</b>	Delta Dental of Massachusetts	<a href="https://DeltaDentalMA.com">DeltaDentalMA.com</a>	800.872.0500
<b>Vision</b>	EyeMed	Not yet enrolled: <a href="https://EyeMedVirtualBenefitFair.com">EyeMedVirtualBenefitFair.com</a> Code: <b>NH51XKKE</b> Already enrolled: <a href="https://EyeMed.com">EyeMed.com</a>	Not yet enrolled: 866.804.0982 Already enrolled: 866.800.5457
<b>Financial Health</b>	Fidelity Investments Ameriprise Financial	<a href="https://NetBenefits.com">NetBenefits.com</a> Email: <a href="mailto:Tom.g.duval@ampf.com">Tom.g.duval@ampf.com</a>	800.890.4015 617.367.1006
<b>Health Savings Account (HSA), Flexible Spending Accounts (FSAs)</b>	HealthEquity	<a href="https://HealthEquity.com">HealthEquity.com</a>	877.694.3938
<b>Personal Healthcare Assistant, Second Medical Opinions, Treatment and Condition Support</b>	Included Health	<a href="https://IncludedHealth.com/Hologic">IncludedHealth.com/Hologic</a>	800.929.0926
<b>Life, AD&amp;D, Short- and Long-Term Disability, Accident, Critical Illness and Hospital Indemnity Insurance</b>	Lincoln Financial	<a href="https://LincolnFinancial.com">LincolnFinancial.com</a>	800.423.2765
<b>Employee Assistance Program (EAP)</b>	Lyra by Carelon	<a href="https://Hologic.LyraHealth.com/worklife">Hologic.LyraHealth.com/worklife</a> (Company code: <b>LyraHologic</b> )	877.301.0911
<b>Mental Health</b>	Lyra	<a href="https://Hologic.LyraHealth.com">Hologic.LyraHealth.com</a> <b>Watch this video</b> to learn more	877.301.0911
<b>Personal Legal Matters</b>	MetLife Legal Plan	<a href="https://Info.LegalPlans.com">Info.LegalPlans.com</a> Access code: 6091281	800.821.6400
<b>Support for Nursing Moms</b>	Milk Stork	<a href="https://MilkStork.com/Hologic">MilkStork.com/Hologic</a>	510.356.0221
<b>Chronic Disease Prevention and Management Program</b>	Omada	<a href="https://OmadaHealth.com/Hologic">OmadaHealth.com/Hologic</a>	888.409.8687
<b>Personify Health Member Services</b>	Personify Health	<a href="https://Login.PersonifyHealth.com">Login.PersonifyHealth.com</a>	888.671.9395
<b>Fertility and Family Building</b>	Progyny	N/A	866.946.0633
<b>Peri/Menopause Support</b>	Progyny	N/A	866.946.0633
<b>Medicare Decision Support</b>	SmartConnect	<a href="https://gps.SmartMatch.com/Hologic">gps.SmartMatch.com/Hologic</a>	833.859.1160
<b>Virtual Physical Therapy and Pelvic Support</b>	Sword Health	<a href="https://meet.SwordHealth.com/Hologic">meet.SwordHealth.com/Hologic</a>	888.492.1860

## 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.