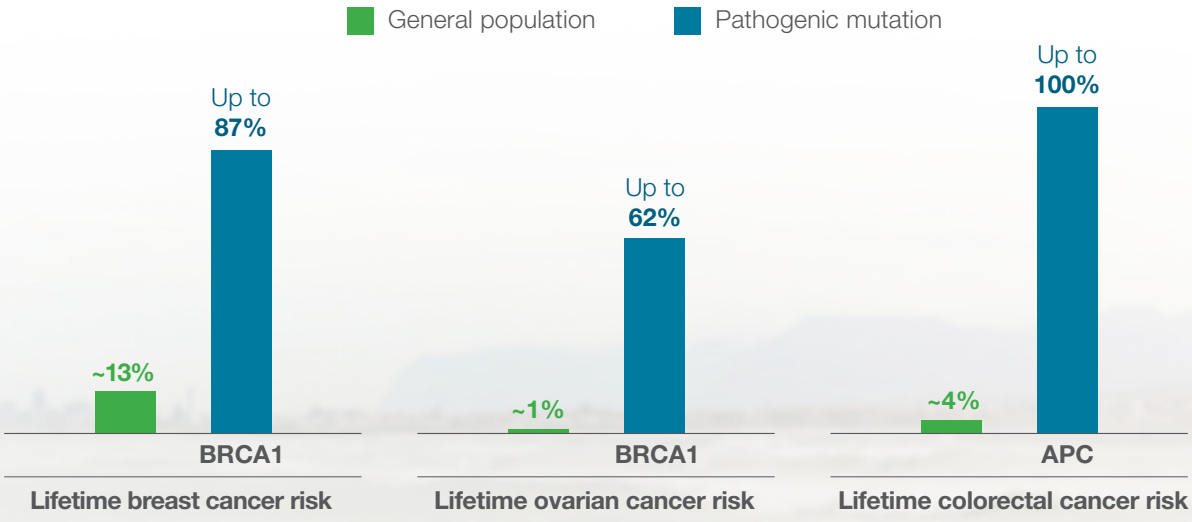
natera™ | Empower™
Hereditary cancer test

Meaningful insights, **within reach.**

High-quality hereditary cancer testing made accessible

Talk about hereditary cancer risk with your patients

Inherited mutations can significantly increase lifetime risk for developing cancer[1]



Many high risk patients are not tested

~80%

of women at "high risk" for hereditary breast or ovarian cancer never discussed genetic testing with their health care provider[2]

~69%

of individuals at risk for Lynch syndrome were never advised by their health care provider to undergo genetic testing[3]

A central role for women's healthcare providers

"Evaluating a patient's risk of hereditary breast and ovarian cancer should be a routine part of obstetric and gynecologic practice"

— **American College of Obstetricians and Gynecologists practice bulletin 182 2017 (reaffirmed 2019)[4]**

Introducing Empower™

High-quality hereditary cancer testing made accessible

1 **Advanced technology**
Next generation sequencing used to analyze up to 53 genes associated with an increased risk for common hereditary cancers

2 **Clear answers you can act on**
Reports include detailed patient management recommendations based on the latest medical guidelines

3 **Commitment to affordability**
In-network with a majority of insurance plans, and comprehensive programs to ensure patient access to testing

4 **Practice support**
Services to simplify testing workflow at every step, including streamlined patient education, ordering and sample collection, billing, counseling and documentation.

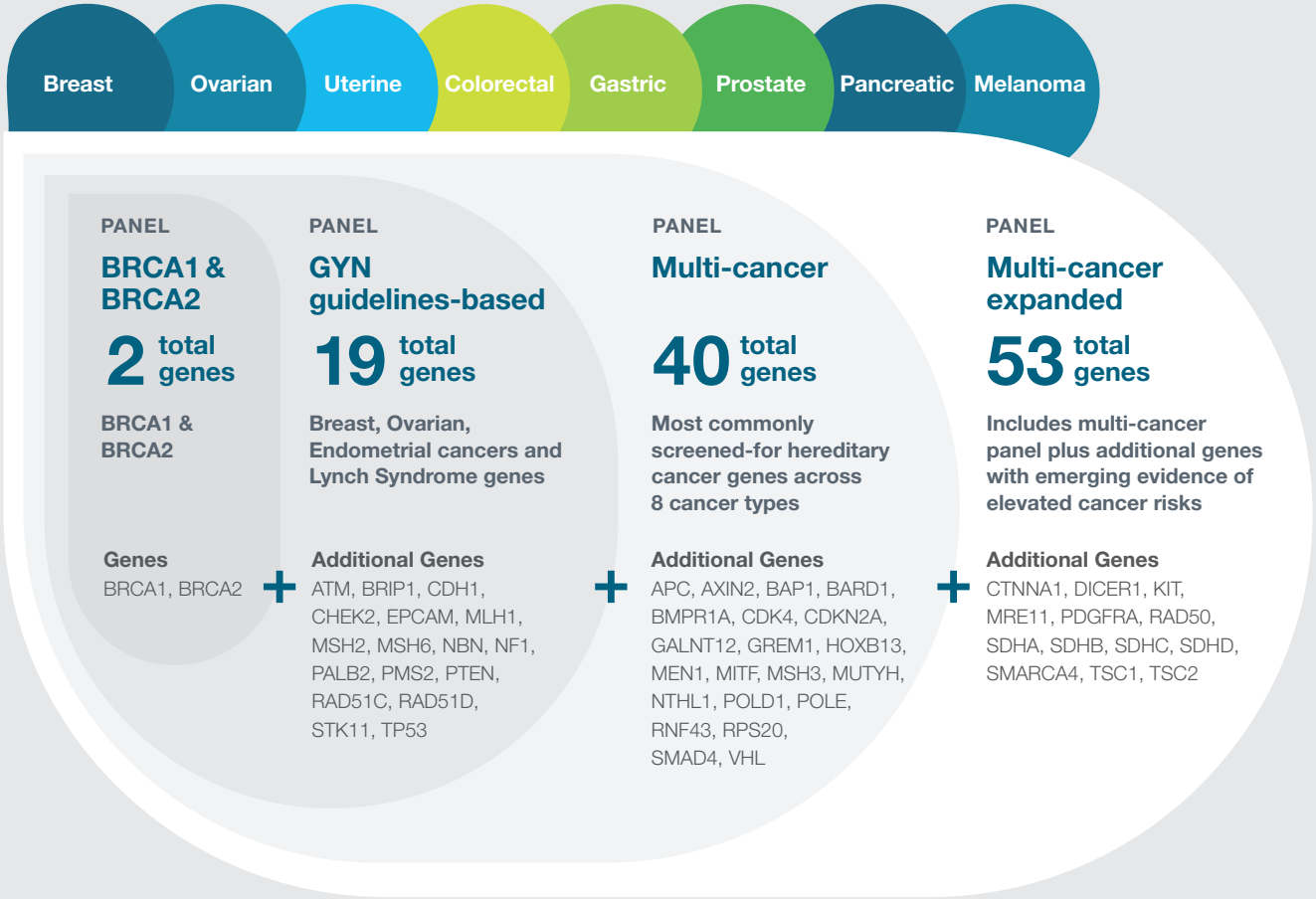
From Natera, the experienced leader in women's health genetics

2M+	100+	CAP	CLIA	90	50+
tests performed	clinicians, PhD's, and scientists	accredited	certified	countries worldwide	peer-reviewed publications

Hereditary cancer testing simplified

Designed with your practice in mind

Empower panels include genes associated with increased risk of common hereditary cancers, with options to suit your preferred screening strategy.



Vital testing made affordable

Broad, in network coverage

In-network provider with most health plans, including Anthem, Cigna,and UnitedHealthcare.

Check out our growing list at: **natera.com/in-network-plans**

Price transparency

Personalized estimates help patients understand coverage and cost—so you can focus on care.

Comprehensive patient access solutions

Self-pay pricing and compassionate care options are available for patients without adequate insurance coverage.

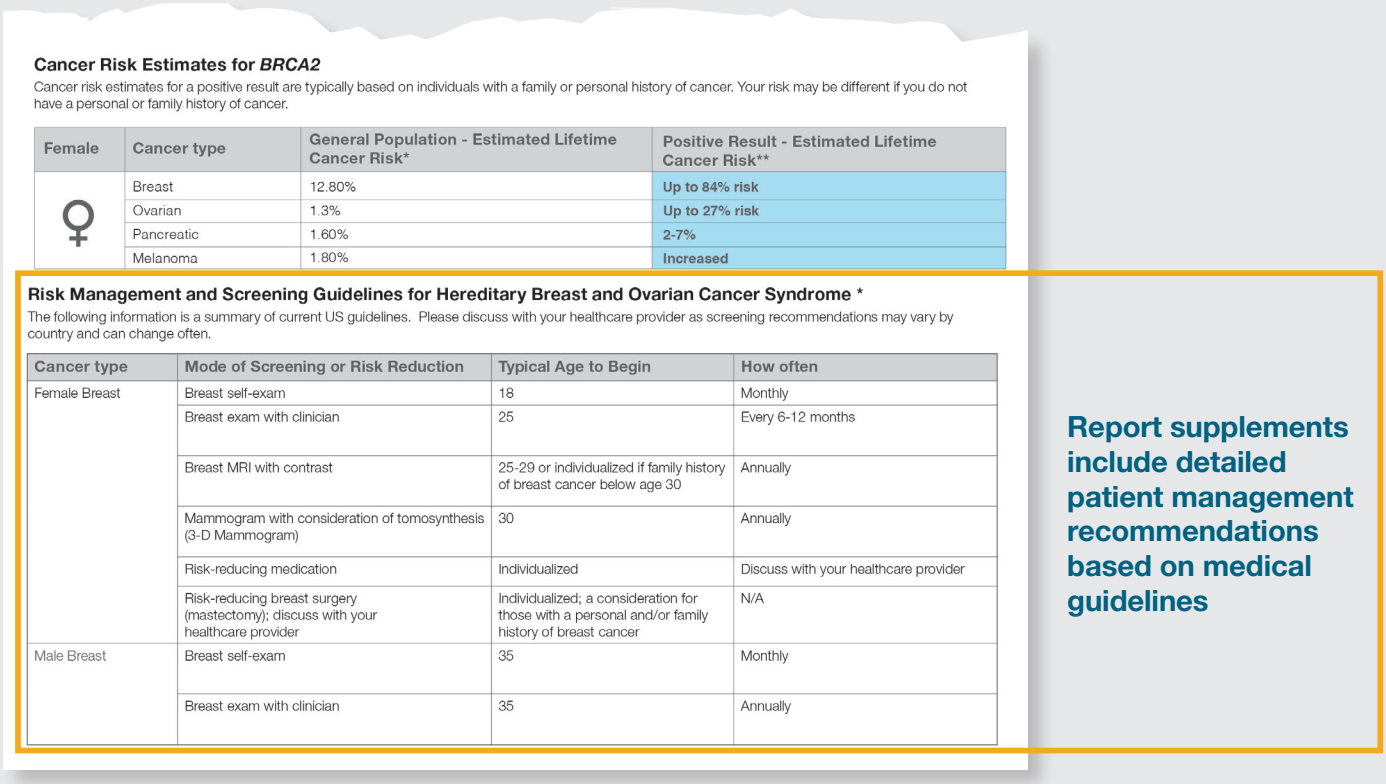
Family testing program

Testing for first-degree relatives of patients with a positive result at no additional charge.

Visit **natera.com/Empower** for more details

Actionable reports to guide patient management

- Screenings that detect cancer at its earliest, most treatable stage
- Risk-reducing medications and surgeries
- Surgical or therapeutic decisions for patients diagnosed with cancer
- Informing family members to help them proactively manage hereditary cancer risk



Cancer Risk Estimates for *BRCA2*

Cancer risk estimates for a positive result are typically based on individuals with a family or personal history of cancer. Your risk may be different if you do not have a personal or family history of cancer.

Female	Cancer type	General Population - Estimated Lifetime Cancer Risk*	Positive Result - Estimated Lifetime Cancer Risk**
♀	Breast	12.80%	Up to 84% risk
	Ovarian	1.3%	Up to 27% risk
	Pancreatic	1.60%	2-7%
	Melanoma	1.80%	Increased

Risk Management and Screening Guidelines for Hereditary Breast and Ovarian Cancer Syndrome *

The following information is a summary of current US guidelines. Please discuss with your healthcare provider as screening recommendations may vary by country and can change often.

Cancer type	Mode of Screening or Risk Reduction	Typical Age to Begin	How often
Female Breast	Breast self-exam	18	Monthly
	Breast exam with clinician	25	Every 6-12 months
	Breast MRI with contrast	25-29 or individualized if family history of breast cancer below age 30	Annually
	Mammogram with consideration of tomosynthesis (3-D Mammogram)	30	Annually
	Risk-reducing medication	Individualized	Discuss with your healthcare provider
	Risk-reducing breast surgery (mastectomy); discuss with your healthcare provider	Individualized; a consideration for those with a personal and/or family history of breast cancer	N/A
Male Breast	Breast self-exam	35	Monthly
	Breast exam with clinician	35	Annually

Report supplements include detailed patient management recommendations based on medical guidelines

Delivered with clinical rigor

Expert variant interpretation

An experienced team of scientists, physicians and genetic counselors rigorously classifies variants according to American College of Medical Genetics (ACMG) guidelines

Sharing knowledge

Baylor Genetics regularly contributes clinically significant variants to ClinVar public database for the benefit of patients and the medical community

DEVELOPED IN PARTNERSHIP WITH

BAYLOR GENETICS

>4 million clinical tests performed

+

>40 years of experience

Patients first. Partners always.

Natera supports providers and their patients at every step of the genetic testing process

Education
Family history tool, free genetic information sessions, and patient education resources including online learning materials

Access
Broad in-network insurance coverage, personalized cost estimates, and patient access programs

Ordering
Easy ordering via paper, online portal, or EMR, and flexible blood draw options including mobile phlebotomy

Results
Sample tracking, actionable report supplements, and complimentary access to board-certified genetic counselors

Next Steps
Family testing program for first degree relatives, and provider notification for variant reclassification

References

1. Cancer risk estimates for a positive result are typically based on individuals with a family or personal history of cancer. NCCN Clinical Practice Guidelines in Oncology Genetic/Familial High Risk Assessment: Breast, Ovarian and Pancreatic v1.2020
2. Bellcross CA, Peipins LA, McCarty FA, Rodriguez JL, et al. Genet Med. Characteristics associated with genetic counseling referral and BRCA1/2 testing among women in a large integrated health system. 2015 Jan;17(1):43–50.
3. Patel SG, Ahnen DJ, Kinney AY, et al. Am J Gastroenterol. Knowledge and uptake of genetic counseling and colonoscopic screening among individuals at increased risk for lynch syndrome and their endoscopists from the family health promotion project. 2016 Feb;111(2):285-93.
4. Modesitt SC, Lu K, Chen L and Powell CB. Obstet Gynecol. Practice Bulletin No 182: Hereditary Breast and Ovarian Cancer Syndrome. 2017 Sep;130(3):e110-e126. (Reaffirmed 2019)

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Hereditary cancer test