



MASSACHUSETTS
HEALTH POLICY COMMISSION

HEALTH POLICY COMMISSION NOTICE OF MATERIAL CHANGE FORM

***THIS NOTICE OF MATERIAL CHANGE FORM IS
FOR USE BEGINNING APRIL 8, 2025***

Health Policy Commission
50 Milk Street, 8th Floor
Boston, MA 02109

GENERAL INSTRUCTIONS

The attached form should be used by a Provider or Provider Organization to provide a Notice of Material Change (“Notice”) to the Health Policy Commission (“Commission”), as required under M.G.L. c. 6D, § 13 and 958 CMR 7.00, Notices of Material Change and Cost and Market Impact Reviews. To complete the Notice, it is necessary to read and comply with 958 CMR 7.00, a copy of which may be obtained on the Commission’s website at www.masshpc.gov. Capitalized terms in this Notice are defined in 958 CMR 7.02. Additional guidance is available on the Commission’s website (e.g., Bulletins, FAQs). For further assistance, please contact the Health Policy Commission at HPC-Notice@mass.gov. This form is subject to statutory and regulatory changes and may be amended from time to time.

REQUIREMENT TO FILE

This Notice must be submitted by any Provider or Provider Organization with \$25 million or more in Net Patient Service Revenue in the preceding fiscal year that is proposing a Material Change, as defined in 958 CMR 7.02. Notice must be filed with the Commission not fewer than 60 days before the consummation or closing of the transaction (i.e., the proposed effective date of the proposed Material Change).

SUBMISSION OF NOTICE

One electronic copy of the Notice, in a portable document form (pdf), should be submitted to the following:

Health Policy Commission: HPC-Notice@mass.gov;

Office of the Attorney General: HCD-6D-NOTICE@mass.gov;

Center for Health Information and Analysis: Legal@chiamass.gov

PRELIMINARY REVIEW AND NOTICE OF COST AND MARKET IMPACT REVIEW

If the Commission considers the Notice to be incomplete, or if the Commission requires clarification of any information to make its determination, the Commission may, within 30 days of receipt of the Notice, notify the Provider or Provider Organization of the information or clarification necessary to complete the Notice.

The Commission will inform each notifying Provider or Provider Organization of any determination to initiate a Cost and Market Impact Review within 30 days of its receipt of a completed Notice and all required information, or by a later date as may be set by mutual agreement of the Provider or Provider Organization and the Commission.


CONFIDENTIALITY

Information on this Notice form itself shall be a public record and will be posted on the Commission’s website. Pursuant to 958 CMR 7.09, the Commission shall keep confidential all nonpublic information and documents obtained in connection with a Notice of Material Change and shall not disclose the information or documents to any person without the consent of the Provider or Payer that produced the information or documents, except in a Preliminary Report or Final Report of a Cost and Market Impact Review if the Commission believes that such disclosure should be made in the public interest after taking into account any privacy, trade secret or anti-competitive considerations. The confidential information and documents shall not be public records and shall be exempt from disclosure under M.G.L. c. 4, § 7 cl. 26 or M.G.L. c. 66, § 10.

NOTICE OF MATERIAL CHANGE

Date of Notice: January 7, 2026

1. Name: Abbott Laboratories, an Illinois corporation

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|-----------------------------------|-----------------------------|--|
| 2. Federal TAX ID # 36-0698440 | MA DPH Facility ID # N/A | NPI # N/A (See below regarding NPIs of subsidiaries operating in Massachusetts)  |
|-----------------------------------|-----------------------------|--|

Contact Information

3. Business Address 1: 100 Abbott Park Road

4. Business Address 2:

5. City: Abbott Park State: Illinois Zip Code: 60064-6400

6. Business Website: <https://www.abbott.com/>

7. Contact First Name: Nick Contact Last Name: Koberstein

8. Title: Division Counsel, Licensing & Acquisitions

9. Contact Phone: (224) 667-4795 Extension:

10. Contact Email: Nick.koberstein@abbott.com

Description of Organization

11. *Briefly* describe your organization.

Abbott is an international company that manufactures and sells diagnostics, medical devices, nutritional products, and branded generic pharmaceuticals. Abbott provides services to Massachusetts residents through its specialized durable medical equipment service line, Acelis Connected Health. Acelis Connected Health provides remote patient-monitoring medical devices and related digital offerings to Massachusetts residents through two entities, described below. Abbott does not have any physical operations in Massachusetts or operations licensed by the Massachusetts DPH.

1. Alere Home Monitoring, Inc. (d/b/a Acelis Connected Health Services) (NPI: 1760418370)– Provides remote PT-INR (prothrombin time–international normalized ratio) anticoagulation monitoring services for patients on anticoagulation medications.

2. Quality Assured Services Inc. (Acelis Connected Health Supplies) (NPI: 1043209877 and 1154462026)– Provides external ventricular assist device (VAD) equipment and supplies for outpatient support and remote patient monitoring.

Abbott's Acelis business serves MA patients and YTD revenue in MA is approximately \$3.5 million for INR and \$2.6 million for VAD. Both the INR and VAD businesses include digital offerings. CoagClinic is a software-as-a-service platform licensed to healthcare providers, who use it to manage Acelis INR patients and access related records and reported self-test INR results. VADWatch is a software-as-a-service platform that enables remote monitoring of patients implanted with a VAD and allows providers to track equipment inventory. HealthCheck is the mobile version of CoagClinic and VADWatch, offering patients (via HealthCheck) and providers (via HealthCheck Pro) access to the same functionality through an app.

The payor mix for the Acelis businesses in Massachusetts is as follows:

Acelis Connected Health Services: Medicare 46%, Medicare Advantage = 28%, Commercial (Non-Managed Medicare or Managed Medicaid) = 22%, Managed Medicaid = 1%, Other = 3%.

Acelis Connected Health Supplies: Medicare 45%, Medicare Advantage = 27%, Commercial (Non- Managed Medicare or Managed Medicaid) = 21%, TPA = 3%, Managed Medicaid = 1%, Other = 3%.

While Abbott owns and operates dedicated toxicology clinical laboratories in the United States, none of Abbott's clinical laboratories are licensed in Massachusetts. Furthermore, Abbott's toxicology laboratory lab business did not derive any clinical revenues from any accounts in Massachusetts in the past three (3) years.

Type of Material Change

12. Check the box that most accurately describes the proposed Material Change involving a Provider or Provider Organization:
- A Merger or affiliation with, or Acquisition of or by, a Carrier;
 - A Merger with or Acquisition of or by a Hospital or a hospital system;
 - Any other Acquisition, Merger, or affiliation (such as a Corporate Affiliation, Contracting Affiliation, or employment of Health Care Professionals) of, by, or with another Provider, Providers (such as multiple Health Care Professionals from the same Provider or Provider Organization), or Provider Organization that would result in an increase in annual Net Patient Service Revenue of the Provider or Provider Organization of ten million dollars or more, or in the Provider or Provider Organization having a near-majority of market share in a given service or region;
 - Any Clinical Affiliation between two or more Providers or Provider Organizations that each had annual Net Patient Service Revenue of \$25 million or more in the preceding fiscal year; provided that this shall not include a Clinical Affiliation solely for the purpose of collaborating on clinical trials or graduate medical education programs; and
 - Any formation of a partnership, joint venture, accountable care organization, parent corporation, management services organization, or other organization created for administering contracts with Carriers or third-party administrators or current or future contracting on behalf of one or more Providers or Provider Organizations;
 - Significant expansions in a Provider or Provider Organization's capacity;
 - Transactions involving a significant equity investor which result in a change of ownership or control of a Provider or Provider Organization;
 - Significant acquisitions, sales, or transfer of assets including, but not limited to, real estate sale lease-back arrangements; and
 - Conversion of a Provider or Provider Organization from a non-profit entity to a for-profit entity.
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13. What is the proposed effective date of the proposed Material Change? Upon receipt of all required regulatory approvals and shareholder approval.

Material Change Narrative

14. *Briefly* describe the nature and objectives of the proposed Material Change, including any exchange of funds between the parties (such as any arrangement in which one party agrees to furnish the other party with a discount, rebate, or any other type of refund or remuneration in exchange for, or in any way related to, the provision of Health Care Services) and whether any changes in Health Care Services are anticipated in connection with the proposed Material Change:

On November 19, 2025 Abbott Laboratories (NYSE: ABT) ("Abbott" or "Parent") and Exact Sciences Corporation (NASDAQ: EXAS) ("Exact Sciences" or the "Seller") entered into an Agreement and Plan of Merger ("Agreement") for Abbott to acquire Exact Sciences. The transaction will enable Abbott to enter the fast-growing advanced cancer diagnostics segment, serving millions more people. Under the terms of the agreement, Exact Sciences shareholders will receive \$105 per common share, representing a total equity value of approximately \$21 billion.

The proposed transaction will be effected via Badger Merger Sub I, Inc., a Delaware corporation ("Merger Sub") and a wholly owned subsidiary of Parent, merging with and into Exact Sciences, with Exact Sciences surviving the Merger as a wholly owned subsidiary of Parent.

The parties intend to consummate the Transaction as soon as practicable, subject to the expiration or termination of the waiting period under the Hart Scott Rodino Antitrust Improvements Act of 1976, the receipt of other required regulatory approvals, the satisfaction of customary closing conditions, and shareholder approval. The Transaction is expected to close in the second quarter of 2026.

15. Briefly describe the anticipated impact of the proposed Material Change, including but not limited to any anticipated impact on reimbursement rates, care referral patterns, access to needed services, and/or quality of care:

This transaction is not a horizontal combination of competitors. Exact Sciences will continue to be operated as a stand alone business and there are no current plans to integrate it with Abbott's toxicology laboratory or specialized durable medical equipment business (Acelis Connected Health). Together, Abbott and Exact Science will reach more patients to help prevent cancer, enable earlier detection, and empower physicians and consumers with data-driven insight that support more informed personalized care.

Combined with Abbott's global scale, reputation for operational and commercial excellence and strong relationships with healthcare systems, Exact Sciences will be positioned to create a powerful, new growth platform to unlock new opportunities to build upon in the future.

Exact Sciences focuses on the early detection of cancer and supporting personalized treatments. Exact Sciences' comprehensive product offerings support patients and their healthcare providers before, during and after a cancer diagnosis. The company is among the leaders in cancer screening, precision oncology and genetic testing, helping to detect cancer earlier, guide treatment decisions and monitor for recurrence.

Its product offerings include the Cologuard® test, a market-leading noninvasive colorectal cancer screening option; Oncotype DX®, which informs personalized treatment decisions for patients with breast cancer; Oncodetect , which identifies molecular residual disease (MRD) to help assess the risk of recurrence and guide follow-up care; and Cancerguard , a multi-cancer early detection blood test.

Approximately 20 million people globally, including 2 million Americans, are diagnosed with cancer every year. These numbers are only expected to rise in the coming years due to population growth, aging and other contributing factors. With this acquisition, Abbott will enter into advanced cancer diagnostics, a large and rapidly growing segment. There is significant unmet clinical need in cancer diagnostics as most preventable cancers go undetected and/or unscreened, and this transaction will broaden Abbott's diagnostics capabilities across the cancer care continuum. A combination of Abbott and Exact Sciences also offers synergistic opportunities, including through combining Abbott's R&D capabilities to develop instrument-based solutions for decentralized settings (e.g., physician offices, cancer centers) with Exact Sciences' complementary suite of diagnostic products to facilitate rapid turnaround times, lower costs and improved patient access. Exact Sciences' operations are predominantly based in the U.S, and currently, only one of Exact Science's tests—Oncotype DX—is available internationally. The transaction would therefore allow Abbott's international presence to foster improved access to important cancer testing options globally to help more people in more places.

Development of the Material Change

16. Describe any other Material Changes you anticipate making in the next 12 months:

None.

17. Indicate the date and nature of any applications, forms, notices or other materials you have submitted regarding the proposed Material Change to any other state or federal agency:

Notification under the Hart-Scott-Rodino Antitrust Improvements Act of 1976, as amended, was filed on January 6, 2026.

Notice of Material Change Transaction with the Oregon Health Authority, was filed on January 7, 2026.

Material Transaction Notice with the New York Department of Health, was filed on January 7, 2026.

Notice of Material Change Transaction with the California Office of Health Care Affordability, was filed on January 7, 2026.

Notice with the Indiana Attorney General's Office was filed on January 7, 2026.

Supplemental Materials

18. Submit the following materials, if applicable, under separate cover to HPC-Notice@mass.gov.

The Health Policy Commission shall keep confidential all nonpublic information, as requested by the parties, in accordance with M.G.L. c. 6D, § 13(c), as amended by 2013 Mass. Acts, c. 38, § 20 (July 12, 2013).

- a. Copies of all current agreement(s) (with accompanying appendices and exhibits) governing the proposed Material Change (e.g., definitive agreements, affiliation agreements);
- b. A current organizational chart of your organization; and
- c. Any analytic support for your responses to Questions 14 and 15 above.

[Remainder of this page intentionally left blank]

This signed and notarized Affidavit of Truthfulness and Proper Submission is required for a complete submission.

Affidavit of Truthfulness and Proper Submission

I, the undersigned, certify that:

1. I have read 958 CMR 7.00, Notices of Material Change and Cost and Market Impact Reviews.
2. I have read this Notice of Material Change and the information contained therein is accurate and true.
3. I have submitted the required copies of this Notice to the Health Policy Commission, the Office of the Attorney General, and the Center for Health Information and Analysis as required.

Signed on the 6 day of JANUARY, 2026, under the pains and penalties of perjury.

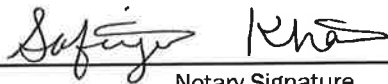
Signature: 

Name: Nick Koberstein

Title: Abbott Laboratories, Division Counsel, Licensing & Acquisitions

FORM MUST BE NOTARIZED IN THE SPACE PROVIDED BELOW:




Notary Signature

Copies of this application have been submitted electronically as follows:

Office of the Attorney General (1)

Center for Health Information and Analysis (1)

EXPLANATIONS AND DEFINITIONS

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| 1. Name | Legal business name as reported with Internal Revenue Service. This may be the parent organization or local Provider Organization name. |
| 2. Federal TAX ID # | 9-digit federal tax identification number also known as an employer identification number (EIN) assigned by the internal revenue service. |
| MA DPH Facility ID # | If applicable, Massachusetts Department of Public Health Facility Identification Number. |
| National Provider Identification Number (NPI) | 10-digit National Provider identification number issued by the Centers for Medicare and Medicaid Services (CMS). This element pertains to the organization or entity directly providing service. |
| 3. Business Address 1 | Address location/site of applicant |
| 4. Business Address 2 | Address location/site of applicant continued often used to capture suite number, etc. |
| 5. City, State, Zip Code | Indicate the City, State, and Zip Code for the Provider Organization as defined by the US Postal Service. |
| 6. Business Website | Business website URL |
| 7. Contact Last Name, First Name | Last name and first name of the primary administrator completing the registration form. |
| 8. Title | Professional title of the administrator completing the registration form. |
| 9. Contact Telephone and Extension | 10-digit telephone number and telephone extension (if applicable) for administrator completing the registration form |
| 10. Contact Email | Contact email for administrator |
| 11. Description of Organization | Provide a brief description of the notifying organization's ownership, governance, and operational structure, including but not limited to Provider type (acute Hospital, physician group, skilled nursing facilities, independent practice organization, etc.), number of licensed beds, ownership type (corporation, partnership, limited liability corporation, etc.), service lines and service area(s). |
| | Indicate the nature of the proposed Material Change. |
| 12. Type of Material Change | <p><i>Definitions of terms:</i></p> <p>"Carrier", an insurer licensed or otherwise authorized to transact accident or health insurance under M.G.L. c. 175; a nonprofit Hospital service corporation organized under M.G.L. c. 176A; a nonprofit medical service corporation organized under M.G.L. c. 176B; a health maintenance organization organized under M.G.L. c. 176G; and an organization entering into a preferred provider arrangement under M.G.L. c. 176I; provided, that this shall not include an employer purchasing coverage or acting on behalf of its employees or the employees of one or more subsidiaries or affiliated corporations of the employer; provided that, unless otherwise noted, the term "Carrier" shall not include any entity to the extent it offers a policy, certificate or contract that provides coverage solely for dental care services or visions care services.</p> |

“Hospital”, any hospital licensed under section 51 of chapter 111, the teaching hospital of the University of Massachusetts Medical School and any psychiatric facility licensed under section 19 of chapter 19.

“Net Patient Service Revenue”, the total revenue received for patient care from any third party Payer net of any contractual adjustments. For Hospitals, Net Patient Service Revenue should be as reported to the Center under M.G.L. c. 12C, § 8. For other Providers or Provider Organizations, Net Patient Service Revenue shall include the total revenue received for patient care from any third Party payer net of any contractual adjustments, including: (1) prior year third party settlements; and (2) premium revenue, which means per-member-per-month amounts received from a third party Payer to provide comprehensive Health Care Services for that period, for all Providers represented by the Provider or Provider Organization in contracting with Carriers, for all Providers represented by the Provider or Provider Organization in contracting with third party Payers.

“Provider”, any person, corporation, partnership, governmental unit, state institution or any other entity qualified under the laws of the Commonwealth to perform or provide Health Care Services.

“Provider Organization”, any corporation, partnership, business trust, association or organized group of persons, which is in the business of health care delivery or management, whether incorporated or not that represents one or more health care Providers in contracting with Carriers or third-party administrators for the payments of Health Care Services; provided, that a Provider Organization shall include, but not be limited to, physician organizations, physician-hospital organizations, independent practice associations, Provider networks, accountable care organizations and any other organization that contracts with Carriers for payment for Health Care Services.

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| 13. Proposed Effective Date of the Proposed Material Change | Indicate the effective date of the proposed Material Change. NOTE: The effective date may not be fewer than 60 days from the date of the filing of the Notice. |
| 14. Description of the Proposed Material Change | Provide a brief narrative describing the nature and objectives of the proposed Material Change, including any exchange of funds between the parties (such as any arrangement in which one party agrees to furnish the other party with a discount, rebate, or any other type of refund or remuneration in exchange for, or in any way related to, the provision of Health Care Services). Include organizational charts and other supporting materials as necessary to illustrate the proposed change in ownership, governance or operational structure. |
| 15. Impact of the Proposed Material Change | Provide a brief description of any analysis conducted by the notifying organization as to the anticipated impact of the proposed Material Change including, but not limited to, the following factors, as applicable: <ul style="list-style-type: none">• Costs• Prices, including prices of the Provider or Provider Organization involved in the proposed Merger, Acquisition, affiliation or other proposed Material Change• Utilization• Health Status Adjusted Total Medical Expenses• Market Share• Referral Patterns• Payer Mix• Service Area(s) |

- Service Line(s)
- Service Mix

16. Future Planned Material Changes Provide a brief description of the nature, scope, and dates of any pending or planned Material Changes within the 12 months following the date of the notice.

17. Submission to Other State or Federal Agencies

Indicate the date and nature of any other applications, forms, notices or other materials provided to other state or federal agencies relative to the proposed Material Change, including but not limited to the Department of Public Health (e.g., Determination of Need Application, Notice of Intent to Acquire, Change in Licensure), Massachusetts Attorney General (e.g., notice pursuant to G.L. c. 180, §8A(c)), U.S. Department of Health and Human Services (e.g., Pioneer ACO or Medicare Shared Savings Program application) and Federal Trade Commission/Department of Justice (e.g., Notification and Report Form pursuant to 15 U.S.C. sec. 18a).
