A Healthcare Provider's Guide

Vectra[®] Guided Care

Evaluate success of controlling rheumatoid arthritis inflammation by using Vectra at initiation, change in drug therapy, and repeating to monitor response to therapy



Vectra[®] Can Help Guide Personalized Medical Management Decisions to Improve Patient Outcomes



42% of patients thought to be in low or moderate disease activity by traditional disease activity measure were in high disease activity measured by Vectra and thus were at risk for joint damage progression.

In a combined analysis of patients from 3 studies, 42% of those with low or moderate disease activity by DAS28-CRP had a high Vectra Score¹

Vectra Guided Care provides quantitative personalized insight to help guide disease management plan:



• Vectra is the best predictor of radiographic progression



• Provides scores ranging from 1 to 100 to categorize RA disease activity into low, moderate or high to **help guide medical management**



• The Vectra Score Interpretation found on the report provides guidance to physicians



• Changes in the Vectra Score of 8 or more in high and moderate patients represent a meaningful change in RA inflammation

The benefits of using Vectra in your office



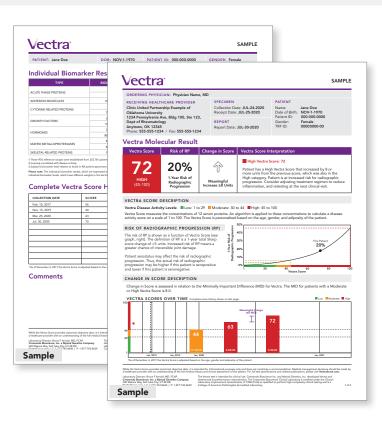
Vectra[®] Provides Molecular Insights on the Inflammatory State of RA That Can Help Inform Your Medical Management Decisions.



- Vectra measures 12 biomarkers and combines them into a single score thus allowing providers to incorporate molecular insight from various inflammatory pathways driving RA disease activity
- Vectra incorporates information on age, gender and adiposity to provide a score that reflects a patient's personalized disease activity and inflammation level
- Vectra is an unsurpassed predictor of radiographic progression

Vectra is a molecular measurement of disease activity and RA inflammation

Adhesic	on Molecules	Gr	owth Factors	Cytokines/ Receptors	Meta	Matrix Iloproteinases	Sk	eletal-Related Proteins	Hormones	cute-Phase Proteins
	VCAM-1		EGF	IL-6		MMP-1		YKL-40	Leptin	SAA
			VEGF-A	TNF-RI		MMP-3			Resistin	CRP



Report Highlights

- Vectra provides a personalized measure of disease activity
- Vectra provides the risk of rapid radiographic progression within one year²
- Change in Vectra Score is assessed in relation to the Minimally Important Difference (MID). MID of 8 reflects the smallest absolute change in Vectra Score that likely reflects a change in disease activity and is not due only to random variation.³
- Vectra Score Interpretation calls out considerations for treatment decisions
- Patient Vectra Scores for the past three years are presented in one easy to read graph

1. Kay J, et al. Arthritis Res Therapy. 2014;16(1):R40. 2. Curtis JR, et al. Validation of a novel multibiomarker test to assess rheumatoid arthritis disease activity. Arthritis Care Res. 2012; 64 (12): 1794-1803. 3. Chernoff D, (February 2019). Determination of the Minimally Important Difference (MID) in Multi-biomarker Disease Activity (MBDA) Test Scores. Clinical Rheumatology



The Vectra[®] Report Gives Clear Perspective of RA Inflammation

Vectra Helps Identify a Patient's Future Risk of Radiographic Progression

27

PATIENT IN	FORMATION	VISIT NOTES	Vectra Score
Age	49		
Gender	Female	 Patient is 5'2", 178 lbs. Patient reports feeling okay and is 	12
Diagnosis	RA	 Patient reports feeling okay and is resistant to changing therapy Patient has had RA for five years 	HIGH
Drug Therapy	MTX, Etanercept		(45-100)

	IAN: Physician Nam	e MD				
Dept of Rheumatolo Anytown, OK 12345	HCARE PROVIDER rship Example of V We, Bldg 100, Ste 12	3, Rec 3, RE	ceipt Date:	e: JUL-24-2020 JUL-25-2020 IUL-30-2020	PATIENT Name: Date of Birth: Patient ID: Gender: TRF ID:	Jane Doe NOV-1-1970 000-000-0000 Female 00000000-00
Vectra Mole	cular Result					
Vectra Score	Risk of RP	Change i	n Score	Vectra Score In	nterpretation	
72 HIGH (45-100)	20% 1-Year Risk of Radiographic Progression	G Meanin Increase 2	ngful ±8 Units	more units from High category. F progression. Co	gh Vectra Score th the previous scor Patient is at increa nsider adjusting to	nat increased by 8 or e, which was also in the sed risk for radiographic reatment regimen to reduce e next clinical visit.
VECTRA SCORE D Vectra Disease Activit Vectra Score measures activity score on a scale	ty Levels: Low: 1 t	12 serum pro	teins. An al	qorithm is applied t	to these concentra	stions to calculate a disease
		total Sharp	Rik Proj	10%		This Patient
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score change of >5 un greater chance of irrev Patient serostatus may progression. Thus, the progression may be hi and lower if this patier	its. Increased risk of R rersible joint damage. affect the risk of radio actual risk of radiogra gher if this patient is s tt is seronegative.	P means a' ographic iphic	1-Year Ride Rediographic Proc	0%	40 Vectra	20%
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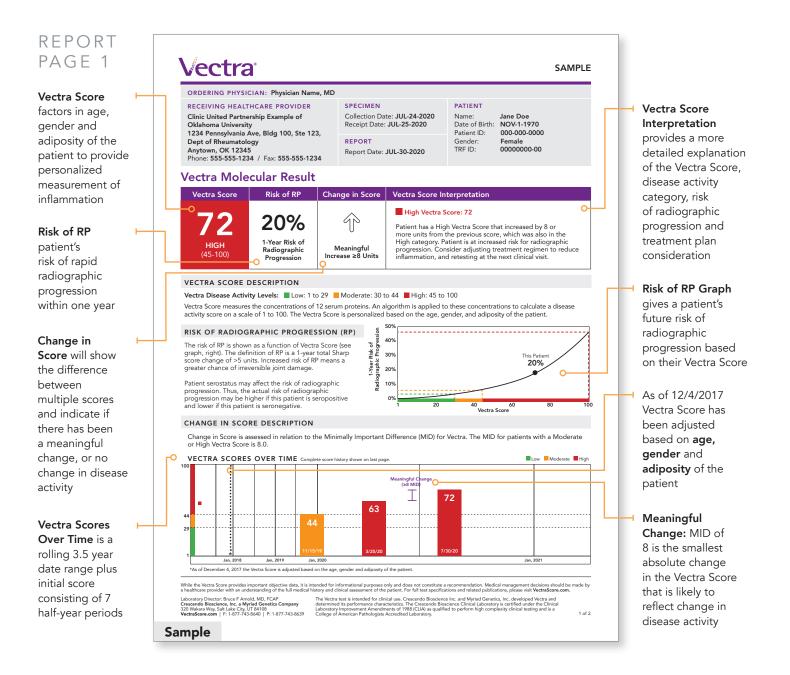
PATIENT: Jane Doe	DC	B: NOV-1-1970	PATIENT ID: 0	00-000-0000	GENDER: Female
ndividual Biom	arker Res	sults			
TYPE	BIC	MARKER	RESULT / UNITS	RA RANGE!	RA PERCENTILE [®]
ACUTE PHASE PROTEINS		SAA	1.1 ug/mL	0.29 - 85	8%
		CRP	0.32 mg/L	0.19 - 92	64%
ADHESION MOLECULES	· · · ·	/CAM-1	0.41 ug/mL	0.39 - 1.2	68%
CYTOKINE-RELATED PROTEINS		IL-6 TNF-RI	2.9 pg/mL 1.2 ng/mL	2.5 - 200 0.8 - 3.9	6%
		EGF 5	190 pg/mL	12 - 410	17%
GROWTH FACTORS		VEGF-A	330 pg/mL	75 - 790	26%
		LEPTIN	10 ng/mL	1.5 - 120	18%
HORMONES	R	IESISTIN	5.7 ng/mL	3.5 - 21	51%
MATRIX METALLOPROTEINASES		MMP-1	5.6 ng/mL	1.3 - 23	21%
MATRIX METALLOPROTEINASES		MMP-3	17 ng/mL	7.9 - 160	10%
SKELETAL-RELATED PROTEINS		YKL-40	45 ng/mL	22 - 540	3%
Complete Vect	score H	History NOTES			
COLLECTION DATE	SCORE	NOTES			
COLLECTION DATE Feb. 10, 2017					
COLLECTION DATE	SCORE 56	NOTES			
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COLLECTION DATE Feb. 10, 2017 Nov. 15, 2019 Mar. 25, 2020 Jul. 20, 2020	SCORE 56 44 63 72 - - - - - - -	NOTES Unadjusted*	of the patient.		

Scores over time will show a trend and can **provide insight into a meaningful change** in the patient's disease activity

Vectra[®] Report: A Personalized Precision Tool

The Vectra Score is reported on a scale of 1-100. Patients in the high and moderate categories are considered to have uncontrolled inflammation, and may require treatment modification.





REPORT PAGE 2

The Vectra Score is calculated from the concentrations of the 12 biomarkers shown on this page, which represent different biological pathways involved in RA pathophysiology. The clinical application of individual biomarker values, which have different weighting in the Vectra algorithm, has not been established.

Includes the leptin range for all RA patients.

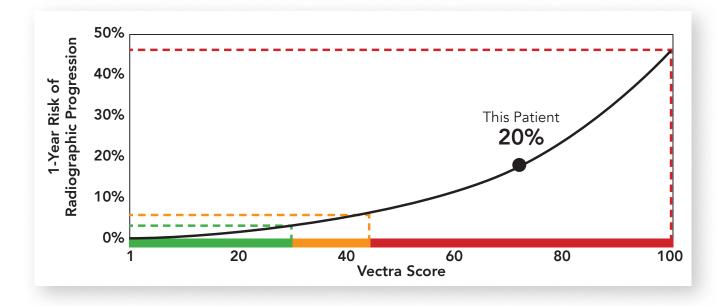
Result/Units: Concentrations of the individual biomarkers

PATIENT: Jane Doe	DOB: NOV-1-1970	PATIENT ID: 0	000-000-0000	GENDER: Female	•
Individual Biomark	er Results				
ТҮРЕ	BIOMARKER	RESULT / UNITS	RA RANGE [†]	RA PERCEI	
ACUTE PHASE PROTEINS	SAA	1.1 ug/mL	0.29 - 85	8%	
	CRP	0.32 mg/L	0.19 - 92	64%	
ADHESION MOLECULES	VCAM-1	0.41 ug/mL	0.39 - 1.2	68%	
CYTOKINE-RELATED PROTEINS	IL-6	2.9 pg/mL	2.5 - 200	6%	
	TNF-RI EGF §	1.2 ng/mL 190 pg/mL	0.8 - 3.9	2%	
GROWTH FACTORS	VEGF-A	330 pg/mL	75 - 790	26%	
		10 ng/mL	1.5 - 120	18%	
HORMONES	RESISTIN	5.7 ng/mL	3.5 - 21	51%	
	MMP-1	5.6 ng/mL	1.3 - 23	21%	
MATRIX METALLOPROTEINASES	MMP-3	17 ng/mL	7.9 - 160	10%	
SKELETAL-RELATED PROTEINS	YKL-40	45 ng/mL	22 - 540	3%	
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Technical Specifications at VectraScore.com

Vectra[®] Guided Care





The Vectra Score correlates to the risk of radiographic progression (RP), which leads to permanent joint damage. As the Vectra Score increases the risk of RP increases. Sharp Score is used to evaluate radiographic progression. A Sharp Score change of 5 or more within one year is considered rapid radiographic progression.²

Patient serostatus may effect the risk of radiographic progression. The actual risk of radiographic progression may be higher if this patient is seropositive and lower if this patient is seronegative.

How was the Radiographic Progression Risk developed?

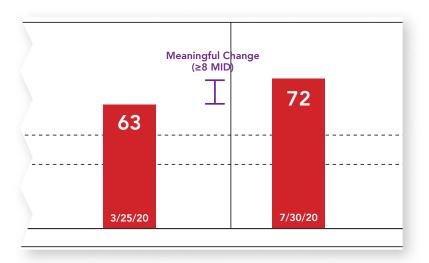
The risk of RP was determined by combining data from 4 cohorts (OPERA, BRASS, SWEFOT, and Leiden) to evaluate the ability of the Vectra Score to predict radiographic progression and to compare this ability with those of DAS28-CRP and CRP. Vectra was 3x better at predicting RP in one year than DAS28-CRP.²

An increased risk of radiographic progression means greater chance of irreversible joint damage

1. Curtis JR, et al. Validation of a novel multibiomarker test to assess rheumatoid arthritis disease activity. Arthritis Care Res. 2012; 64 (12): 1794-1803. 2. Huizinga T, et al. Predicting Risk of Radiographic Progression for Patients with Rheumatoid Arthritis [abstract]. Arthritis Rheumatol. 2019; 71 (suppl 10). https://acrabstracts. org/abstract/predicting-risk-of-radiographic-progression-for-patients-with-rheumatoid-arthritis/. Accessed October 24, 2019.



Vectra[®] Guided Care Minimally Important Difference (MID) Can Help Guide Your Decision Making



Changes of Vectra Scores of 8 or more help guide medical management decisions by representing meaningful changes in rheumatoid arthritis inflammation

How was the Minimally Important Difference established? The minimally important difference (MID) was determined by conducting a clinical study. This clinical study evaluated daily and diurnal variation in Vectra Scores in order to determine the minimally important change in score that is clinically meaningful. Having this information will help aid in your ability to make treatment decisions.

Vectra Score Interpretation

VECTRA SCORE	MEDICAL MANAGEMENT RECOMMENDATION [‡]
Low (<30)	 CONSIDER ONE OF THE FOLLOWING: No treatment change (re-test in 6-12 months or sooner if indicated) Reduce treatment if Vectra Score is low at two consecutive measures (re-test in 6-12 months or sooner if indicated)* *See ACR Guidelines for therapy reduction in clinically well controlled patients
Moderate (30-44)	 CONSIDER ONE OF THE FOLLOWING: Change or intensify treatment If the Vectra Score has increased by ≥ 8 units since previous Vectra (re-test in 3 months) If the Vectra Score has decreased by <8 units since the most recent RA treatment change use clinical judgment (re-test when indicated) No treatment change If the Vectra Score has decreased by >8 units since baseline or the most recent RA treatment change (re-test when indicated) If the Vectra Score has decreased by >8 units since baseline or the most recent RA treatment change (re-test when indicated) If the rapy was recently changed but no previous Vectra Score is available (re-test in 3 months)
High (>44)	 CONSIDER ONE OF THE FOLLOWING: Change or intensify treatment (re-test in 3 months) No treatment change if the Vectra Score has decreased by >8 units when a change in therapy has recently occurred (re-test in 3 months)

This medical management guidance provides recommendations only. The treatment management decisions can only be done by a medical professional with the full information of patients medical status and medical history. These recommendations are currently being tested in clinical trial "VIVID" listed on clintrials.gov (NCT03810144).

[‡] Chernoff D, (February 2019). Determination of the Minimally Important Difference (MID) in Multi-biomarker Disease Activity (MBDA) Test Scores. Clinical Rheumatology. Curtis JR, et al. Update and Clinical Utility of Multi-Biomarker Disease Activity Testing in the U.S. The Journal of Rheumatology November 2018, jrheum. 180071



Intended Use

MANAGEMENT DECISION

Patient and Provider agree to make a treatment change

• Baseline at time of treatment change decision



Therapy Initiation or Change: Until the desired treatment target is reached drug therapy should be adjusted every 3-6 months

THERAPY MONITORING

Evaluate if treatment is working

• Test at 3-6 months after treatment change to evaluate if treatment is working



Achieving a state of disease remission in RA is considered a primary treatment goal

LOW DISEASE ACTIVITY MONITORING

Evaluate that patient remains within disease goal

 Continue to test patient two times a year once in low activity

Monitor that patient is remaining in treatment goal



Provider & Patient Resources

VectraScore.com

Your online resource to learn more about Vectra, patient and provider testimonials and access the clinician portal

VectraView

VectraView[®] is an online analytical tool that enables you to draw insights from Vectra results at the individual patient or practice level. VectraView allows you to:

- Access all of your patients' Vectra results in one place through a convenient online portal
- Store and access disease activity measurements alongside Vectra results
- View Vectra Scores displayed in the context of your patients' medications
- View Vectra results for all tested patients in one view and filter to identify patients for follow-up
- Save time Order subsequent Vectra tests using prefilled test requisition forms



If you encounter any financial hardship, we will work directly with you toward your complete satisfaction. If you have any questions regarding the cost of testing, please contact Myriad.

myriadpromise.com

billinghelp@myriad.com 877-743-8639



myVectra[™] provides patients access to their test results

- Go to VectraScore.com
- Click on myVectra link at top of page
- Use the fillable form to complete your profile information
- myVectra App is available for free in the Apple App store or Google Play



Is a non-profit digital arthritis community that can provide your patients with:

- Educational resources to manage their disease
- Support and advice
- Advocacy opportunities
- Patient-centered research with ArthritisPower®

Find out more at creakyjoints.org

Patient & Provider Medical Support



A team of highly-trained medical liaisons is available by phone or email to help answer questions regarding Vectra results.

Phone: 877-743-8639 x1984 // Email: VectraMed@myriad.com

Vectra® CARE Financial Assistance



Vectra Customer Service and Billing will work directly with patients to make Vectra accessible



Medicare & Medicaid Patients*

Medicare patients have no out of pocket patient responsibility, and thus do not qualify for financial assistance. Medicaid patients are fully covered due to federal income requirements.



What if the Patient has Out-of-Pocket Concerns?

If the patient cannot afford their copay, deductible, or other out-ofpocket costs related to the test, they may be eligible for assistance through Vectra CARE Financial Assistance if their household income meets guidelines.

Vectra CARE Income Guidelines example based on a household of four**					
INCOME	PATIENT RESPONSIBILITY				
Less than \$52,400	\$0				
\$52,401 - \$78,600	\$45				
\$78,601 - \$104,800	\$90				

Patients can apply for financial assistance here: VectraScore.com/Care

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We are committed to helping all patients have access to Vectra testing to guide their rheumatoid arthritis treatment. We encourage all patients to fill out the Vectra CARE form to request financial assistance.

Vectra Customer Service 877-743-8639 and VectraCS@myriad.com

If a patient has ANY questions associated with their bill, have them contact Vectra Customer Service and we will work directly with the patient.





VectraScore.com // 1-877-743-8639 // Myriad Autoimmune - 320 Wakara Way, Salt Lake City, UT 84108

Vectra is validated for use in adults diagnosed with RA. Test results are intended to aid in the assessment of disease activity in RA patients when used in conjunction with standard clinical assessment. This test is not intended or validated to diagnose RA. ©2020 Myriad Genetics, Inc. All rights reserved. Myriad, Vectra, VectraView, myVectra, Crescendo Bioscience, and the associated logos are trademarks or registered trademarks of Myriad Genetics, Inc. and its affiliates in the United States and other jurisdictions.