New NCCN Breast Cancer Guidelines Recognise Oncotype DX Breast Recurrence Score® as the "*Preferred*" and Only Multigene Test to Predict Chemotherapy Benefit in Node-positive Early-stage Breast Cancer

- ***Update based on first results from the independent RxPONDER study presented at the 2020 San Antonio Breast Cancer Symposium*** [i]

Geneva, March 24, 2021 – Exact Sciences today announced that its Oncotype DX Breast Recurrence Score® test has been recognised as the only test that can be used for prediction of chemotherapy benefit in early-stage breast cancer patients with 1-3 positive axillary lymph nodes, including micro metastases, by the National Comprehensive Cancer Network (NCCN)[ii] in its updated guidelines for breast cancer.[iii] The Oncotype DX® test is now the only test classified as "*preferred*" with the highest level of evidence for node-negative and postmenopausal node-positive patients.

In addition, the Oncotype DX test is incorporated in the node-negative and postmenopausal node-positive NCCN treatment algorithms with a recommendation of "*strongly consider*", using cutoffs defined by the TAILORx[iv] and RxPONDER trials to select patients for chemotherapy treatment.

NCCN is an alliance of 31 world-leading cancer centers dedicated to improving the quality and effectiveness of care provided to patients with cancer. The guidelines are updated on a regular basis according to current evidence. The latest version can be accessed online.

This guideline update follows the recent presentation of initial results from the **Rx** for **Po**sitive **No**d**e**, **E**ndocrine **R**esponsive Breast Cancer, or RxPONDER, trial, led by the independent SWOG Cancer Research Network and sponsored by the National Cancer Institute. One of the largest clinical trials in node-positive hormone receptor (HR)-positive, HER2-negative early breast cancer, RxPONDER enrolled more than 5,000 women with up to three positive nodes and successfully defined the benefit of chemotherapy in patients with Oncotype DX Breast Recurrence Score results of 0 to 25.

RxPONDER showed a different effect of chemotherapy based on Recurrence Score® results for postmenopausal and premenopausal women. Postmenopausal women with Recurrence Score results 0-25 were not observed to show benefit from chemotherapy and may avoid the associated side effects of the treatment. Importantly, no chemotherapy benefit was observed regardless of the number of affected nodes, tumor grade, or size. The first trial results also demonstrated that premenopausal patients with a Recurrence Score result 0-25 derived a 2.9% benefit from chemotherapy on distant recurrence at five years.

Approximately 25% of patients diagnosed with HR-positive, HER2-negative early breast cancer have a tumour that has spread to their lymph nodes and two out of three are postmenopausal.[v] The vast majority of these patients currently receive chemotherapy[vi] although approximately 85% of them have Recurrence Score results of 0 to 25.[vii]

The SWOG investigators intend to publish the detailed RxPONDER results in a peer-reviewed publication.

# # #

About the Oncotype DX® and Oncotype MAP™ Portfolio of Tests

The Oncotype DX portfolio of breast, colon and prostate cancer tests applies advanced genomic science to reveal the unique biology of a tumor in order to optimise cancer treatment decisions. In breast cancer, the Oncotype DX Breast Recurrence Score test is the only test that has been shown to predict the likelihood of chemotherapy benefit as well as recurrence in invasive breast cancer. Additionally, the Oncotype DX Breast DCIS Score test predicts the likelihood of recurrence in a pre-invasive form of breast cancer called DCIS. In prostate cancer, the Oncotype DX Genomic Prostate Score® test predicts disease aggressiveness and further clarifies the current and future risk of the cancer prior to treatment intervention, and the Oncotype DX AR-V7 Nucleus Detect™ test helps determine which patients with metastatic castration-resistant prostate cancer (mCRPC) are resistant to androgen receptor (AR)-targeted therapies. The Oncotype DX AR-V7 Nucleus Detect test is performed by Epic Sciences at its centralized, CLIA-certified laboratory in San Diego and offered exclusively by Exact Sciences. For patients with advanced and metastatic cancer, the company offers the Oncotype MAP™ Pan-Cancer Tissue test, a rapid, comprehensive tumor profiling panel, which provides results in 3-5 business days and allows physicians to understand a patient's tumor profile and recommend actionable targeted therapies or clinical trials. With more than 1 million patients tested in more than 90 countries, the Oncotype DX tests have redefined personalised medicine by making genomics a critical part of cancer diagnosis and treatment. To learn more about Oncotype DX and Oncotype MAP tests, visit www.OncotypeIQ.com/en.

About Exact Sciences Corp.

A leading provider of cancer screening and diagnostic tests, Exact Sciences relentlessly pursues smarter solutions providing the clarity to take life-changing action, earlier. Building on the success of the Cologuard® and Oncotype DX tests, Exact Sciences is investing in its product pipeline to take on some of the deadliest cancers and improve patient care. Exact Sciences unites visionary collaborators to help advance the fight against cancer. For more information, please visit the company's website at www.exactsciences.com, follow Exact Sciences on Twitter @ExactSciences, or find Exact Sciences on Facebook.

NOTE: Oncotype, Oncotype DX, Oncotype DX Breast Recurrence Score, Oncotype DX Breast DCIS Score, Oncotype DX Genomic Prostate Score, and Oncotype DX AR-V7 Nucleus Detect are trademarks or registered trademarks of Genomic Health, Inc. Exact Sciences and Cologuard are trademarks or registered trademarks of Exact Sciences Corporation. All other trademarks and service marks are the property of their respective owners.

Forward-Looking Statements

This news release contains forward-looking statements concerning our expectations, anticipations, intentions, beliefs, or strategies regarding the future. These forward-looking statements are based on assumptions that we have made as of the date hereof and are subject to known and unknown risks and uncertainties that could cause actual results, conditions and events to differ materially from those anticipated. Therefore, you should not place undue reliance on forward-looking statements. Risks and uncertainties that may affect our forward-looking statements are described in the Risk Factors sections of our most recent Annual Report on Form 10-K and any subsequent Quarterly Reports on Form 10-Q, and in our other reports filed with the Securities and Exchange Commission. We undertake no obligation to publicly update any forward-looking statement, whether written or oral, that may be made from time to time, whether as a result of new information, future developments or otherwise.

---

[i] Kalinsky, K. et al. Oral Presentation: [GS3-00]. San Antonio Breast Cancer Symposium; December 2020.
[ii] National Comprehensive Cancer Network (NCCN) and NCCN are registered trademarks of NCCN.
[iii] NCCN Guidelines: Breast Cancer, version 2.2021
[iv] Sparano et al. New Engl J Med. 2018.
[v] Heer E. et al., The Lancet 2020.
[vi] Zhang et al., Breast Can Res Treat 2020.
[vii] Exact Sciences, data on file.