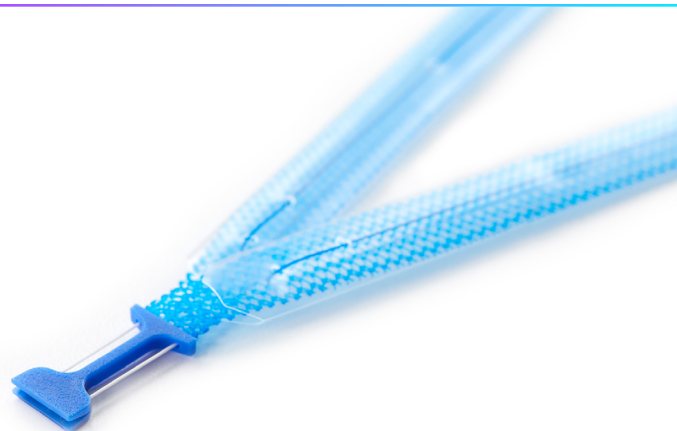




Ultra

Retropubic Mid-Urethral Sling Family



Introduction

The purpose of this value analysis brief is to illustrate the potential clinical and economic value of the Ultra Sling Family. This brief is based on market research, bench testing, clinical literature, and health economics data.

Background

Stress urinary incontinence is incredibly common, but it isn't normal.



One in two women suffer from bladder leakage, often caused by a condition called stress urinary incontinence (SUI).¹ SUI may have a negative impact on quality of life, but it can be treated long term with an outpatient sling procedure.

Since 1995, Boston Scientific has made significant investments in pelvic floor research and innovation, which have resulted in impactful solutions for women and the physicians who treat them.

Clinical research:

Millions in post-market studies and decades of research on Boston Scientific's female slings and pelvic floor reconstruction technologies, including numerous ongoing investigator-sponsored research studies



Physician and patient education:

In-person and on-demand virtual training to support physicians at all stages of their career and robust education to help patients understand their condition and take action



Research and development:

Turning customer and patient needs into meaningful innovation for 30+ years



Society support:

Collaboration to further clinical evidence and training



Health Economics

and Market Access: Dedicated team works with customers to optimize patients' access to treatments by educating about reimbursement, payer policy and health economics

Consistent. Innovative. Precise.

Physician-driven, patient-centered features

Fueled by physician insights and feedback, Ultra innovation is designed to improve provider experience by enhancing sling delivery to drive procedural efficiency, mesh visualization, and tensioning consistency across the Ultra Sling Family.



Advantage mesh is documented in **more than 100 publications to date.**



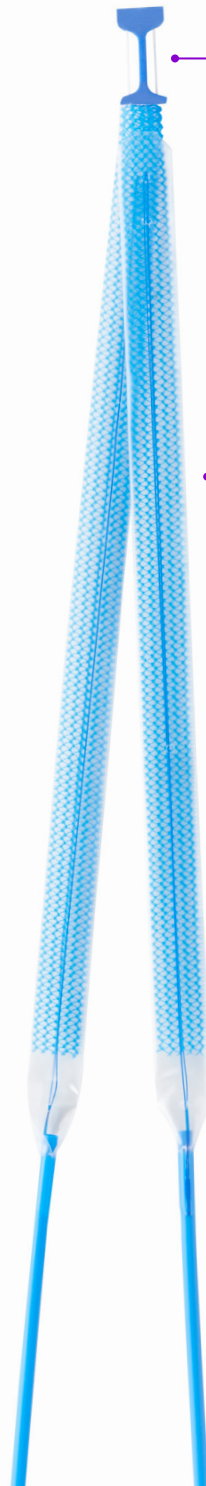
Advantage mesh has been used in **more than 1 million slings.**

Achieving consistency across the Boston Scientific mid-urethral sling family, Ultra innovation is featured with:

- Advantage™ Ultra Transvaginal Mid-Urethral Sling System
- Advantage Fit™ Ultra Transvaginal Mid-Urethral Sling System
- Lynx™ Ultra Suprapubic Mid-Urethral Sling System



Includes the same, unchanged trocar delivery devices



Sleek, suture-released centering tab

Provides physicians with:

- 1 cm exposed mesh designed for better visualization of the surgical field
- Updated removal process
- Ability to visualize tensioning and centering after sleeve removal

Clinically supported Advantage™ optical blue mesh

Offers the same material and features as the patented Advantage clear mesh in an optical blue color, enhancing intra-operative visibility of mesh against the urethra.

Lay-flat, two-sleeve design

Designed to deliver a slim, smooth surface during tissue interaction.

Potential clinical and economic benefits to institutions

Equivalent pricing

Enhanced delivery system at no additional cost as compared to Boston Scientific’s legacy retropubic mid-urethral slings (MUS).



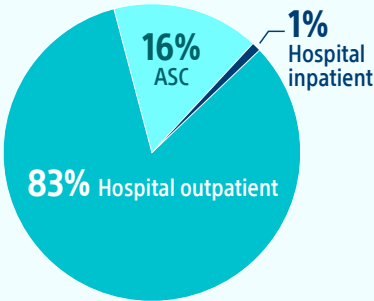
Impact to institutions

Growing reimbursement, coupled with a shift away from hospital inpatient treatment are potential benefits of MUS procedures.



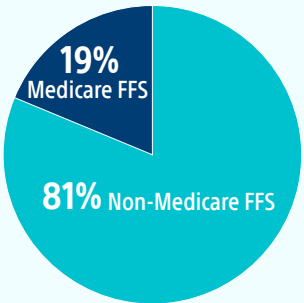
Site of service

- 83% of all mid-urethral sling procedures in 2024 were performed in the hospital outpatient site of service² which is a potentially less costly site of service compared to hospital inpatient procedures.³



Payer mix

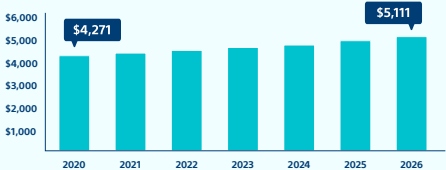
- In the US in 2024, 81% of patients undergoing mid-urethral sling procedures were Non-Medicare Fee-for-Service (FFS) patients.² Prevalence of stress urinary incontinence peaks around age 40–59,⁴ and most covered adults/adult women in the U.S. under age 65 receive health insurance through private payers.⁵
- On average, private payers reimburse at 264% of Medicare rates for outpatient services according to an analysis performed by Kaiser Family Foundation.⁶



Increasing reimbursement

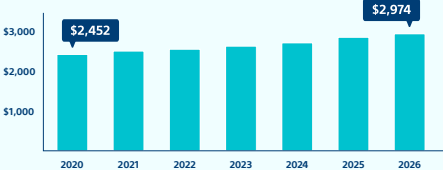
- Medicare national average reimbursement for mid-urethral sling surgery, to treat SUI, has seen an overall increase from 2020 to 2026 in both the hospital outpatient department (HOPD)⁷ and in the ambulatory surgical center (ASC).⁸

Female Sling Medicare National Average HOPD Reimbursement: 2020–2026



20% overall increase

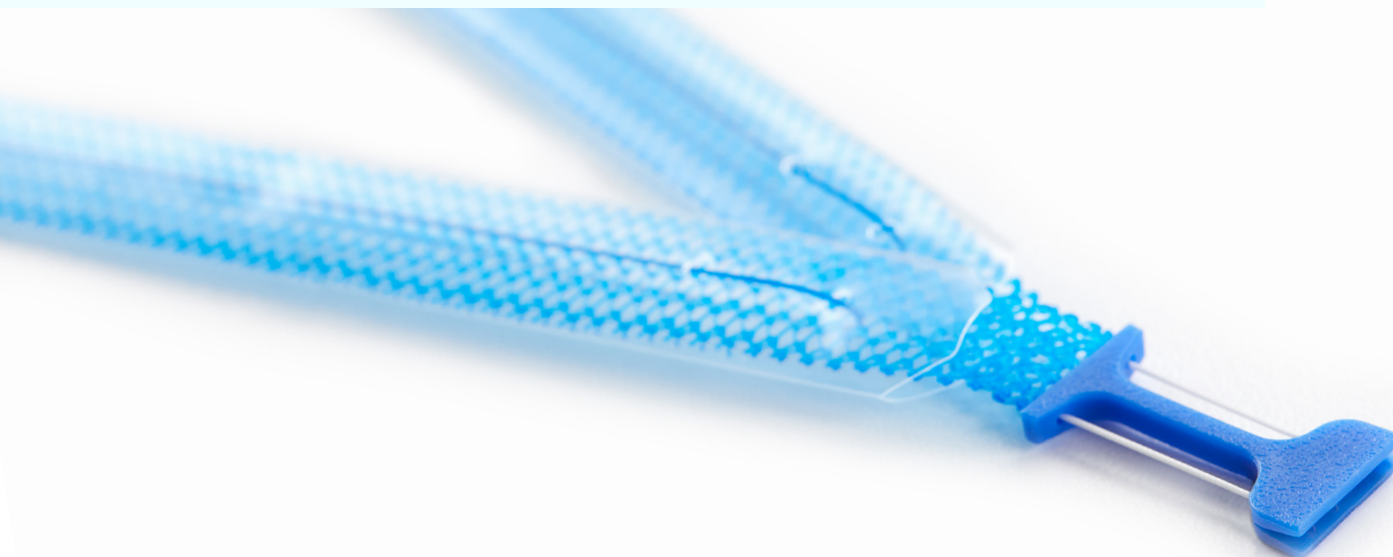
Female Sling Medicare National Average ASC Reimbursement: 2020–2026



21% overall increase

Conclusion

Fueled by physician insights and feedback, the Ultra Sling Family is designed to enhance sling delivery to drive greater procedural efficiency, mesh visualization, and tensioning consistency across the Ultra Sling Family. Paired with Boston Scientific's clinically supported Advantage™ optical blue mesh, the Ultra Sling Family is designed for more precise sling placement.



References

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7. Centers for Medicare Medicaid Services. Hospital Outpatient PPS. Available at: <https://www.cms.gov/medicare/medicare-fee-for-service-payment/hospitaloutpatientpps>. Accessed January 2026.
8. Centers for Medicare Medicaid Services. Ambulatory Surgical Center (ASC) Payment. Available at: <https://www.cms.gov/medicare/medicare-fee-for-service-payment/ascpayment>. Accessed January 2026.

CAUTION: The following adverse events have been reported due to suburethral sling placement, any of which may be ongoing, but are not limited to: As with all implants, local irritation at the wound site and/or a foreign body response may occur, Foreign body reaction may be acute or chronic, Pain (pelvic, vaginal, groin/thigh, suprapubic, dyspareunia) (acute or chronic), Dyspareunia, Tissue responses to the mesh implant could include: erosion into organs (urethra, bladder or other surrounding tissues); exposure/extrusion into the vagina, Mesh contact with urine via erosion/exposure/extrusion may result in stone formation, scarring/scar contracture, Necrosis, fistula formation (acute or chronic), inflammation (acute or chronic), Mesh contracture, Tissue contracture, Vaginal shortening or stenosis that may result in dyspareunia and/or sexual dysfunction, Pain with intercourse that may not resolve, Exposed mesh may cause pain or discomfort to the patient's partner during intercourse, Sexual dysfunction, including the inability to have intercourse. Like all foreign bodies, the mesh may potentiate an existing infection. Allergic reaction has been reported. Known risks of surgical procedures for the treatment of incontinence include: pain, ongoing pain (pelvic, vaginal, groin/thigh, suprapubic, dyspareunia), Severe, chronic pain, Aparaunia, Leg weakness, Infection, De novo detrusor instability, Complete failure of the procedure/failure to resolve a patient's stress urinary incontinence, Voiding dysfunction (incontinence, temporary or permanent lower urinary tract obstruction, difficulty urinating, pain with urination, overactive bladder, and retention), Bruising, bleeding (vaginal, hematoma formation), Abscess, Vaginal discharge, Dehiscence of vaginal incision, Edema and erythema at the wound site, Perforation or laceration of vessels, nerves, bladder, urethra or bowel may occur during placement. The following additional adverse events have been reported for the Solyx SIS System: Dysuria, Hematuria. The occurrence of these events may require surgical intervention and possible removal of the entire mesh. In some instances, these events may persist as a permanent condition after surgical intervention or other treatment. Removal of mesh or correction of mesh-related complications may involve multiple surgeries. Complete removal of mesh may not be possible and additional surgeries may not always fully correct the complications.

CAUTION: For Female Mid-Urethral Slings: Federal (US) law restricts this device to sale by or on the order of a physician trained in use of surgical mesh for repair of stress urinary incontinence.

Please refer to the instructions for use for this product for complete Indications for Use, Contraindications, Warnings, Precautions, Adverse Events, and Instructions prior to using this product.

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