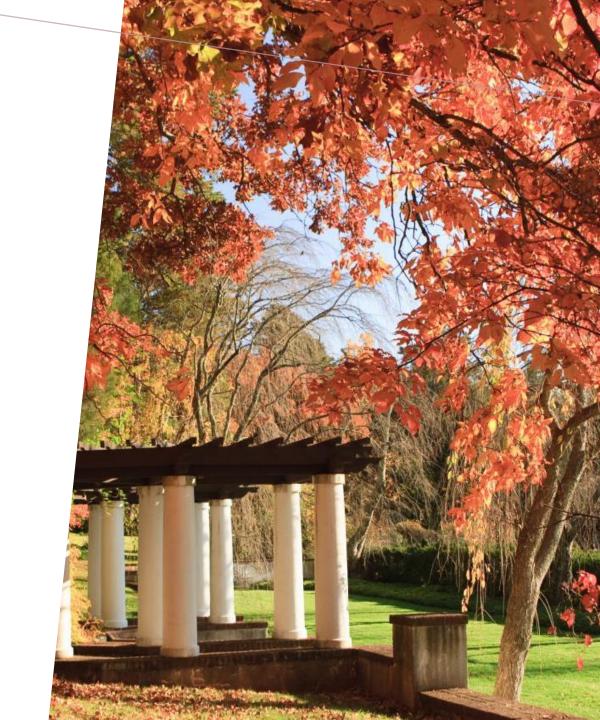


OUR DISCUSSION

- Overview
- Plan Design
- The Numbers
- Emerging Trends
- Future State



Cigna Healthy Workforce **Designation**TM

WHAT IT MEANS...

- Denotes the impact of wellness and wellbeing programs in employer-sponsored health plans
- 84% of covered participants saw a Primary Care Provider during the plan year
- 22 eligible participants completed the Cancer Care Support Program – including 12 catastrophic claimants
- Medication adherence is above the national average

MEDICAL PLAN DESIGN

- Two Plans (Core and Enhanced)
 - Core Individual
 - \$1,000 deductible | 80% plan / 20% employee | Out of Pocket Max \$4,000
 - Core w/ Dependents
 - \$2,000 deductible | 80% plan / 20% employee | Out of Pocket Max \$8,000
 - Enhanced Individual
 - \$500 deductible | 90% plan / 10% employee | Out of Pocket Max \$2,000
 - Enhanced w/ Dependents
 - \$1,000 deductible | 90% plan / 10% employee | Out of Pocket Max \$4,000



DENTAL PLAN DESIGN

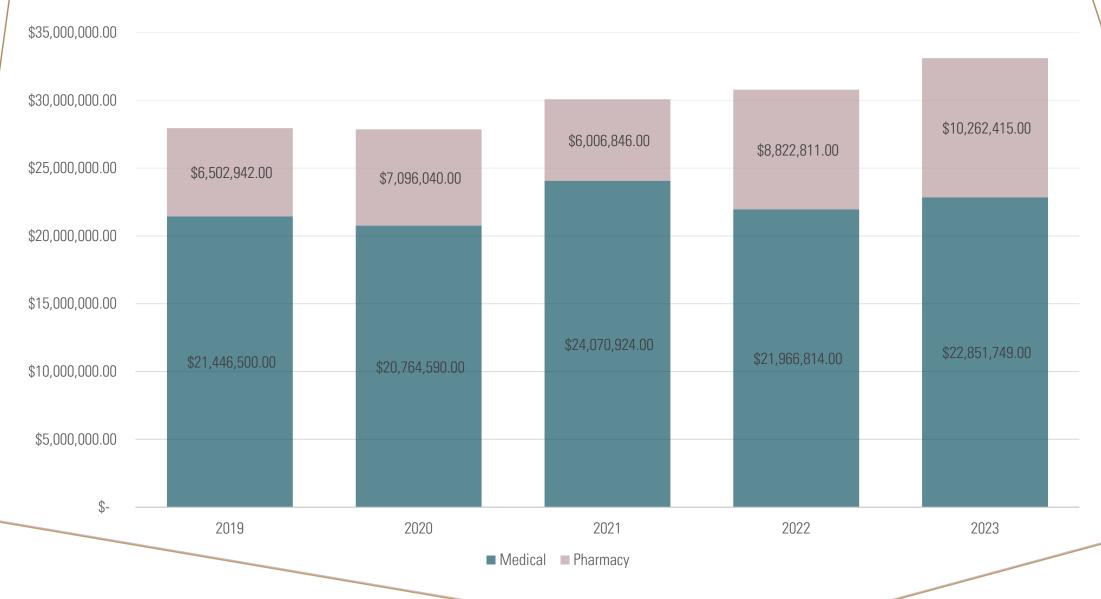
- Two Plans (Core and Enhanced)
 - Core Individual
 - \$50 deductible | 50% plan / 50% employee | Annual Max \$750
 - Core w/ Dependents
 - \$150 deductible | 50% plan / 50% employee | Annual Max \$750
 - Enhanced Individual
 - \$25 deductible | 80% plan / 20% employee | Annual Max \$1,500
 - Enhanced w/ Dependents
 - \$75 deductible | 80% plan / 20% employee | Annual Max \$1,500



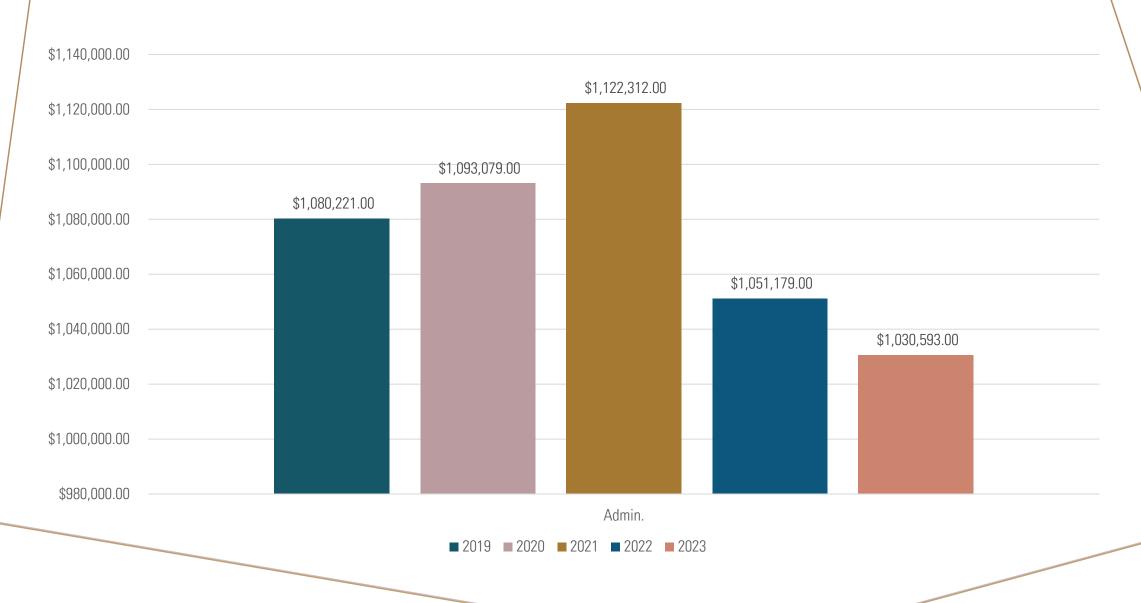
OVERALL SPENDING



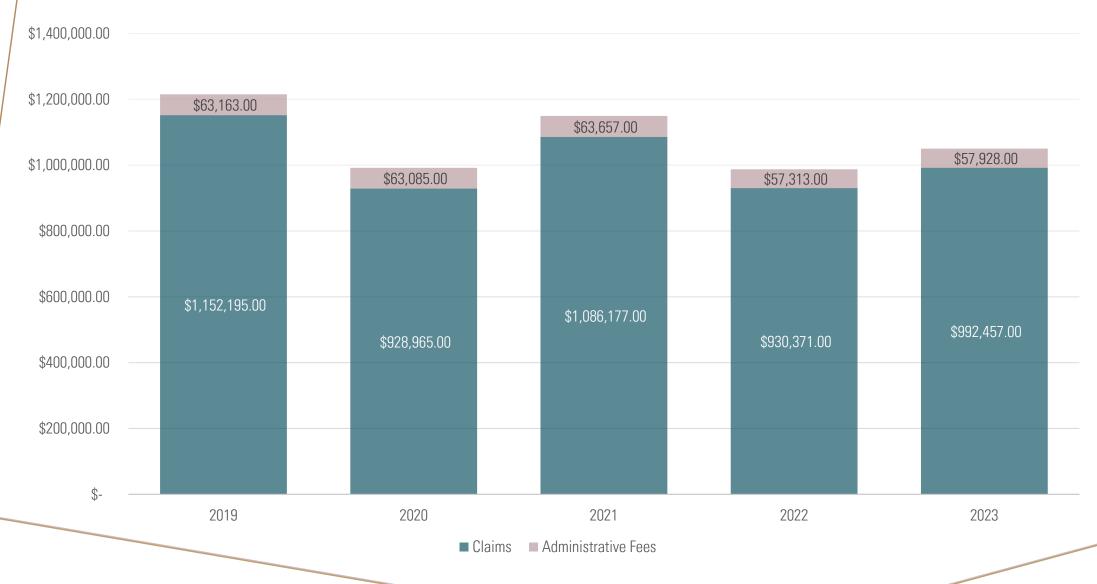
5 YEAR SPEND – MEDICAL & PHARMACY



5 YEAR SPEND – ADMINISTRATIVE FEES



5 YEAR SPEND – DENTAL

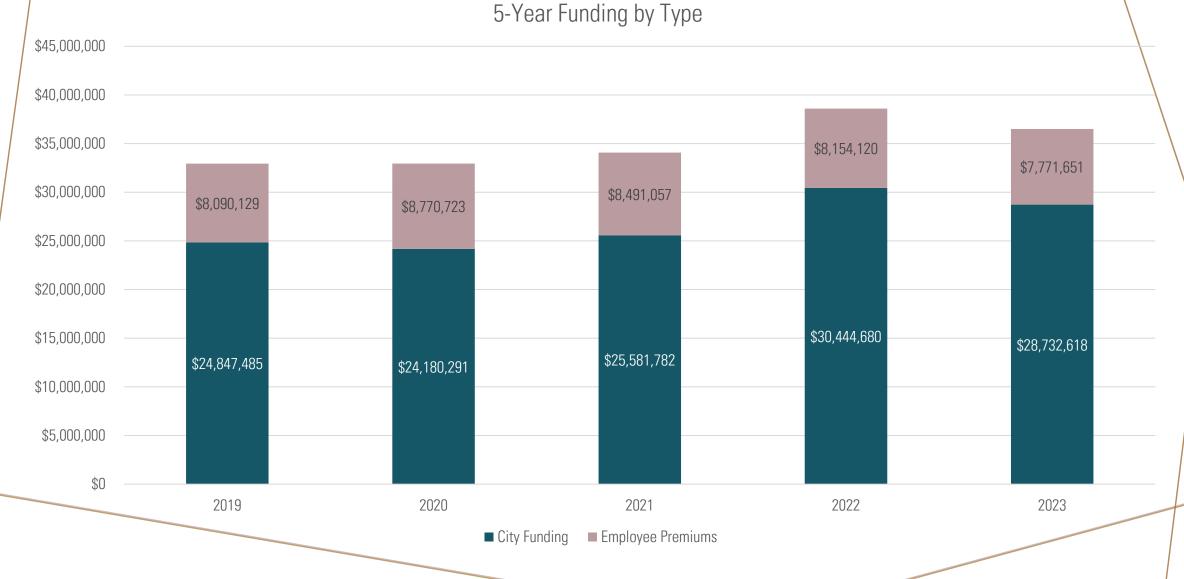


PLAN FUNDING

- Self-Funded fully insured medical and dental insurance
- Subsidized by employee premiums
- Last employee premium increase was in 2017
- City funding premium equivalent establishes an average 78% funding split with the employee

PLAN FUNDING







EMERGING TRENDS

- Chronic condition population increased from 46% to 51%
- Specialty medication spend increased, (medication adherence remains high)
- More participants are utilizing preventive care
- Growing demand for GLP-1 drugs for weight loss
- Catastrophic claims (review on next slide)



CATASTROPHIC CLAIMS \$7.9 m of overall spend

- 35 Claimants (up 7 from plan year 2022)
 - 11 repeat catastrophic claimants
 - 22 employees | 9 spouses | 4 dependents
- 85% of catastrophic claimants have 2+ chronic conditions
- Spend
 - 66% medical
 - 34% pharmacy

RECENT PLAN ENHANCEMENTS

- Omada
- Case Management and Condition Care
- MyCigna / Motivate Me Platforms
- Nutrition Plus Partnership
- SaveOn SP
- Accredo Therapeutic Resource Centers
- Pathwell Specialty





PREVENTIVE CARE 3% of overall spend vs. 2% national average

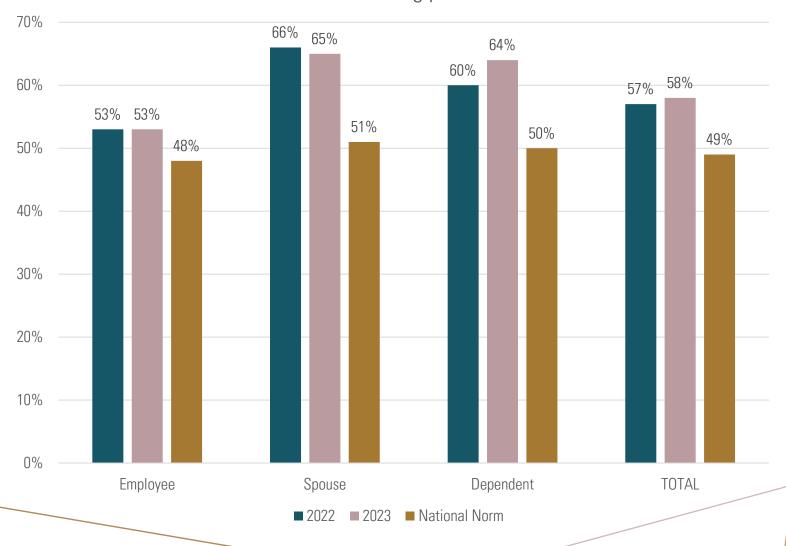
- Annual physical examinations for adults 46% (up 2% from plan year 2022)
 - National norm is 36%
- Annual physical examinations for children 74% (up 2% from plan year 2022)
 - National norm is 62%
- Breast Cancer screening rate = 85%
- Cervical Cancer screening rate = 43%
- Colon Cancer screening rate = 35%



PREVENTIVE CARE

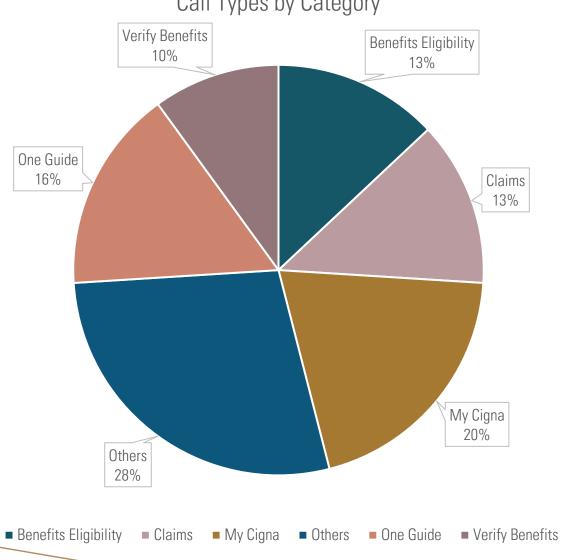
3% of overall spend vs. 2% national average

A look at who is using preventive care



EMPLOYEE EXPERIENCE





CALL RESOLUTION

- Call types with escalated resolution
 - Claim adjustment –
 34% handled first point
 66% escalated
 - Claim disagreement –
 19% handled first point
 81% escalated



CIGNA PERFORMANCE

Metric	Guarantee	Actual
Financial Accuracy	At least 99%	99.8
Payment Accuracy	At least 98%	99.8
Processing Accuracy	At least 98%	99.4
Coding/Procedural Accuracy	At least 97%	99.6
Call Answer Time	45 Seconds or less	15.6 Seconds
Call Abandonment Rate	3% or less	0.8%
Claims processed in 14 days	At least 90%	99.5%
Claims processed in 30 days	At least 98%	99.9%
First Call Resolution	At least 90%	96.2%

FUTURE STATE

- Increased virtual care options
- Reduced improper emergency room usage
- Plan design changes
 - Stop Loss Limits
 - Spousal Surcharge
- Increase to employee premiums
- Improved employee education



