## MOVING FROM VOLUME TO VALUE

50 Percent of Cigna Payments to Health Care Providers in Top 40 Markets Now in Alternative Payment Arrangements<sup>1</sup>

## WHAT THIS IS

10 years ago, Cigna launched value-based care delivery:



to pay providers based on improved health outcomes

VS.



the traditional fee-for-service model, which pays providers based on volume



More than **\$600M** in medical cost savings over 5 years<sup>2</sup>



THE RESULTS

Over an average of 4 years, net total medical cost savings of **\$10 per member per month**<sup>3</sup>



Lowest commercial medical cost trend for **6 consecutive years**<sup>4</sup>

## ACCESS -



**96% of Cigna commercial customers** in top 40 markets are within 15 miles of 3+ accountable care providers<sup>5</sup>



of Cigna Medicare Advantage customers are in value-based care arrangements<sup>6</sup>

**240+** primary care provider organizations<sup>7</sup>







QUALITY

92<sup>%</sup> of providers met or exceeded quality benchmarks<sup>8</sup> 92% of providers say the insights & guidance Cigna provides help them improve performance & outcomes<sup>9</sup>



95' of providers say their relationship with Cigna is collaborative & consultative rather than transactional<sup>9</sup>



## Offered by Cigna Health and Life Insurance Company or its affiliates

Individual results may vary. Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, contact a Cigna representative. All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health and Life Insurance Company (CHLIC), Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health and Life Insurance Company (CHLIC), Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health Corporation. Policy forms: OK - HP-APC-1 et al., OR - HP-POL38 (02-13, TN - HP-POL34)(HC-CER1V1 et al. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Some content provided under license.

- 1. Cigna January 2019 analysis of medical payments in the top 40 US markets as of Q4 2018.
- 2. Cigna January 2019 analysis of national Accountable Care program groups with effective dates from 2013 through 2017. Reimbursements already paid to groups are subtracted from the savings to reflect overall investment.
- 3. Cigna October 2018 analysis of 2017 data of Accountable Care program groups nationally, active at least three years. Includes 85 provider groups with 1.3M aligned customers. Individual customer/client results will vary.
- Medical cost trends publicly reported by CI, AET, ANTM and UNH for 2013 through 2018.
  Cigna August 2018 analysis of national medical body of business sustaines in the teg 45
- 5. Cigna August 2018 analysis of national medical book of business customers in the top 45 US markets, defined by market size, within 15-mile zip code radius (zip code to zip code distance of provider main office location) of three Accountable Care program physicians. Subject to change.
- 6. Cigna internal market trend report as of December 2018.
- 7. Cigna internal analysis of existing arrangements as of December 2018. 8. Cigna June 2018 analysis of 2017 data of Accountable Care program groups nationally, active at least or
- Cigna June 2018 analysis of 2017 data of Accountable Care program groups nationally, active at least one year.
  Cigna Accountable Care Organization (ACO) Experience Survey. September 2017.

928305 02/19 © 2019 Cigna. Some content provided under license.