

COMMITMENT TO TRANSPARENCY

Empowering customers to make better-informed decisions

The U.S. Departments of Health and Human Services, Labor, and the Treasury issued a final rule on October 29, 2020, on transparency in coverage, which requires most group health plans and health insurance issuers to disclose price and cost-sharing information for all covered services.* The August 20, 2021 FAQ does not change our commitment to compliance or our overall trajectory for this work, but it does provide enforcement relief on certain provisions and confirms regulatory rulemaking will occur in 2022.

Cigna Transparency Tools Help Lower Cost of Care

Cigna's strategy and integrated capabilities are designed to help our clients and customers lower total medical costs and improve quality of care and health outcomes. We fully endorse and leverage transparency by empowering customers to make better-informed health care decisions based on cost and quality.

We provide:

- ▶ Convenient access to personalized information about the cost and quality of care through mobile applications, websites, online decision-support tools and our phone service operations.
- ▶ Capabilities that help customers make the most-appropriate decisions for themselves and their family members and inform customers about care options. This includes sharing verified patient reviews to empower customer choice, providing a clear breakdown of costs for more than 1,000 medical and dental procedures and connecting them to personalized out-of-pocket estimates based on

real-time plan benefits information, including deductible, out-of-pocket maximum, and Health Savings Account or Health Reimbursement Arrangement fund balance information.

Cigna's Commitment to You

Our commitment extends further to:

- ▶ Understand the requirements and implications to both Cigna and our clients as they relate to transparency in coverage.
- ▶ Support our clients in complying with the rule as well as establish a rigorous compliance process to help ensure our operations comply, as required.
- ▶ Continue to communicate to our clients as we move forward implementing required processes and inform them of associated implications.

Ask your Cigna representative for more details on how our cost and quality tools are helping our customers improve their health and become more-informed health care consumers.

What the rule means for Cigna

*Plans and issuers must make applicable data files publicly available beginning July 1, 2022. Personalized cost-sharing information must be made available for 500 services, determined by the tri-agencies, beginning January 1, 2023, and cost-sharing information for all items and services is required beginning January 1, 2024.

Together, all the way.®



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