Re: Committee on Ways and Means issued Request for Information (RFI)

Dear Representatives Davis, Sewell, Wenstrup and Arrington,

We appreciate the Committee on Ways and Means issued Request for Information (RFI) that will ultimately inform the development of bipartisan legislation to improve health care outcomes within rural and urban underserved communities. As a global health service company, our success depends on earning trust through responsible business practices, corporate citizenship, and superior service that meets our customers’ needs. Over the past decade, Cigna has been a key advocate for community health initiatives at the national level and actively shares best practices related to addressing health disparities and advancing equitable health care with other health plans, employer groups, and clients.

Cigna Corporation, together with its subsidiaries (either individually or collectively referred to as “Cigna”), is a global health services organization dedicated to helping people improve their health, well-being and peace of mind. Our subsidiaries are major providers of medical, pharmacy, dental, disability, life and accident insurance, and related products and services. Worldwide, we offer peace of mind and a sense of security to our customers seeking protection for themselves and their families at critical points in their lives. Cigna completed its merger with Express Scripts in December 2018, bringing together approximately 74,000 employees around the world. This included several new subsidiaries. Our Accredo subsidiary is a specialty pharmacy service provider for patients with complex and chronic health conditions. eviCore is our medical benefits management company that provides utilization management services for health plans. The combined company’s medical, clinical, pharmacy, behavioral and wellness insights empower us to deliver improved affordability, choice, predictability, and high-quality care through connected, personalized solutions that advance whole person health.

Within the U.S., Cigna provides medical coverage to approximately 14 million Americans in the commercial market segment. We also provide coverage in the individual insurance segment in several states, both on- and off-Exchange, to about 300,000 people. Additionally, Cigna serves approximately 4 million Medicare beneficiaries through our Medicare Advantage (MA), Medicare Prescription Drug Program and Medicare Supplemental products. Our focus on these markets has allowed us to develop a unique approach to health care coverage. We have a deep understanding of the needs and challenges facing both patients and physicians, and thus have developed an evolving collaborative model that provides greater access to high quality preventive care for our customers while offering physicians what they need to deliver that care. This model has contributed to Cigna maintaining the industry’s lowest medical cost trend for the past six consecutive years.

Cigna works closely with clients, customers, and health coaches in the public and private sectors to eliminate the health disparities that continue to plague far too many people and populations. We are committed to cultivating a state of health equity in the marketplace – and to deploying strategic and operational resources to improve access to high-quality health care for our customers.

“Cigna” is a registered service mark, and, “the Tree of Life” logo is a service mark, of Cigna Intellectual Property, Inc., licensed for use by Cigna Corporation and its operating subsidiaries. All products and services are provided exclusively by such operating subsidiaries and not by Cigna Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company (CGLIC), Cigna Health and Life Insurance Company (CHLIC), and HMO or service company subsidiaries of Cigna Health Corporation and Cigna Dental Health, Inc.
In 2008, Cigna formed the Health Equity Council, the governing body of our overall strategy to address health equity. Comprised of leaders from across the enterprise, its purpose is to increase awareness, share knowledge, and exchange ideas about health equity; integrate health equity into every business area and to promote collaboration; and establish and monitor progress on the strategy to promote health equity.

Following a framework similar to HHS’s National Partnership for Action to End Health Disparities, Cigna's five-pronged health equity strategy includes:

- Awareness: increase awareness of the significance of health disparities, their impact, and the actions necessary to improve health outcomes for racial, ethnic, and underserved populations;
- Leadership: strengthen and broaden leadership for addressing health disparities and personalize care for each customer;
- Data, research, and evaluation: improve data availability, coordination, and use and diffuse research and evaluation outcomes;
- Social determinants of health: address the social determinants of health that contribute to inequitable health care among our customers and in the community; and
- Health care services: improve health and health care outcomes for racial, ethnic, and underserved populations.

In the U.S., employers are the most impactful and effective communities of health, with their motivation for healthy workforces driving individual engagement programs. Physicians and hospitals that are oriented to personalized engagement with patients, and aligned to value-based outcomes, are best positioned to counsel individuals to make optimal health care consumption choices. Cigna embraces our role as a “connective fiber” or enabler, helping to connect and mobilize employers, health care providers and communities to create affordable, high-quality health outcomes for individuals. In addition to coordinating community initiatives, Cigna can enhance each partner’s individual efforts. For example, with providers, we can help implement social determinants screening tools, connect to community partners for referral options, and utilize systems and data analytics capabilities for population health efforts. Working together, each of these stakeholders plays a crucial role in contributing to better and more affordable health care.

* * *

**Rural Health Strategy**

Our overall rural network strategy is to work with our clients to build a strong allegiance with the local hospital, which is usually the only one available in the area. If the hospital supports network development and assists in recruiting efforts, we believe health care providers will be more motivated to join.

Our rural strategy differs from our urban strategy in the following ways:

- We pursue less aggressive discounts in rural areas because of lack of competition.
- Because many of the providers may not be accepting new patients, we often sign more doctors per member than we would in an urban area.

Regardless of geographic area, we provide the same level of provider-service support, such as credentialing, training/education, data analysis, troubleshooting, and recredentialing. In addition, our local provider service teams become familiar with the area and maintain communication with doctors and their staff. As we review our health care provider networks, we use the same access and availability standards for behavioral health as we use for medical. We also use the same process to cover care provided by an out-of-network provider as we do for one in-network in the rare event Cigna is unable to identify an appropriate, available in-network provider.

Cigna’s health care provider relations department is committed to working collaboratively with health care providers to deliver innovative solutions that ultimately lead to better access and participation. To that end (and specific to access), we proactively monitor the adequacy of the national network by combining eligibility data and current provider counts into a single tool, the network adequacy report, which we publish quarterly with county-
level data. We determine provider-to-member ratios according to access standards for each type of provider by geography. We use this report to identify areas where an opportunity exists to develop actions plans to enhance the network through contracting activities.

To ensure our nationwide network meets the needs of the members we serve, our health care provider relations department utilizes various measures. For example, our reports yield the number and location of the members we serve compared to our network providers. The provider relations team uses this information, in combination with their assessment of each area’s unique barriers to access (e.g., traffic patterns, natural barriers such as rivers and/or mountains, preference for treatment in urban/nonurban area) to manage and grow our network. Further, our health care provider management and referral system ensures that each geographic area our network consists of facilities and providers offering behavioral health services and specialties. The system can identify providers and facilities by location, services, and contracted providers with admitting privileges.

To further support member participation, we also do the following:

- oversee recruitment activities to ensure appropriate network access and adequacy of needed specialized services by
  - responding to sales and account management requests;
  - monitoring out-of-network and ad hoc utilization patterns;
  - recruiting specialties (e.g., autism, EAP services); and
  - maintaining the network to ensure composition, accessibility, and accuracy.
- emphasize website directory maintenance and expansion

**Provider and community collaboration to prevent and treat opioid misuse**

Cigna’s collaborative relationships with providers are a cornerstone of our strategy. Our broad and deep relationships with health care providers mean we are able to connect and support customers at multiple touchpoints in their lives and in the communities where they live and work, not just when they connect with us. We build networks of high-quality, efficient providers focused on delivering competitive costs while still providing customers with access to excellent, evidence-based care. Cigna also works closely with providers as a valued resource for information to improve health care quality, efficiency, and affordability.

Nowhere is this collaborative effort more important than in confronting the national health crisis brought about through the misuse and abuse of opioids. Cigna sees the dangerous impact of opioid use disorders every day – on society and on our customers. In 2016, we brought together resources across our medical, behavioral, and pharmacy programs to identify ways in which we could harness our physician-partnership model to interrupt the cycle of addiction while assuring that people who have no alternatives to manage their pain retained clinically-appropriate access to the remedies prescribed by their doctor. We reached our goal to reduce opioid use among commercial customers by 25 percent nearly a year ahead of schedule. A major factor in reaching this goal was our work with expert advocacy groups and major stakeholders to change the national conversation and share best practices around substance use disorder awareness, prevention, and treatment.

We also developed resources for our provider and employer partners to help further support their efforts, including an employer toolkit with employee communications and videos. The Quality Improvement Playbook for our physician partners contains addiction and drug screening resources, patient educational materials, information about rehabilitation facilities, and sample quality improvement programs initiated by other network providers.

In June 2018, Cigna intensified its commitment to curtail the opioid epidemic by focusing new drug prevention and treatment efforts in targeted U.S. communities. We will apply extensive, integrated experience across medical, behavioral, and pharmacy care and in helping people with chronic conditions – and will collaborate with employers, customers, prescribing clinicians, pharmacists, and community-based organizations to reduce the
number of opioid overdoses by 25 percent among our commercial customers in these communities by December 2021.

Initially, Cigna will focus its local efforts in areas where a sizable number of Cigna commercial customers reside and where there are higher than average overdose rates, including communities in the states of Connecticut, Maryland, New Jersey, and Virginia and in the metropolitan areas of Chicago, New York, Philadelphia, and Washington, D.C. The goal is to reduce prescription and illicit opioid overdoses in these areas, and Cigna will advance initiatives that impact both Cigna customers and the communities at large. To support this initiative, Cigna and the Cigna Foundation will expand and accelerate the impact of community-based organizations that are leading localized programs. Cigna intends to learn from initial efforts during the three-year time period and expand to other communities over time.

Cigna has expanded an existing program that uses predictive analytics to identify customers who are most likely to suffer from an opioid overdose and prompts interventions to help prevent the overdose from happening.

In addition to continuing national efforts to address the opioid epidemic, Cigna will partner locally to develop immediate and long-term approaches that make it easier for people to access treatment for substance use disorders. Examples include medication-assisted treatment, comprehensive pain management and enhanced support and counseling, and making naloxone more readily available for treatment of an overdose.

**Integrated Pain Case Management**
Designed in conjunction with Cigna’s pharmacy benefit utilization management opioid oversight. Specially trained case managers who have nursing experience work with providers and customers to support care coordination needs for mechanical therapy (physical therapy, acupuncture and chiropractor services, as needed), pain management, behavioral health and other alternative therapies to reduce opioid use and ensure strong coordination of care.

**Comprehensive Pain Management Program Pilot**
Works directly with primary care providers to manage customers with back pain (a common cause of chronic pain) to assure consistent application of evidence-based clinical guidelines – including non-opioid options for managing pain. Preferred providers are used for mechanical therapy, pain management and behavioral health services (including detox/Medication Assisted Treatment (MAT), co-management of behavioral conditions, cognitive behavioral therapy).

**Empowered Decisions Pilot**
Tests the impact of cognitive behavioral coaching over the phone, complemented by video and print resources for customers with back pain. Currently piloting with American Specialty Health in 20 states.

**Preferred Pain Providers**
Methodology to identify preferred pain providers – anesthesiologists, pain managers, psychiatrists – based on a series of cost and quality indicators. This helps doctors in our Cigna Collaborative Care® program know of high-quality providers to refer patients.

**Pharmacy benefit oversight has a triple aim**
- Find, manage and promote tapering for those taking a high daily dose. Avoid first use. Offer tight oversight for highly potent historically dangerous opioids These interventions are supported with behavioral support, as well as care coordination assistance for services such as pain management alternatives, behavioral health services, counseling on covered detox therapy and easily accessed, affordable opioid reversal agents, and help in finding Cigna-designated substance use treatment providers/facilities.

**Cigna’s Substance Use Coaching Program**
Early intervention/enrollment in program and follows customer through his/her recovery journey. Connects customers with a team of case managers who specialize in substance use disorders (SUD). Helps individuals make the behavioral changes and first steps necessary – such as outpatient treatment – to initiate and engage in treatment for substance use disorders. Care coordination along with primary care physician. Referrals to a designated substance use treatment provider. Referrals to pharmacy benefit experts and in-network and community resources. Education for families about substance use, support group info and available treatments. Monitoring of treatment adherence and progress

**Medication Assisted Treatment (MAT)**

Under a medical or behavioral provider, MAT can include a combination of therapy and medications to help those identified with opioid use disorder.

**Cigna Rx Claims Connect**

Uses combined medical and pharmacy data to tightly manage use of opioids but remove prior authorizations for people who need them the most, such as people with cancer, sickle cell diseases or in hospice.

**Free national Veteran Support Line**

This is available 24/7/365. This hotline is for all veterans, their families and caregivers – whether or not the veteran is a Cigna customer. The support helps veterans by connecting them with services and resources for pain management, substance use counseling and treatment, financial issues, food, clothing, housing, safety, transportation, parenting and child care, aging services, health insurance, legal assistance and more.

**Advocacy**

We are advocating for policy solutions at state and federal levels that advance prevention and optimal treatment.

- Modernize the sharing of addiction treatment records, allowing providers to treat substance use disorders in a coordinated way, like other chronic diseases.
- Provide health plans and other payers access to state prescription drug monitoring programs (PDMPs). PDMPs collect, monitor and analyze electronically transmitted prescribing and dispensing data submitted by pharmacies and practitioners. Access to PDMPs would greatly enhance the ability of regulators, providers, pharmacies and insurers/health plans to monitor and manage opioid utilization.
- Encourage electronic prescribing to aid efforts to prevent prescription tampering, improve security, reduce fraud and minimize the likelihood controlled substances will end up in the wrong hands.
- Expand Medicare coverage for alternative pain treatments. Coverage of alternative pain treatments and therapies could reduce demand for opioids to address chronic pain. Congress could authorize Medicare coverage of alternative therapies for the purpose of treating chronic pain in cases where beneficiaries have been identified for potential opioid misuse.

**Improving Social Determinants**

For more than a decade, Cigna has been a leader in promoting identification of health disparities and influencing the development of solutions that will result in more equitable health among our customers.

In 2018, Cigna added a new goal to our Health Equity Strategy that calls for addressing the social determinants of health (SDoH) that contribute to inequitable health among our customers and in the community. We understand that the health of those we serve includes not only physical health but also emotional, social, environmental, and financial well-being. Supporting customers with the SDoH that impact their health and affordability of care is a part of Cigna’s overall commitment to “whole person health,” and our enterprise wide strategy on SDoH.
Early 2019, Cigna formed the Social Determinants of Health Governance Council to address a multitude of needs and efforts relating to SDoH, including the needs of our clients. The council is comprised of stakeholders from across the organization who are working together to execute a shared strategy to address the social determinants of health that influence health outcomes and contribute to health disparities among our customers, and throughout the communities that Cigna services.

As part of this strategy, Cigna is exploring new opportunities to consider how interventions that address upstream social and environmental factors can improve downstream health outcomes to improve quality and affordability of care. One strategic priority is to raise awareness among our clients about the importance of SDoH. We have created a white paper, which will be available soon, describing how Cigna is supporting our customers facing SDoH as part of our programs and services, as well as guidance on how employers can take concrete actions to address the SDoH that impact health outcomes, utilization of care, and health care costs. Additionally, we are assessing how to provide critical insights to clients that can help guide them in identifying employee populations whose SDoH are preventing them from achieving optimal health. Cigna will also be collaborating with providers and clients to pilot efforts to personalize solutions for employee populations and achieve better health and affordability.

**Home-based care delivery**

Cigna has years of proven success in helping physician practices transform from dependence on fee-for-service to engagement and partnership in value-based arrangements, rewarding them for the outcomes they achieve rather than the volume of services they provide. CareAllies, a Cigna subsidiary, brings together our existing, successful provider enablement capabilities from across the enterprise to provide this partnership, including through Alegis Care, another Cigna subsidiary, serving homebound Medicare and Medicaid patients.

Providers for Alegis Care chronic care management and complex care programs identify and address various social determinants that affect the health of our customers. As home care providers, we enter the patient’s home and are able to independently evaluate multiple aspects of a patient’s environment during a single visit. We can then take this information and involve other providers, such as licensed social workers, case managers, and ancillary staff including physical and occupational therapists, to work as a team to improve access to care and at the same time address barriers. Our ability to work together and support each individual patient can be demonstrated with our patient Betty.

---

Betty is a woman with an intellectual disability who lived with her mother and brother until her mother passed. Her brother then became Betty’s sole caregiver. He enlisted the help of the primary care physician (PCP) due to worsening behavioral issues brought on by the mother’s death. The PCP tried different sedatives to calm her behavior, however, this inadvertently led to over-sedation, multiple admissions, and hospital-acquired complications. By now, Betty was malnourished with bedsores and unable to walk or feed herself. It was at this time that Alegis Care became involved. Our physician came into the home, spent time with Betty and her brother, learned about the specific challenges he faced and developed strategies to deal with her outbursts without medications. Over time, her medications decreased and, with physical and occupational therapy, and the help of our licensed social worker, Betty began to improve. Betty is now walking, eating, and enjoying trips to the shore with her brother. We attribute this success to not only hard work on the brother’s part but also to our multidisciplinary approach to this patient’s specific needs.

---

Our nurse practitioners and physicians are able to document family support, accessibility of care, and barriers to medication adherence as well as the safety of the home environment during our visits. We are uniquely positioned to identify risk factors of social determinants of health when welcomed into their home. As part of our best practices, our providers complete an assessment template which can then lead to the involvement of other disciplines to address specific concerns. We check pill bottles for adherence, open the refrigerator to determine
need for food services, and evaluate the safety of the living situation. Depending on the needs of the individual patient we can also enlist our licensed social worker to help patients overcome barriers to accessing food assistance and home health aides. We can discuss improving medication adherence with the help of our pharmacists and enlist physical and occupational therapists to ensure the safety of our customer. Once invited in, we are able to understand and then address the individual’s barriers to care and how we can support each patient, given his or her unique health situation, needs, and challenges.

We have shared this assessment template below.
Health Matters Care Management community support program

We know many factors shape an individual’s health care experience, including access to care, environment, behaviors, culture, genetics, community, and social influences. We also know individuals are better able to focus on health improvement when their living environment is stable. We created our community support program as part of our Health Matters Care Management Preferred and Complete medical management programs to identify and address barriers that can limit the ability to focus on health improvement. This program is offered to our commercial clients as a part of our Health Matters Care Management enhanced medical management solution.

A joint medical and behavioral team approach is the foundation for the program. When medical case managers or behavioral care managers identify a need that can be best addressed through the community support program, they refer the individual to that resource. The community support program care managers are behavioral clinicians who: assess basic biopsychosocial needs; identify and prioritize needs; research community supports to assist in meeting needs; and help individuals connect with the resources identified for them.

The care managers can also perform an assessment of an individual’s behavioral health and, when they identify any issues, can make appropriate referrals to behavioral providers or programs. In addition, community support program care managers work closely with medical case managers and other clinicians to refer customers experiencing medical issues to case management or other available programs. The community support program licensed clinicians can help customers address the following kinds of needs:

- food
- safety
- shelter
- clothing
- transportation
- access to care
- emotional support
- financial services

These clinicians use a search engine to locate both national and community-based resources. The search functionality includes direct service nonprofits that have active websites, such as homeless services, disability services, and supportive housing programs. The search functionality also includes direct service programs for organizations without active websites, such as food pantries, utility assistance, and civic programs. These resources are confirmed every six months. A case study of the community support program is below.

“Andy” was a 53-year-old chef who had been working in the food industry for 30 years when he first became a Cigna customer. Previously identified as a type 2 diabetic, he was diagnosed with lung cancer with metastatic disease to the liver just before becoming a Cigna customer. Because of this diagnosis, he was only able to work a few hours a week and was worried about his ability to support his family and pay medical bills.

Just days after becoming a Cigna customer, Andy was admitted to the hospital with respiratory insufficiency, hemoptysis, and a cough. Andy’s case manager identified that Andy was at risk for completing his scheduled chemotherapy due to his inpatient admission copay. He was also at risk for not filling all of his prescribed medications because of the associated expense. His case manager referred Andy to the community support program.

The community support program clinician contacted Andy’s hospital to discuss the application process for financial assistance due to financial hardship. A hospital representative worked with Andy to fill out the forms needed to determine his eligibility for financial assistance. The
representative also shared information with Andy and his family about an online fundraising site to help his friends and family raise money for his care.

Andy’s community support program clinician arranged for a conference call with Andy and Cigna Pharmacy to discuss cost estimates for the various drugs his doctors prescribed. During this call, Andy learned that changing from his current pharmacy to an in-network pharmacy and/or Cigna home delivery would result in a zero-dollar copay, and the community support program clinician assisted him in making that change.

**Data analytics**

For the past several years, Cigna has been exploring opportunities to more effectively identify and address the social needs of our customers in order to drive better health outcomes. Socioeconomic conditions within a community determine important aspects of social organization, structure, stratification, and/or the environment where individuals live. These aspects together mold and influence the health of people living in the community. Many studies demonstrate the relationship between under-resourced communities and poor health outcomes. One way to determine and/or characterize a community is to use several U.S. Census indicators representing the multi-dimensional aspect of a community and combine them to arrive at a composite score.

In 2018 Cigna created the Social Determinants Index (SDI), a relative composite metric that characterizes a community at the Census-tract level based on the following six domains: economy, education, cultural, health coverage, infrastructure, and food access. A lower SDI score represents a Census tract with a lower level of social determinants risk factors than a community with a higher SDI score.

The SDI is designed to help us better understand the potential health disadvantages a community and the individuals within that community may face based on their geographic location. A health disadvantage is the inability of people to fulfill basic human needs required for full social participation and optimal health and well-being. These needs include, but are not limited to, the needs for economic security, food, housing, safety, transportation, and education.

While the data that populates the SDI is primarily Census data, and inferences made at an individual level may not accurately depict the individual's situation, Cigna is using the SDI to better understand the challenges in a local community that may be influencing health status, health care utilization and outcomes. It allows us to design unique, carefully targeted interventions to help Cigna customers overcome the barriers that impact their ability to focus on their health. It also improves our ability to evaluate the relationship between social determinants of health and health inequalities.

We are beginning to implement the SDI throughout the various clinical programs that support our members. For example, an evaluation of Cigna case management programs revealed the impact of SDI in case management engagement and outcomes. The evaluation demonstrated that as the SDI increases, a customer’s likelihood to engage in case management decreases; however, when customers with a higher SDI do engage, there is a medical cost savings and reduction in emergency room visits. Once engaged, the SDI provides us with an opportunity to ask questions regarding social determinants of health to help address barriers by searching for resources available within their community, such as transportation to appointments or food banks or financial assistance.

Cigna will use the SDI in 2019 to conduct a population health assessment, including social determinants of health risk factors, of our commercial membership. This assessment will include an opportunity analysis of how the SDI correlates with health behavior and health insurance experience. We will leverage the insights from the assessment to inform our products and services, including our chronic disease support programs, as well as customer and client resources.
Insights are also shared with stakeholders in local communities to address those social determinants of health that are impacting the health of our customers in those communities. The data mapping involved in the SDI has already played an important role in our health equity work, such as informing our project conducted in partnership with Bright Star Community Outreach (BSCO), a faith-based nonprofit working in the Bronzeville section of Chicago providing trauma counseling to the surrounding neighborhood. BSCO uses trained faith and community leaders, as well as mental health professionals, as trauma counselors to provide counseling services through a helpline. BSCO’s trauma helpline is a great starting point for individuals who only feel comfortable talking about the violence or stress they have lived through with their pastor, as the helpline is operated by faith leaders in the community. Cigna is going beyond providing Cigna Foundation grant funding to help BSCO with business leadership needs. We are engaging with health systems to understand how we leverage their work as an intake point and hand off into appropriate behavioral and/or medical care. We will assist in coordinating community resources that treat the whole person, including basic needs (food, shelter, transportation), medical (primary care, well-child care), and additional behavioral health services.

As a result of what we learned from SDI analysis, we created strong community partnerships with Congregational Health Network and Methodist Le Bonheur Healthcare to increase breast cancer screening rates among African-American women in Shelby County, Tennessee. Using geographical information system mapping, clusters or “hot spots” were identified throughout the Memphis metropolitan area where African-American customers were not being screened, largely due to access issues. More than 1,200 Cigna customers who had not been screened for breast cancer in the past 24 months and who resided in seven “hot spots” within the community were mailed a customized invitation to be screened on a mobile screening van at a local church in their specific neighborhood on evenings and weekends. The evaluation found that 385 of the 1,200 previously unscreened women mailed the invitations had a mammogram in the four months following the invitation (including six women on the mobile van). As a result, there was a 14 percent increase in the gap closure rate for the targeted population compared to the overall screening rate for Shelby County. The ultimate goal is for each local market to collaborate with providers, employers, and community organizations to build solutions that meet the needs of customers and drive better health outcomes in the overall community.

Cigna investment as example for local policy makers to consider

In 2017, Cigna introduced its Community Ambassador Fellowship Program, which offers eligible Cigna employees an opportunity to take a sabbatical-style paid leave from work to create life-changing impact in communities where they work and live. Fellows embody Cigna’s mission by combining their passion and expertise to positively impact the health, well-being, and sense of security of individuals and communities around the globe. Program participants are selected through a competitive application process for a one- to three-month fellowship, and receive full salary and benefits plus a stipend to support their community work.

Projects selected for the 2019 program focus on important issues impacting our communities, including opioid and substance abuse, food insecurity, health equity, social isolation, and homelessness.

- The Recipe for Success Foundation works to make healthy food appealing and available to everyone. Hope Farms, located in Houston, Texas’ low-income, inner-city neighborhood known as Sunnyside, provides residents access to fresh produce, cooking, gardening, nutrition education programs, job training for military veterans, and open farm events. Our fellow will plan and launch a new SPICE Guild, the purpose of which is to increase the opportunities for children and adults to learn about how food is grown and nutrition and cooking skills that enable them to make life-long healthy food choices.

- In Denver, Colorado’s urban Elyria Swansea area, families have little access to fresh food. Residents face significant challenges related to food access, poverty and environmental degradation, impacting their health and security. The GrowHaus provides residents with food education, production and distribution. Our fellow’s project will focus on supporting the renovation of the final portion of The GrowHaus building, including a Teaching Farm, which is key to helping them meet their program goals. He will use tools and consumer engagement principals, like design thinking and human-centered design, to leave The GrowHaus with tools to help them better serve their community.
• Approximately 500,000 people in the U.S. are homeless and Nashville, Tennessee is a microcosm of the national homeless problem. The Bridge is dedicated to helping this underprivileged population with food and necessities for everyday life. Our fellow will use his experience with and passion for Operational Excellence – principles employed by companies that have achieved a high level of success – to consult with The Bridge to solve problems and identify opportunities so that they can continuously improve the community environment.

Central to our mission, improving health is at the heart of everything we do at Cigna; this includes improving the health of our communities. Every day, the people of Cigna are making a difference in communities around the world. Each of our local markets works collaboratively to decide on its approach to community investments and engagement. Established more than 50 years ago, in 1962, the Cigna Foundation carries out our corporate philanthropy goals of bringing Cigna’s mission and brand promise to life for individuals and communities around the globe. The Cigna Foundation accomplishes these goals through strategically focused charitable grants to nonprofit organizations whose work enhances the health of individuals and families and the well-being of their communities. The focus of our grant funding is to support nonprofits working to eliminate health disparities and improve access to care. Many of these grants utilize community health workers to accomplish these goals.

Schools and youth organizations
• Early in 2019, Cigna kicked off Healthier Kids for Our Future, a $25 million five-year global initiative to improve the health and well-being of children. Cigna’s 74,000 global employees will work together to put children on a healthier path, starting with reducing childhood hunger and improving nutrition in local communities. Today, Cigna employees are working side-by-side to pack food for elementary school students who might otherwise go hungry on the weekends, in partnership with the non-profit organization, Blessings in a Backpack. Healthier Kids for Our Future is part of Cigna’s $200 million investment to support local communities and improve societal health announced at the close of the company’s transaction with Express Scripts in December 2018.
• Forsyth Institute: In the New England market, the Cigna Foundation provided a grant to Forsyth Institute to enable them to treat more underserved children for dental health through their ForsythKids mobile dental program. With this grant, Forsyth is now able to serve more kids in a school in Boston, through their on-site, evidence-based, comprehensive prevention services, and early identification of urgent oral conditions including pain and infection.
• Blessings in a Backpack: In addition to offices across the country that sponsor Blessings in a Backpack and host employee engagement packing events, the Cigna Foundation and Cigna have contributed $450,000 – including a $100,000 World of Difference grant – to feed school children on the weekends.
• Mandell Jewish Community Center of Greater Hartford: Cigna and the Cigna Foundation partnered with the Mandell Jewish Community Center to deliver youth mental health first aid to members of the community, free of charge. This training is designed for adults who regularly interact with children ages 12 to 18, including teachers, clergy, coaches, and parents.

Provider organizations
• Methodist Le Bonheur Hospital: Since 2005, a cornerstone partnership with our local Memphis office has provided the hospital with a $300,000 Cigna Foundation grant, helping them tap into local churches to improve patient/doctor communication, map assets, develop a health network, and support hospice residents.
• Maryland Center for Health Equity (M-CHE): With the help of a $200,000 Cigna Foundation grant, M-CHE and Cigna partnered to encourage colorectal cancer screening among African-Americans through health promotion initiatives in barbershops and beauty salons in Prince George’s County, Maryland.
• Los Barrios Unidos: The Promotoras de Salud program advocates for clients, makes appropriate referrals, assists with health education classes, and connects patients with other local organizations in Dallas, Texas. Now, thanks to a $97,000 Cigna Foundation grant, they have been able to open an asthma clinic to
support the program, which has already reduced emergency room visits for asthma by 27 percent in its first year.

- **Mount Sinai**: With the support of a Cigna Foundation grant, the TeenHEED peer intervention program in New York City, New York, identifies young people at risk and connects them with people in their own neighborhood who can help teach them healthier habits.

- **St. Vincent’s HealthCare**: With the help of a Cigna Foundation grant, a local Native American works with clinicians to bridge the gap between St. Vincent’s HealthCare and six local tribes in Montana.

- **El Centro de Corazon**: With the help of a $100,000 Cigna Foundation grant, the South Texas Cigna office is helping El Centro de Corazon reach women who face barriers to access in an underserved neighborhood.

- **Rush University Medical Center**: The Cigna Foundation provides grant funding to support the Rush Health Legacy Program for African-American women in underserved neighborhoods in Chicago. The curriculum aims to reduce diabetes through a congregation-based approach.

- **Lurie Children’s Hospital of Chicago**: A grant from the Cigna Foundation supported the creation and piloting of a tool to assess a child’s social determinants of health, including mental health, family structure, and environmental influences, which allows Lurie’s clinicians to provide interventions and track outcomes for pediatric patients.

### Nonprofit organizations

- **Achilles International**: Cigna has partnered with Achilles International since 2012, referring our long-term disability customers to Achilles, sponsoring Walt Disney World® Half Marathon Achilles Athletes, donating handcycles, and providing a $100,000 Cigna Foundation grant to study the effects of exercise on autism.

- **Feeding Children Everywhere**: Since beginning our partnership with Feeding Children Everywhere in 2012, more than 15,000 employees from Cigna offices around the country have packaged more than 2.5 million meals for hungry children around the world.

- **March of Dimes**: For the past five years, Cigna employees at our Bloomfield, Connecticut, headquarters have hosted a spin-a-thon to raise money for the local March of Dimes and raise awareness for the annual walk. Cigna is a national sponsor of the March for Babies walk and 5K. Between these spin-a-thons and our many marches, we have raised more than $30 million for the March of Dimes over the last 20 years. Additionally, the Cigna Foundation has just awarded the March of Dimes with a multi-year grant to allow them to expand their Supportive Pregnancy Care program into seven new states.

### Veteran support programs

Veterans disproportionately face various health challenges such as mental health disorders like depression, post-traumatic stress disorder (PTSD), and other conditions. Challenges are also experienced by those closest to veterans, such as their families and caregivers as they readjust to civilian life. To show our appreciation for their sacrifices and to help veterans combat opioid addiction, Cigna introduced a free national Veteran’s Support Line available 24/7/365 for all veterans, their families, and caregivers. The Veterans Support Line is available to all veterans, whether or not the veteran or caregiver is a Cigna customer. The service provides resources for pain management, substance use counseling and treatment, financial issues, food, clothing, housing, safety, transportation, parent and child care, health insurance, legal assistance, and more. In addition, Cigna offers a weekly Mindfulness for Vets session based on evidence-based therapy proven to have a positive impact on depression, stress, anxiety, performance, sleep, addiction, and PTSD.

The Cigna Foundation also gave a $300,000 grant to the Iraq and Afghanistan Veterans of America to help expand its Rapid Response Referral Program, which is a community effort to help veterans meet their life goals through connections to education, medical and legal resources, and benefits. More than 8,000 veterans have been assisted.
Our New England market is affiliated with Home Base, a nonprofit organization formed by the Red Sox Foundation and Massachusetts General Hospital dedicated to healing the invisible wounds (PTSD, anxiety, depression, etc.) for veterans, service members, and their families through world-class clinical care, wellness, education, and research. We sponsored their Run to Home Base event in July, and recently initiated a program where employee-written thank you notes will be distributed to those who are cared for through the clinical program at Home Base.

**Caregiver support pilot program**

In carefully studying the social challenges that make it difficult for employees to focus on their health, we have been among the first to realize the prominence – and effect – of caregiving. Nearly 44 million people in the U.S. spend 20 to 39 hours per week caregiving for ill or disabled loved ones, making it difficult to manage their own health and their family’s health costs. As a result, their medical costs are eight percent higher than their non-caregiving peers, costing their employers $34 billion in additional health care spending. Caregiving also leads to higher absenteeism rates in the workplace, and caregivers are three times more likely to access short-term disability benefits.

Cigna is developing a three-phase pilot to help caregivers navigate whole-health care for both themselves and their aging parents, including: programs focused on caregiver education; community resources; financial and legal advice; and stress management. Our goal is to learn how to best engage caregivers, what their preferred channels of connection are, and the impact of interventions on their satisfaction and total medical cost outcomes, before rolling out programs to our more innovative clients.

To support Cigna employees in balancing work and life demands, in July 2017, we launched a Caregiver Leave Program. This program is a new benefit that offers U.S. employees up to four weeks of paid leave for employees caring for others, including child bonding, care for a seriously ill family member, or qualifying military support.

**Important barriers to and facilitators of success**

We believe that many of the following trends will directly influence our industry’s position on social determinants and control the pace of change over the next few years.

**Facilitators to integration**

- Increased evidence and acknowledgement of social determinants of health care
- Continued transition to value-based care
- Medicaid expansion
- Recent legislative reforms and regulations
- Initiative success stories in the industry
- Technological innovation

**Barriers to success**

- Interoperability of community partners
- Time, priorities, and budget of health systems
- Lengthy time horizon
- Provider workflow complications
- Policy limitations and pace
- Data challenges
- “Wrong pocket syndrome” (the entity bearing the cost of implementing a practice does not receive a commensurate benefit)
Private sector and local policy maker rationales for making investments in community health

In 2015, Cigna became the first U.S.-based health insurance company to be a signatory of the United Nations Global Compact (UNGC). In 2017, Cigna also joined the UNGC’s action platform: Health is Everyone’s Business, which is a coalition of leading businesses, the UN, and academic and civil society partners, working to develop a global business agenda to make “good health for all” a corporate goal. The coalition supports a principled approach for how business can take action to improve their positive health and well-being imprint in the workplace, marketplace, and community, how to set targets, and report on progress. This work further supports the UN’s Sustainable Development Goal 3 to “ensure healthy lives and promote well-being for all at all ages.”

* * *

The alignment of mission and business results around social determinants of health and other health equity initiatives is a powerful combination that is key to Cigna’s strategic priorities and care model. Cigna’s multi-stakeholder approach for both rural and urban areas uses the power of local market leadership and their established relationships to address each community’s unique needs and pre-existing opportunities for collaboration.

Thank you for your consideration of these comments. Cigna would welcome the opportunity to discuss these issues with you in more detail at your convenience.

Respectfully,

David Schwartz