CIGNA Care Network

Give your employees a smarter way
to choose specialty care.
We’ve done our homework. Our performance-based approach sets additional standards for CIGNA participating specialists. Of the 21 specialties in 16 service areas evaluated, an average of 25 percent of participating providers have earned the CIGNA Care Network designation. Specialists must meet objective, evidence-based criteria. And we include more than claims data, using instead a spectrum of external and internal evidence to build a more complete picture.

Incentives, not restrictions. Unlike many performance-based networks, CIGNA Care Network doesn’t deny benefits to your employees who seek care from specialists without the CIGNA Care Network designation. Instead, CIGNA Care Network offers your employees both performance and economic reasons to choose designated providers.

Experience counts. CIGNA Care Network is the result of 10 years’ experience in network solutions. It offers cost incentives that can lead to informed choices, and tiered benefits for a broad range of options.

CIGNA Care Network®. It’s a performance-based approach that encourages informed consumer decisions while maintaining freedom of choice.

Everyone wants it. Performance-based specialty care that can drive better health outcomes and lower total health costs. So how do you encourage your employees to make smarter choices without drastically limiting their options?
What Makes Our Network Unique

Respecting and encouraging member choice. Because CIGNA considered human factors as well as the bottom line, our performance network stands apart from others. Take a look at the differences.

21 specialties in 16 service areas. Why does CIGNA focus on the 21 specialties listed below? Because the care associated with these categories accounts for 95 percent of specialty care and 60 percent of total medical/pharmaceutical spending.

- Allergy/Immunology
- Cardiology
- Cardiovascular Surgery
- Colon and Rectal Surgery
- Dermatology
- Ear, Nose and Throat
- Endocrinology
- Gastroenterology
- General Surgery
- Hematology/Oncology
- Infectious Disease
- Nephrology
- Neurology
- Neurosurgery
- Obstetrics/Gynecology
- Ophthalmology
- Orthopedics
- Pulmonary Medicine
- Rheumatology
- Urology
- Vascular Surgery

CIGNA does not review primary care physicians, facilities and ancillary providers, so they aren’t included in the CIGNA Care Network. However, members still receive covered services from these providers at the standard in-network level, so many members may not see a change in their benefits.
Real choice. Unlike many performance-based networks, CIGNA members are free to receive specialty care from non-CIGNA Care Network designated providers. There will be a different level of benefit, so members have a reason to make thoughtful choices.

Real incentives. CIGNA can help you build a benefit structure that uses cost incentives to encourage use of CIGNA Care Network-designated providers. As shown in the diagram, there are three benefit levels: CIGNA Care Network; In-Network; and Out-of-Network. Members pay the highest level of copayments and coinsurance for out-of-network providers, and lowest for CIGNA Care Network designated providers. Not all members will be motivated by cost savings alone. But for those who are (and they’re on the rise!), cost transparency can encourage use of CIGNA Care Network providers. And your employees benefit from lower copayment and coinsurance levels.

<table>
<thead>
<tr>
<th>Type of Provider</th>
<th>Met CIGNA Credentialing Standards</th>
<th>Met CIGNA Care Network Criteria?</th>
<th>Level of Coverage</th>
<th>Member’s Copayment/Coinsurance Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIGNA Care Network Designated Specialist</td>
<td>Yes</td>
<td>Yes</td>
<td>In-Network</td>
<td>Lowest</td>
</tr>
<tr>
<td>In-Network, Not Designated</td>
<td>Yes</td>
<td>No</td>
<td>In-Network</td>
<td>Higher</td>
</tr>
<tr>
<td>Out-of-Network</td>
<td>Not evaluated</td>
<td>No</td>
<td>Out-of-Network</td>
<td>Highest</td>
</tr>
</tbody>
</table>

Consumer-driven. Participating providers – both CIGNA Care Network designated and not – receive the same total compensation for their services. What changes is the percentage paid by the member and the plan. This makes CIGNA Care Network a real consumer-driven option. Something to consider as your company looks for solutions to rising health costs that emphasize personal choice.

Real leverage. The more you encourage employees to visit CIGNA Care Network-designated providers, the greater your opportunity for cost reduction. CIGNA can help you select appropriate copayment and coinsurance levels, so you can have a real impact on CIGNA Care Network utilization.

Solid criteria. Our selection process for CIGNA Care Network physicians strikes a balance between quality and efficiency. We use state-of-the-art tools to analyze specialists’ performance. And we look at measures from third-party organizations dedicated to quality of care and cost effectiveness. It’s a rigorous process that gives us a broad picture of comparative performance.
Available with many CIGNA products. Beginning January 1, 2006, you can include CIGNA Care Network with any of the following products:

- Network**
- Network Open Access**
- Point of Service (POS)
- Point of Service Open Access

**Includes in-network and CIGNA Care Network benefits only.

*In March 2005, the Center for Studying Health System Change found that in the past three years, more Americans (59%) are willing to trade boundless choice for lower costs. This compared with 55% in 2001.

Why CIGNA Care Network Works Better for Everyone

Everyone benefits. CIGNA Care Network was designed to deliver benefits to all concerned. From your valued employees to your human resource and finance departments, to specialists whose merits deserve recognition and who want to increase or maintain their patient panel. Here’s how.

Advantages for your COMPANY.

It's a simple philosophy. Efficiency plus quality can drive better outcomes.

Effective results. CIGNA Care Network was designed to generate an estimated first-year cost savings of up to five percent. Actual savings will depend on many factors. Key among them is the difference in benefits between the CIGNA Care Network tier and the in-network tier. The greater the difference, the more you can expect to drive utilization of CIGNA Care Network specialists.

More time on the job. If you can reduce medical crises and complications, you can look forward to lower levels of absenteeism.

![Graph showing Risk-Adjusted Rates of Hospitalization and Readmissions within 30 days for CIGNA Care Network and Other In-Network.](source: CIGNA internal analysis of administrative claim data, 2003-2005)
Advantages for your EMPLOYEES.

Minimal disruption. Since our current in-network providers still participate with CIGNA, members can continue seeing them if they wish. So the doctor-patient relationship can remain intact.

The benefit of choice. The specialist's facility, location, amenities and bedside manner may all count as much as outcomes to some members. CIGNA Care Network honors their values. We don't deny benefits to members who seek services outside of the CIGNA Care Network (as long as your underlying medical plan includes out-of-network benefits).

A clear incentive. CIGNA Care Network rewards certain choices with lower copayment and coinsurance levels. This respects individual choice while responding to the recent trend among Americans to favor a lower cost over boundless choice.

Advantages for SPECIALISTS.

Stable compensation. Total compensation for participating providers remains the same – whether an in-network specialist is designated in the CIGNA Care Network or not.

Comprehensive criteria. Claims don't always tell the whole story. For instance, a patient may not receive a normally prescribed drug due to contra-indications. Or, certain interventions may not be claimed with CIGNA. With a claims-only approach, these might appear as omissions. So we look at third-party measures such as The national Committee for Quality Assurance (NCQA) recognition and board certification. Taken all together, they can give us a more accurate picture.

High honors. Being recognized as a CIGNA Care Network provider is an achievement that existing patients can understand and appreciate.
Underlying Criteria for CIGNA Care Network Physicians

CIGNA Care Network specialists. Reviewed in more ways than one. To set a high yet reasonable standard, we use a multi-step process to evaluate specialists, each with a specific criterion. Of all the specialists we review, an average of 25 percent receive CIGNA Care Network designation.

- **Step 1: CIGNA network participation.** Specialists are drawn from our larger networks, meaning they already met CIGNA’s credentialing standards. To begin the process of building CIGNA Care Network, we reviewed over 34,000 specialists in the covered markets.

- **Step 2: NCQA recognition.** The National Committee for Quality Assurance (NCQA) is a private, not-for-profit organization that monitors health plan quality. For physicians, this means a rigorous on-site review. The NCQA also uses HEDIS tools to look at other indicators. Immunization records, for instance. And they conduct frequent member satisfaction surveys to weigh intangibles (like bedside manner) alongside the harder facts. Any specialist with NCQA recognition for diabetes or cardiac/stroke care automatically receives the CIGNA Care Network designation.

- **Step 3: Board certification.** To proceed to the next level of evaluation, individual specialists must be board-certified in their field. Physician groups must consist of at least 80 percent board-certified specialists to continue.

- **Step 4: Performance Index.** Every specialist who receives the designation must have seen at least 20 unique CIGNA members over a two-year period. This helps us establish statistical validity – we need a certain volume of data to analyze in order for our findings to be trustworthy.

For those who meet this screen, we measure their relative efficiency using Episode Treatment Groups, or ETGs, developed by Symmetry Health Data System, Inc. ETGs capture how a physician manages an entire episode of care, from diagnosis through treatment. It is not a measure of cost, but more a measure of complications and re-admissions. ETGs allow us to see how doctors compare with others in their region in the way they manage patient treatment, then select the top-rated doctors in each specialty to receive the CIGNA Care Network designation.

- **Step 5: Evidence-based guidelines.** This applies only to selected specialties where evidence-based guidelines are provided by the Ambulatory Quality Alliance: cardiology, endocrinology, neurology, OB/GYN and pulmonology. CIGNA looks at cervical cancer and breast cancer screening rates among OB/GYNs, for example. The top 5 percent of physicians who meet our standards for compliance with these evidence-based guidelines earn the CIGNA Care Network designation.

The NCQA estimates a 4% decrease in hospital days for each 5% percent improvement in quality care.

Of the 8,300 specialists with the CIGNA Care Network designation, 91% were board certified in their specialty in 2005. Compare that to 88% of CIGNA participating specialists who did not receive the designation.

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How CIGNA Communicates Benefits to Employees

A network of great communications. Once you select CIGNA Care Network with any eligible health insurance product, we’ll help your employees understand the benefits. We’ve developed communications that explain the advantages, counter the myths, and make it easy to find providers with the CIGNA Care Network designation.

Before Enrollment. We provide variety of print and electronic materials, including newsletter articles, Q&A documents, and messages that you can integrate into your employee communications.

During Open Enrollment. Your employees will receive an enrollment kit, including brochures that explain the details of the program and highlight the benefits of seeking care from a CIGNA Care Network provider. Up-to-date directories are available online. We can also host enrollment events and include a presentation that explains the product.

After Enrollment. We’ll reinforce the use of the CIGNA Care Network with newsletter articles and e-mail messaging that you can incorporate into your employee communications. CIGNA also delivers a member handbook and messaging on myCIGNA.com.

Good Choice

The consumer-driven concept is no longer a trend. It’s becoming a recognized way to heighten personal health awareness. To drive decisions based on quality, not just cost. And, ultimately, to lower everyone’s costs through preventive and efficient care management protocols. CIGNA Care Network is one more way you can help make this concept work. You have every incentive. So make a wise choice. Contact your CIGNA representative or broker today. Or visit us online at www.CIGNACareNetwork.com.