

PATIENT ASSURANCE PROGRAM



Dedicated to making insulin more affordable

You work hard to provide an affordable and accessible health care benefit, especially for those living with chronic conditions. Yet essential medication – such as insulin to regulate blood sugar for people living with diabetes – can be challenging to afford.

That's why Cigna is working to provide people who rely on insulin greater affordability and cost predictability so they can focus on what matters most – their well-being. **Through our new Patient Assurance Program, we will help customers pay less for eligible insulin products.**

Improving peace of mind

Today, more than a quarter of the approximately 24 million Americans who are diagnosed with diabetes use insulin – alone or along with other medications – to keep their blood glucose levels in check.^{1,2} We know that some customers struggle to pay for their insulin. With the Patient Assurance Program, customers that have a plan requiring a higher copay, coinsurance, or who need to satisfy a high deductible before having their insulin covered, will benefit the most. **The program reduces out-of-pocket costs by an average of 40%, or more,³ helping remove cost as a barrier for people who need insulin.**

Creating a more sustainable health care system

Cigna, in combination with Express Scripts, is constantly working to simplify and reduce health care costs for a better system for all.

We are proud of this important step to not only address insulin costs, but to create a blueprint for other therapeutic areas where customers may be exposed to higher out-of-pocket medication costs.

How we do it

Cigna will not charge an additional fee for this program. Instead, we are working with drug makers, for eligible insulin products, to apply additional discounts that go directly to the customer to make their out-of-pocket cost no more than \$25 for a 30-day supply of insulin. All of this value is applied at the point of sale.

\$25
maximum

out-of-pocket cost
per **30-day**
supply.⁴

For eligible clients

Beginning in early 2020, the Patient Assurance Program will be offered to many of our commercial clients upon renewal or plan start. Clients must also be upgraded to our new claims engine. Clients must have benefit designs that align to the program requirements. Specifically, the client's benefit design must include a preferred brand cost-share of no more than \$75 per 30-day supply in order for the plan to keep this cost neutral. This will, subject to continued program availability, ensure that customers using eligible insulin products will pay no more than \$25 per 30-day supply.⁵ Government funded plans (Medicare and Medicaid) are not eligible.

Together, all the way.®



Offered by: Cigna Health and Life Insurance Company or its affiliates.

1. Express Scripts research report Diabetes Dilemma: U.S. Trends in Diabetes Medication use, 2017. 2. Centers for Disease Control and Prevention, "National Diabetes Statistics Report, 2017." 3. Express Scripts internal analysis of claims, 2019. 4. Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If a plan provides coverage for certain prescription drugs with no cost-share, the customer may be required to use an in-network pharmacy to fill the prescription. Out-of-network coverage may be excluded or limited by plan terms. Clients must agree to provide "first dollar coverage" (prior to satisfaction of any applicable plan deductible). 5. Plans with higher copays may have to absorb additional cost to get the customer to \$25, after discounts from the drug makers.

Product availability may vary depending on 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 your Cigna representative.

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