



ICS Product Support (ICS Prod Support) Team Overview

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“If you’re going to fail, fail fast”

Purpose: This document provides a summary of ICS Production Support’s workload and the support we provide to our internal and external partners, along with the clients utilizing Cigna for its benefits and various wellness programs through several processes our team has created.

ICS Production Support Team

- Danny Moncada – Informatics Specialist

Team Summary

Mission: To deliver superior customer service & excellent data quality. Our goal is to streamline monitoring & fallout processes to gain complete view into all data coming to Cigna.

Business Goals: Cigna's Health & Wellness Programs depend on accurate information from our trading partners. Our job is to identify issues quickly and accurately, and provide resolution to all data issues to satisfy the Cigna stakeholders as well as the clients we serve. Our team uses a variety of processes implemented to ensure all data is being received on time and the quality of the data is meeting the standards put forth during implementation.

We continuously partner with internal and external Cigna partners to provide assistance wherever our team can. We consistently close any customer/data related issues by taking ownership of them and continuous improvement of our existing processes.

Data Feeds Monitored

Below is a list of all the data feeds ICS Production Support (as well as our offshore team) monitors on a daily basis using our established processes to ensure data quality

1. **Activity** – (used for MotivateMe Incentives)
2. **Biometrics** - (used for MotivateMe Incentives)

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3. **Eligibility** (Non-Medical)
4. **Lab** - (used for MotivateMe Incentives)
5. **Medical Claim**
6. **Pharmacy Claim**
7. **Provider**

Best Practices (Processes Implemented)

For the multiple feeds monitored by ICS Production Support, we came up with several processes to be able to monitor and ensure the data being submitted to Cigna is meeting the data quality checks. Our main data intake, biometric data, is used in the one of the largest incentive programs Cigna has to offer, MotivateMe (MME).

The data submitted to Cigna for the MotivateMe (MME) program is crucial when it comes to customer receiving their incentives, as well as being used in additional wellness programs that Cigna offers. In order to provide our customers and stakeholders with complete satisfaction, we created some additional processes to ensure that data is being received timely and that it is accurate.

Current ICS Production Support Processes

1. Daily Vendor Outreach
2. CCDR and EDM Fallout
3. HRA Fallout (Health Assessment Fallout)
4. Outbound Eligibility
5. Quest Unmatched Data
6. EQE Missing Files
7. HPSM Metric Reporting
8. **Monthly PMPM Reporting**
9. Ticket Triaging
10. “White Glove Service”

Daily Vendor Outreach and Correction Process

Purpose: ICS Production Support works with a variety of external vendors that deliver data to Cigna on a scheduled basis. In order to maintain the relationships with our vendors, we put into a place a process to ensure that we have one point of contact for Cigna and one point of contact with the vendor. Having one point of contact will not only provide accountability but ensure outreaches made to the vendors for data corrections or missing data is controlled and flowing through one source rather than multiple.

How it works: The main point of contact is to maintain the relationship with the external vendor, track and monitor all submissions that go out to the vendors to ensure they are responding and correcting any data issues. We also share best

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practices and any process improvements with our external vendors by holding weekly meetings with our tier 1 vendors to ensure that everything is meeting their standards as well as ours.

In the past submissions were sent out by multiple team members causing confusion and frustration when working with our external vendors. With this new process we are able to ensure that all issues are being resolved in an organized streamlined process.

CCDR Fallout

Purpose: The data submitted from our external vendors is crucial for the wellness programs. Fallout records are records that do not match the eligibility information we have in our databases to the data that is being transmitted from the external vendors.

Some of the issues we see on a daily basis are incorrect date of births, incorrect first/last names, and incorrect client information as well.

How it works: We have three different types of fallout that we currently monitor and address. CCDR fallout is fallout that occurs within the CCDR database. Once the biometric data is submitted it first goes through an application called External Quality Engine which checks the files to ensure the vendors are populating all the information needed and that the formatting of the file is accurate as well. Once the file check is complete the biometric results will flow downstream to CCDR where it goes through eligibility member matching.

Once the member matching is complete the data that passes will flow to the downstream applications, where the member will be rewarded and also be able to see their biometric results on the MyCigna website. Any fallout is addressed by the ICS Production Support team using the application SAS where we have created a process to take the fallout and re-run it through the member matching process to identify why the records initially fell out and if/what the corrections needed to the record. Once we have the reports generated we share the report with the external vendors for corrections and further analysis.

EDM Fallout

The next type of fallout we address is EDM fallout. EDM is an online application that we utilize to view members wellness screening forms submitted from their physicians. The application processes the form and utilizes the information on the form and matches it against the eligibility information provided from Cigna. When forms are passed a file is then generated and submitted to Cigna on a daily basis for the data to be further processed.

Any records that do not match and moved to fallout work flow queues within the application. The forms are hand written which can cause issues when going through the member matching process. Sometimes the information is not read correctly and we need to manually go in and make changes to the form in order for the information to match and flow to Cigna, in some cases critical information is missing on the form as well.

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HRA Fallout (Health Assessment Fallout)

Purpose: HRA fallout was something that was not monitored until recently. The HRA is a crucial piece when it comes to the MotivateMe program, this piece serves as a gatekeeper for clients before the member can receive their rewards for their biometric completion. Our team created a process to manage and triage the HRA fallout to ensure the HRA completions are being corrected and to identify any issues within the application as well.

How it works: The HRA fallout data is first pulled from the CCDDR database where we then take the HRA fallout and bump it up against the eligibility within CCDDR. Once the information is matched against the eligibility information within CCDDR we then identify the root causes as to why the data is falling out in.

The current issues that cause the HRA fallout are below:

- Account number mismatch
- Chanel Code Mismatch (internal/External member)
- Incorrect First Name
- Gender Code Mismatch
- Last Name Mismatch
- No Member Eligibility
- Timing Issue (pre-effective)

Once the HRA fallout is identified and the reasons are found we work with other internal Cigna teams to help with addressing the fallout and applying the corrections needed as well before the customer calls.

Outbound Eligibility Files

Purpose: The purpose of this process is to delivery eligibility files for a variety of different clients to the vendors that the clients have chosen to use for screening events. Outbound eligibility is not provided to all vendors for all clients and an authorization letter is required for certain vendors depending on the agreement and contract between the client and the vendor. Submitting a second eligibility file to the vendors will provide additional information for member matching before the data is submitted to Cigna to ensure the member information will match our records and flow to downstream applications without any fallout. This will also provide quicker turnaround time for rewards to the clients. It will also limit the amount of information transmitted to Cigna that does not match eligibility at all, which we consider “Ghost Records.”

How it works: Our team gets a list weekly with clients that have upcoming screening events with our external vendors. The vendors provide the dates they need the eligibility information and the client information as well. We update the

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CCDM_STAGING vendor account and vendor client tables in the CCDDR databases through a script we created to update the information all at once. The information provided then creates outbound eligibility files to our vendors submitting the files through a FTP server where the vendors can retrieve the files and utilize the information provided to populate the member's correct information.

Quest Unmatched Data

Purpose: Quest currently will not transmit biometric results if they do not match the eligibility information submitted from the client and from Cigna. This will limit the amount of fallout we receive in CCDDR and ensure that all the participants submitted are eligible for the program.

How it works: Quest will submit an excel spreadsheet to us weekly with the information collected during the screening for the participant. We take the information provided and see whether or not the members have eligibility information within the Cigna systems. In most cases the member does but is not active just yet, or the eligibility information submitted from the client to Quest is different than the eligibility submitted to Cigna from the client. An example would be the members date of birth is different than what we have, in that case we work with the account team and client to ensure that information is updated to reflect on both eligibility files and provide a match for the vendor. In other cases we find the member is not active at all, and in that case the information should not be submitted to Cigna.

EQE Missing Files

Purpose: To ensure we are receiving all data on time and as needed we have set up vendor schedules to provide a timeframe for when we can expect and should receive any data.

How it works: If the vendor does not provide the data in the given scheduled timeframe a ticket will be generated for us to work. We will check to ensure the ticket was not generated by accident and work with the vendor to get confirmation on why a file was not submitted and when we can expect to receive the file. It is important that data is being received on time as several jobs run within a specific timeframe for reporting and member rewarding as well.

HPSM Metric Reporting

Purpose: In order to ensure that we as a team are meeting the turnaround time we have set for our team we continuously track each month how effective we are with handling HPSM tickets assigned to us for triaging. This reporting gives us a good idea of the type of issues we see each month and where the tickets are triaged first as well. We are able to provide insight into what types of issues our customers face and from there we can dig deeper into the issues we are seeing to provide resolution before more tickets are opened and provide satisfaction to our customers. We have the ability to take a more proactive approach with this type of reporting.

How it works: With the assistance of the SMARS reporting team we have reports generated and provided to us daily to see the volume of tickets we are receiving each week and find the primary issues of the tickets as well. We can also see the amount of time the ticket resides with our team and additional teams as well to assist with a more streamlined process when working HPSM tickets. Our overall objective to be able to provide quick resolution to any data/customer issues to ensure complete satisfaction.

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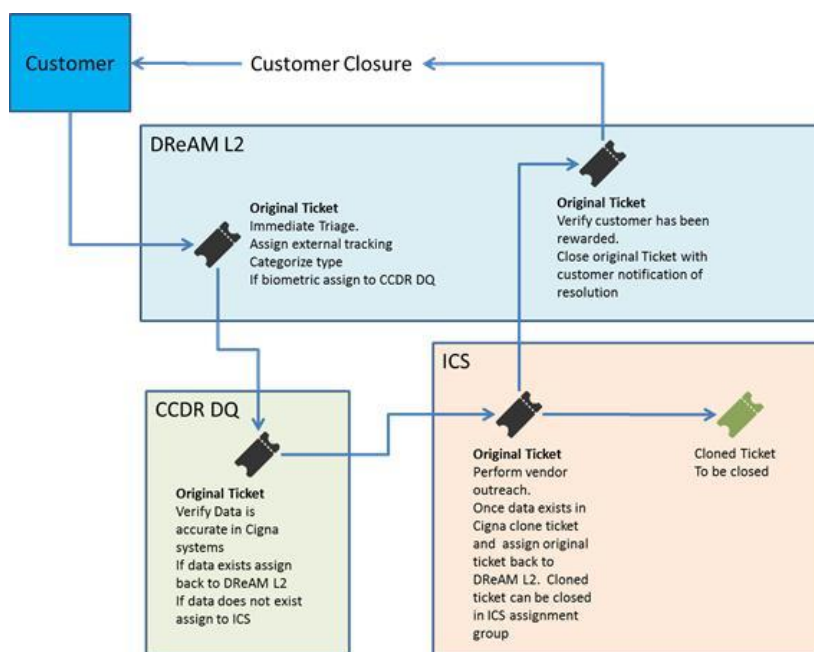
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Ticket Triaging

Purpose: In order to provide superior customer assistance for any data quality issues and MotivateMe issues raised to our HPSM Queue we have worked with other internal Cigna teams to come up with a process for working these types of tickets to provide a quick turnaround time and customer resolution.

How it works: Below is a process flow chart of the how the tickets are to be triaged when they are opened either by the CSC or customer call in. We also utilize our offshore team to work tickets also to ensure we are continuously working these tickets on a daily basis.



“White Glove Service”

Purpose: White Glove Service was created to ensure clients utilizing the MotvieMe program are being completely satisfied with the program they purchases by building a strong relationship with the account team and incentive specialist. Overall goal is to ensure that the biometric results are being transmitted to Cigna from the vendor and the data quality is meeting the standards set.

How it works: Our team members are assigned to specific accounts to work with the account team and incentive specialist to prepare for 1:1 readiness. We learn how each client operates and when the screening events are planned to be prepared to get an idea of when we should expect to receive any data. We proactively watch and monitor the data load and fallout and create reports for the account teams when requested or on a monthly basis to provide them with an update on the bio results being transmitted to Cigna. We also assist with any data issues they are seeing and any missing data as well by reaching out to vendor through the vendor management process we created.

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With this process we are able to catch issues early and before they create more issues, our efforts also lower customer and client calls and lower our ticket count for issues related to MotivateMe.