More than 100 years ago, Cambia’s family of health plans was born on the eve of the last global pandemic: the 1918 flu. Established in 1917 by loggers and their families who pooled funds to help each other with medical costs, the philosophy of neighbor helping neighbor gave birth to the health insurance industry we know today. We were built for a time like this.

When the coronavirus (COVID-19) arrived and spread in the United States, we drew on our legacy to adapt, listen to our stakeholders’ needs and quickly respond. We knew our health plan members’ lives were turned upside down, employer groups faced business closures, providers were up against financial uncertainty, and community safety nets were stretched thin. Our goal was to meet people where they were and provide as much certainty as possible during uncertain times.

**Employees:** Our first step was to ensure our own employee community was safe, healthy and supported so they could continue serving without interruption. This meant quickly shifting to remote work, offering flexible schedules, providing financial assistance when needed and adding mental well-being resources.

**Health plan members:** We made sure the nearly 3.2 million people we serve across our four-state footprint had access to the health care they needed. This included covering more than $110 million in COVID-19 testing and treatment with no out-of-pocket costs, expanding access to telehealth and new options for behavioral health, and proactively reaching out to members with COVID-19 and those at high risk. We also co-sponsored a $5 million global competition to speed up the development of fast, affordable and accurate COVID-19 testing.

**Employers:** For the employers and broker partners our health plans serve, we hosted 87 webinars reaching more than 7,750 organizations. We partnered with them as their energy was focused on changing business models to stay viable in a COVID-19 environment and supporting their employees’ health needs. We also offered grace periods on premiums to those struggling financially.

**Providers:** To support the provider community, our health plans are paying them the same rates for virtual visits as they do for in-person visits and shifting how they operate to provide additional flexibility and support. In certain instances, they proactively offered an advanced payment program to help providers weather the financial storm caused by reduced in-person visits and elective procedures.

Unless otherwise noted, figures cited in this report reflect numbers across our four-state footprint.
Community: We committed more than $18.7 million dollars to protect frontline workers, support the health care safety net and address food insecurity—a public health crisis worsened by COVID-19. Our employees also fueled our work to support the communities we serve, raising more than $260,000 with the help of our 100% company match for nonprofit organizations, delivering food to at-risk seniors, making masks and much more.

And our commitment continues— to walk with the people and families we serve throughout this pandemic, and listening to and anticipating their needs. Whether it’s helping them find a COVID-19 testing site, navigating a serious illness during pandemic restrictions, or partnering to help people get needed vaccines, we will be there for our health plan members on their journeys.

We look forward with hope—one of our company’s core values—to a day when grandchildren are reunited with grandparents, friends meet up for dinner, and handshakes and hugs are commonplace again. Our committed, compassionate employees are here to serve until the pandemic is over, and for years to come.

Sincerely,

[Signature]
Guiding principles for our pandemic response

- Ease access to care through increased provider collaboration and support during unprecedented times
- Protect the safety and well-being of our employees
- Ensure continued service to our health plan members and customers
- Demonstrate leadership toward a collaborative, person-focused approach in our communities and the health care industry
- Maintain financial stability so we can serve our health plan members and customers today and in the future
**2020**

Our health plans by the numbers

- **Waived copays, deductibles and coinsurance** to cover more than **$110 million in COVID-19 tests and treatment at no cost** to members
- **Reimbursed virtual care** at the same levels as in-person visits, allowing for **safer care for members and greater financial stability for providers** during the height of the pandemic

- **Hosted 87 virtual education events** on back-to-work guidance, testing and prevention, mental well-being, and health benefits strategies, reaching approximately 7,750 employers and producers
- **Returned $39 million in financial relief** to customers and members through premium credits
- **Company-wide, shifted 99% of our 5,000+ employees to work-from-home solutions** and maximized capabilities to ensure seamless support for members, customers, providers, and business and community partners

- **Committed more than $18.7 million in philanthropic investments** across our companies, corporate foundation and employees to strengthen and support the communities we serve (plus **$6 million more** in 2021 to advance health equity and increase access to behavioral health)