AT A GLANCE
All numbers are as of 12/31/2022

WHO WE ARE
Health Care Service Corporation, a Mutual Legal Reserve Company, is the largest customer-owned health insurer in the United States, with over $54B in revenue, operating through our Plans in Illinois, Montana, New Mexico, Oklahoma, and Texas.

More than 40% of our 26,000 employees are people of color and more than 60% of our management are women.

OUR VALUES
• Integrity: Always do the right thing
• Respect: Everyone deserves it
• Commitment: We keep our promises
• Excellence: We drive extraordinary results
• Caring: We put our heart into our work

Connection to Our Communities
In 2022, we continued to expand coverage options, close gaps in preventive care, and invest in organizations that advance equitable access to critical services.

BRINGING CARE AND EDUCATION TO COMMUNITIES
Our three neighborhood centers in Chicago offered both in-person and virtual health and wellness programming that resulted in 32,500 in-person visits and 6,100 virtual visits to the three locations.

Our mobile health programs across all states served over 69,000 clients and delivered over 51,000 immunizations and 95,000 other health services at no cost.

ADDRESSING HUNGER AND NUTRITION
HCSC invested $650,000 to support 27 food banks across all its states through an investment in Feeding America.

WORKFORCE AND SUPPLIER INCLUSION
In 2022, we advanced our commitment to:
• Cultivating an equitable environment for employees and members.
• Addressing systemic barriers that may create disproportionate advancement opportunities for people of color.
• Evolving our supplier diversity practices to improve our utilization and spend with diverse suppliers across all areas of the organization.

ETHICS AND COMPLIANCE
HCSC was named one of the 2022 World’s Most Ethical Companies® by Ethisphere® for the seventh straight year.

SUSTAINABILITY EFFORTS
We’re committed to reducing our emissions in measurable ways. Five of our 2022 energy efficiency projects resulted in a reduction of about 170,000 kilowatt hours in electricity usage across the enterprise — roughly equivalent to the amount of carbon sequestered by approximately 2,000 tree seedlings growing for 10 years.

View the full 2022 Annual Report:
Partnering with Providers

One of the main reasons we can help our members access high-quality, affordable health care is because of our strong networks of community providers in our states. In 2022, HCSC contracted with 406,388 physicians and providers and 9,246 hospitals and facilities.

Analysis and Reporting

The Health Data Exchange (HDE), with connectivity through Electronic Medical Record platforms Epic and Athena, improved Healthcare Effectiveness Data Information Set (HEDIS) gap closure rates that resulted in improved quality of care and outcomes for our members.

Value-Based Care (VBC) and Provider Enablement

HCSC is focused on creating holistic, value-based care models that address the gaps and fragmentation in health care. Through our value-based payment models and investments in provider enablement solutions, we strive to drive accountable care, address affordability, and partner to achieve systemic transformation that increases access to coordinated, high-quality care, and equitable outcomes for our members.

Enhancing Access to Health, Wellness Resources

HCSC offers its members access to a variety of programs that help them lead their healthiest lives. A few examples include: Benefit Advisors, Behavioral Health, Wellbeing Management.

Affordability and Access

Expanding Access to Coverage

In 2022, HCSC announced its largest-ever service area and product expansion planned for 2023, increasing health care coverage options for as many as 1.1 million additional Medicare-eligible individuals in more than 150 new counties across all of its state plans. This allows the company to offer Medicare Advantage Prescription Drug (MAPD) plans to 7.5 million people in more than 330 total counties, representing a more than 40% increase from 2022’s record buildout.

Addressing the Rising Cost of Care

Over 80% of our members’ premium dollars are spent on medical costs; so we strive to get our members the most value for those dollars.

Delivering On Our Promise – In 2022 we:

- Managed $102.3 billion in managed medical spend
- Invested $18.1 million in local communities
- Contributed 109,807 in employee volunteer hours
- Processed over 1.2 million claims per day
- Processed over 90% of claims through automation
- Processed over 99% of claims accurately
- Supported 1,811 organizations
- Served 17.7 million members