



CENTRE D'ACCUEIL DE LA GENÈVE INTERNATIONALE
INTERNATIONAL GENEVA WELCOME CENTRE

OUR MEMBERS

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Schweizerische Eidgenossenschaft
Confédération suisse
Confederazione Svizzera
Confederaziun svizra



REPUBLIQUE
ET CANTON
DE GENÈVE

POST TENEBRAS LUX

Associate



Supporting



PRACTICAL GUIDE FOR NEWCOMERS

A practical guide to facilitate your settlement and integration before your arrival in Geneva and during your stay.

1. Practical information (video/brochure)
2. Housing in Geneva
3. Welcome Programme



CONTACT



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[Access map](#)



Virtual Assistant – available 24/7 – online
and by phone: **+41 22 539 14 29**



CAGI website

Lunchtime conference: Healthcare and medical services in Geneva

PRESENTED BY

Mr. Giovanni Pizzini, Chief, Medical Insurance Section, UNOG and Executive Secretary of the United Nations Staff
Mutual Insurance Society (UNSMIS)

Ms. Karine Martinez, External Affairs Deputy Director, Geneva University Hospitals (HUG)

Mr. Laurent Philippi, General Director of Clinique Générale-Beaulieu

Mr. Khaleb Trabelsi, Senior Network Manager, Cigna Healthcare



HEALTH INSURANCE

Presented by: Giovanni Pizzini

Chief, Medical Insurance Section, UNOG and Executive Secretary of the United Nations
Staff Mutual Insurance Society (UNSMIS)



DOMAINS OF SOCIAL INSURANCE PROTECTION

Health/Maternity

Accidents related to work

Pensions

Disability/Invalidity

Death

Unemployment

WHAT IS HEALTH INSURANCE ?

A risk transfer mechanism whose objectives are to:

- provide adequate care at affordable prices by pooling risk;
- prevent people from having to pay the full cost of health services;
- established enrollment processes that dictate when, where, and how someone joins;
- defined benefits package .

WHAT IS HEALTH INSURANCE ?

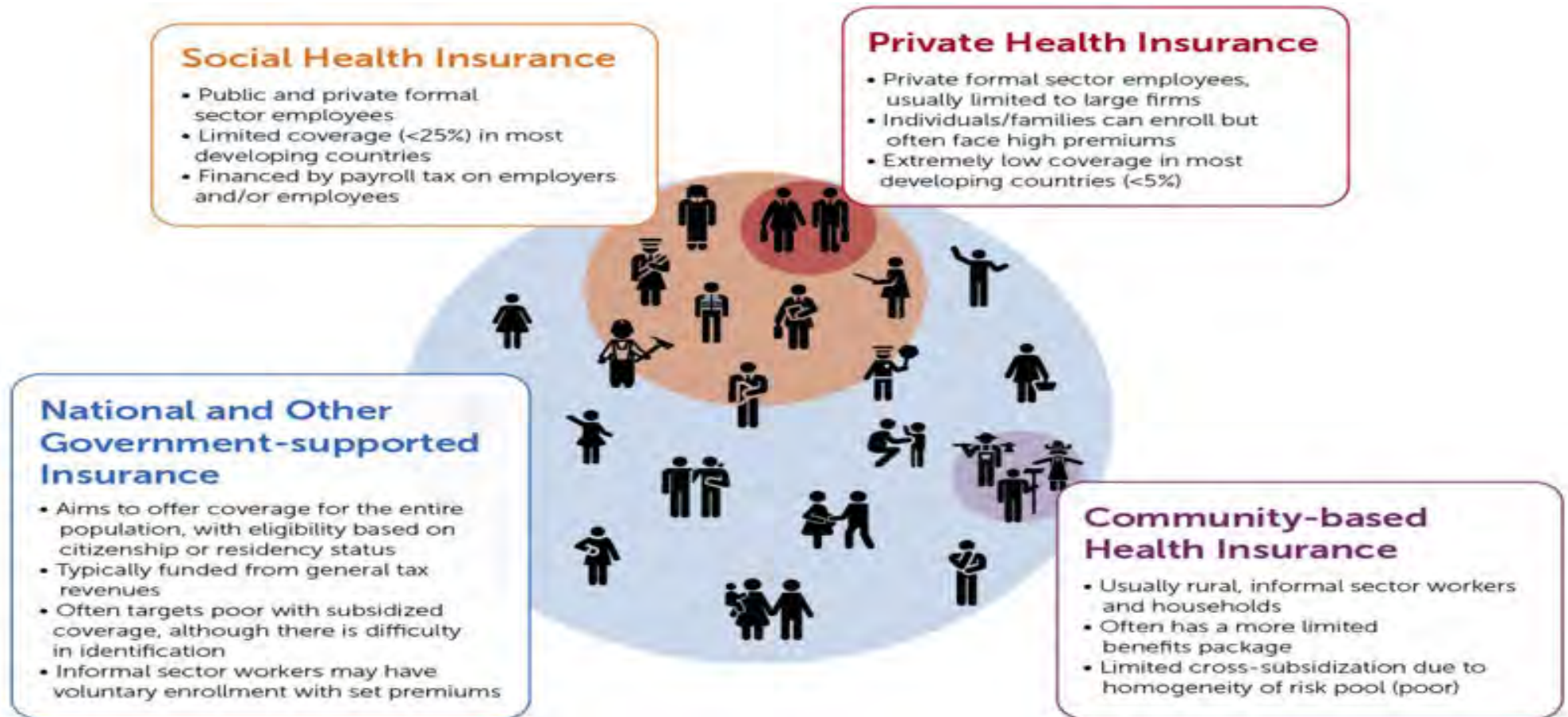
Governments can promote higher uptake of health insurance by helping to bring down the cost of premiums by;

- subsidizing the premiums directly or by ;
- grouping large pools of the insured to reduce “fragmentation” (e.g., consolidating multiple schemes covering small segments of the total population).

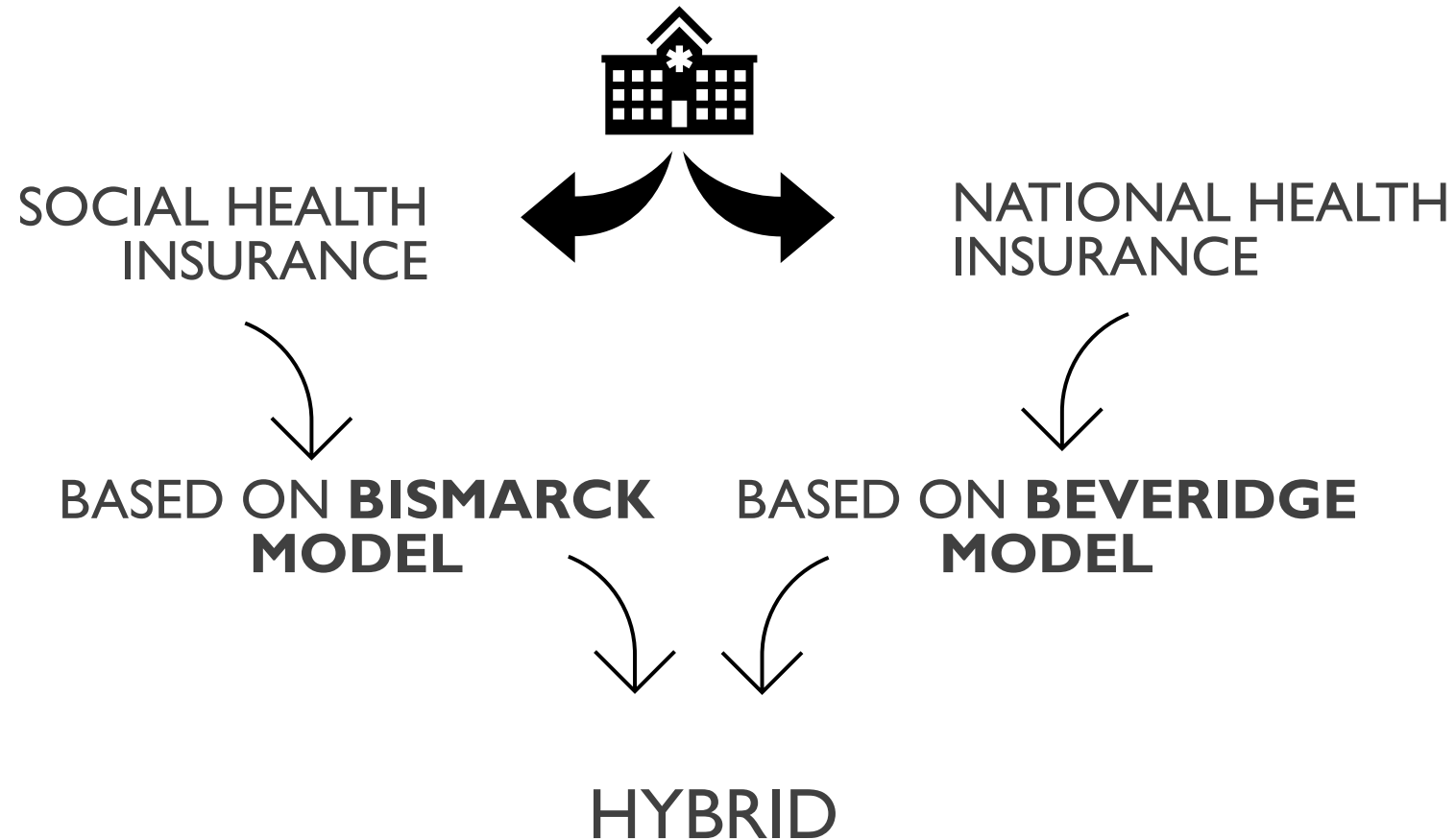
Cross-subsidization is more likely to occur the larger the pool. Generally, the wealthier and healthier subsidize the costs borne by the poorer and sicker. In such a large group, there will be a mix of those who have a predisposition and higher risk for costly illnesses and those who are at lower risk.

TYPES OF HEALTH INSURANCE SCHEMES

There are 4 main types of systems: (Health Insurance | FP Financing Roadmap)



GOVERNMENT HEALTH INSURANCE SCHEMES



TYPES OF HEALTH INSURANCE SCHEMES

How Universal Health Care Works

Single Payer

Free government-provided health care paid for by income tax revenue



Every citizen has the same access to government-owned services (Example: The United Kingdom)

Mandatory Insurance

Government-run health insurance fund financed by payroll tax on employers and/or employees



Private doctors and hospitals provide services (Example: Germany)

National Health Insurance

Every citizen pays into a national plan provided by a single insurance company



Publicly funded and privately delivered (Example: Canada)

SOCIAL HEALTH INSURANCE IN SWITZERLAND

- In 1890 the people of Swiss Confederation and the Cantons accept article 34bis of the federal constitution (article 117 of the current constitution) entrusting the confederation to regulate, by legislation, universal health care for illness and accident
- The current law governing mandatory health insurance in Switzerland is known as LAMal and became effective on 1 January 1996
- The system is hybrid: base legal coverage is mandated by LAMal, provision of coverage is via private health insurance providers.
- Individuals are free to purchase additional top up coverage in the private health insurance market.

LAMAL

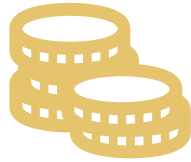
For more detailed information please refer to the OFSP website:

<https://www.bag.admin.ch/bag/en/home/versicherungen/krankenversicherung/krankenversicherung-das-wichtigste-in-kuerze.html>



Trends

Since establishment of Lamal premium inflation has outstripped wage inflation



Financial

Funded via federal and cantonal subsidies, deductibles and premia collected.



Cost

The overall cost to the individual is the premium, the deductible/excess and out of pocket.

CORNERSTONES OF THE SYSTEM

- Coverage cannot be denied/no pre-existing exclusions.
- Coverage is based on the individual, system is collective.
- Premiums vary by age, canton and the chosen deductible.

COMPLEMENTARY HEALTH INSURANCE COVERAGE

- Fully private
- Insurers can deny coverage and/or apply pre-existing conditions
- Usually covers what is not covered by LAMal
 - Private room supplement
 - Dental
 - Optical

There are many different options, with different benefits at different cost

- Good website to compare coverage is www.comparis.ch

TYPES PRIVATE HEALTH INSURANCE

- PRIMARY (FIRST DOLLAR) COVERAGE
- COMPLEMENTARY INSURANCE TO COVER OUT OF POCKET EXPENSES
- SUPPLEMENTARY INSURANCE, TO COVER WHAT IS NOT COVERED BY PUBLIC SCHEME
- ACCESS TO PRIVATE MARKET COVERAGE, SUBSTITUTABLE

SOCIAL INSURANCE WITHIN THE UN COMMON SYSTEM

Responsibility of the international organization as employer to provide pension and health insurance.

- A single common pension fund, UNJSPF, to which all UN common system entities contribute towards
- Over 27 different health insurance plans
 - Different risk pools
 - Different requirements by geographic area
 - Different contractual agreements (locally v internationally recruited)

HEALTH INSURANCE IN THE UN COMMON SYSTEM

HEALTH INSURANCE IS ONE OF VARIOUS COMPONENTS OF SOCIAL PROTECTION EXTENDED BY INTERNATIONAL ORGANIZATIONS TO ITS EMPLOYEES

- THERE IS A SINGLE PENSION PLAN FOR ALL UN COMMON SYSTEM AGENCIES
- THERE ARE OVER 27 HEALTH INSURANCE PLANS ACROSS THE UN COMMON SYSTEM DUE TO DIFFERENT RISK POOL AND LOCAL REQUIREMENTS

HEALTH INSURANCE IS ONE OF VARIOUS COMPONENTS OF SOCIAL PROTECTION EXTENDED BY INTERNATIONAL ORGANIZATIONS TO ITS EMPLOYEES

- Staff members and family members of International Organizations are exempted from LAMal (not consultants)
 - Exemptions applies to Carte de legitimisation:
 - B, C, D, E, G, L, P
 - Carte de legitimisation H is not exempted.

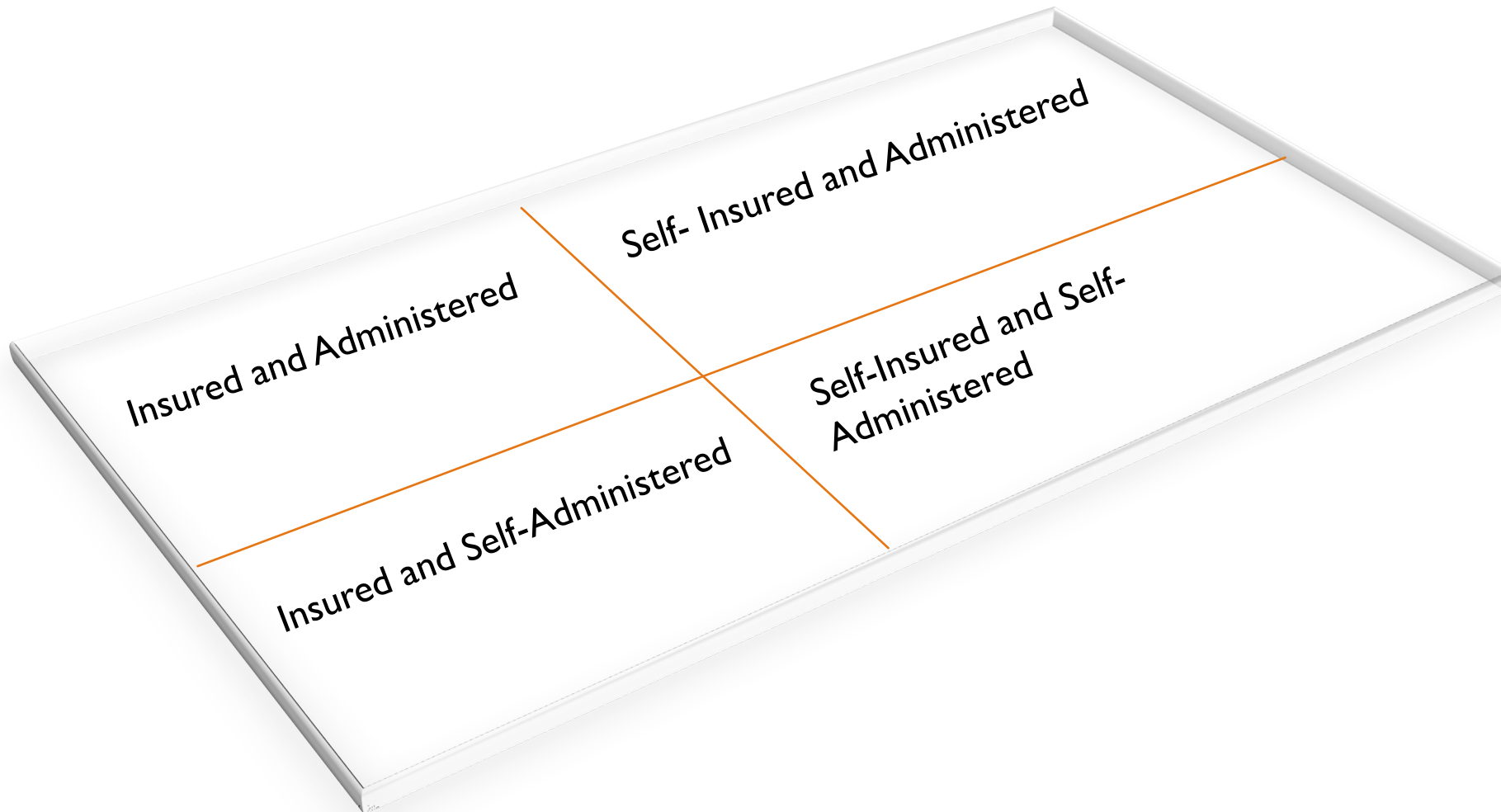
Should you have any doubts please contact the Service de l'assurance maladie (SAM)

<https://www.ge.ch/assurance-maladie-frontaliers-resident-france/contacter-service-assurance-maladie>



INTERNATIONAL ORGANIZATIONS

4 MAIN TYPES OF HEALTH INSURANCE WITHIN UN-COMMON SYSTEM



HEALTH INSURANCE RISK AND ADMINISTRATION

Self-insured and self-administered:

UNSMIS (UNOG, WMO, ITU, UNICEF locally recruited GVA, UNHCR)

Self insured and administered by a TPA:

UN Secretariat plans that cover various other entities.

Insured and self-administered

Insured and administered by a TPA:

FAO, WFP, IFAD

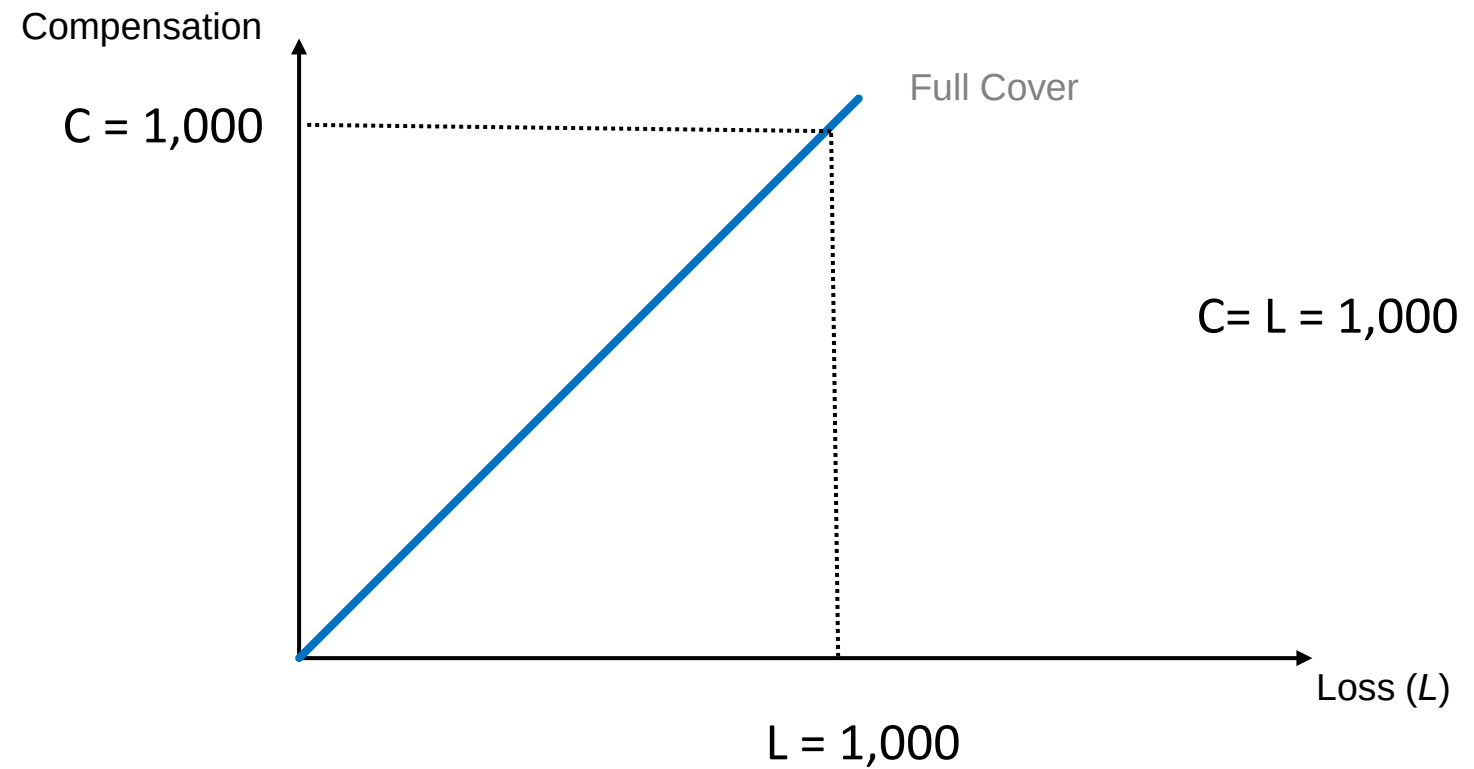
COST CONTROL TOOLS IN INSURANCE

PLAN DESIGN – critical tool to
contain cost and assess pricing

- Benefits
- Co-insurance
- Deductibles (aggregate or per case)
- Co-payments
- Franchise
- Threshold value
- Waiting Periods
- Stop Loss (Limit or Reinsurance)
- Networks

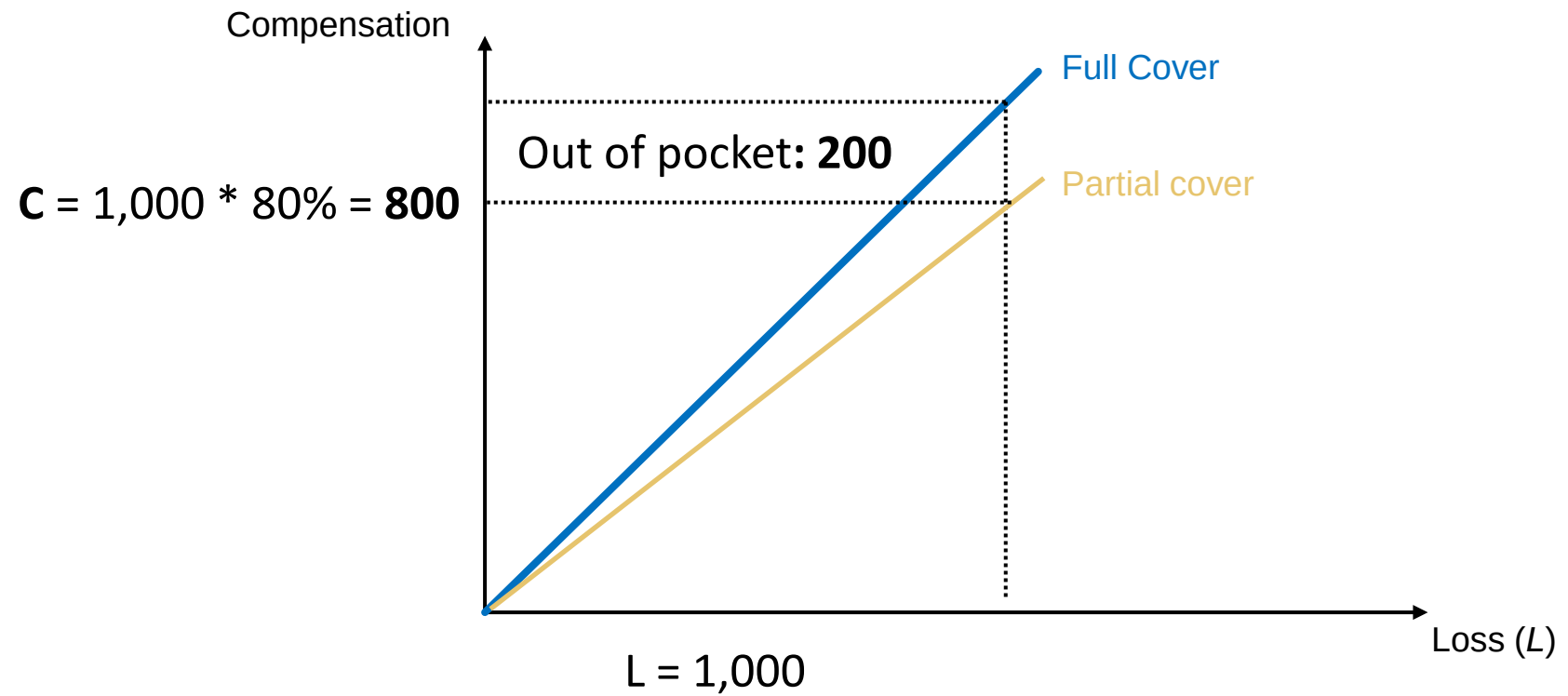
FINANCIAL CHALLENGES

I. Full coverage (100%)



FINANCIAL CHALLENGES

II. Co-Insurance (coverage at 80%)



FINANCIAL CHALLENGES

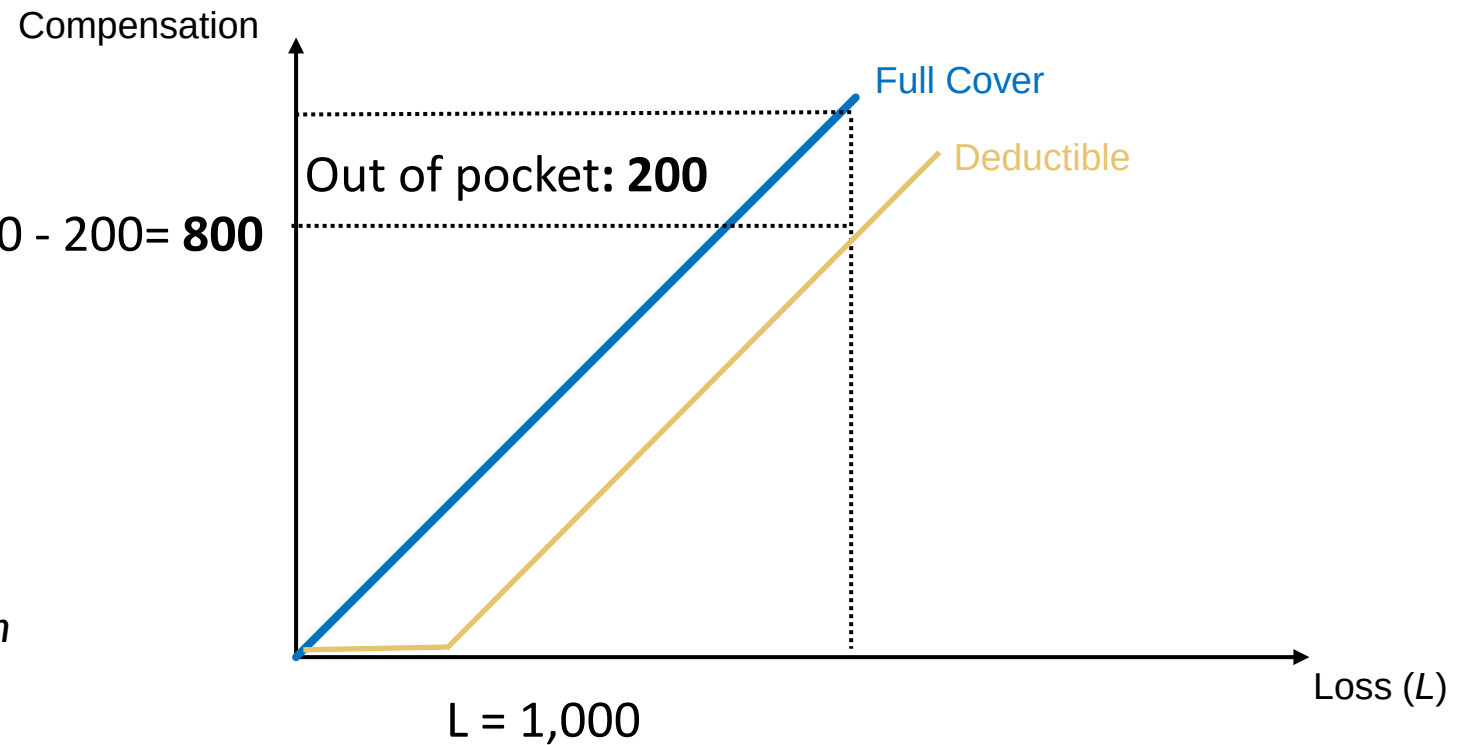
PLAN DESIGN

$$C = 1,000 - 200 = 800$$

Note: Deductibles can be each loss and/or in the aggregate.

Each and every loss deductibles are not common in health insurance. In USA co-pays are common, like *each and every loss*, but usually small amounts.

III. Deductible (assume 200)



FINANCIAL CHALLENGES

PLAN DESIGN

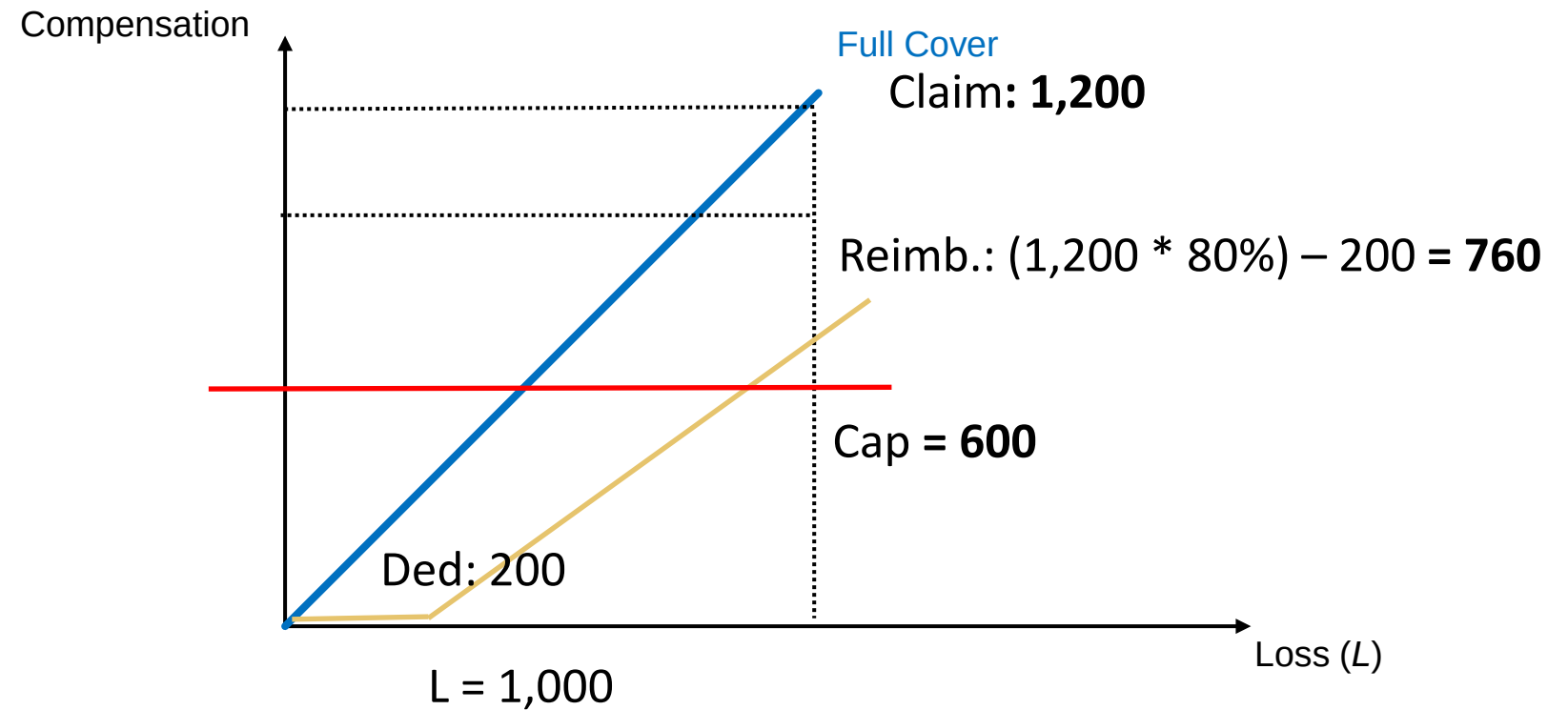
C = 1,200

Reimbursement 80%

Deductible: 200

Annual Cap: 600

IV. Hybrid, Deductible, co-insurance and monetary ceiling/cap



FINANCIAL CHALLENGES

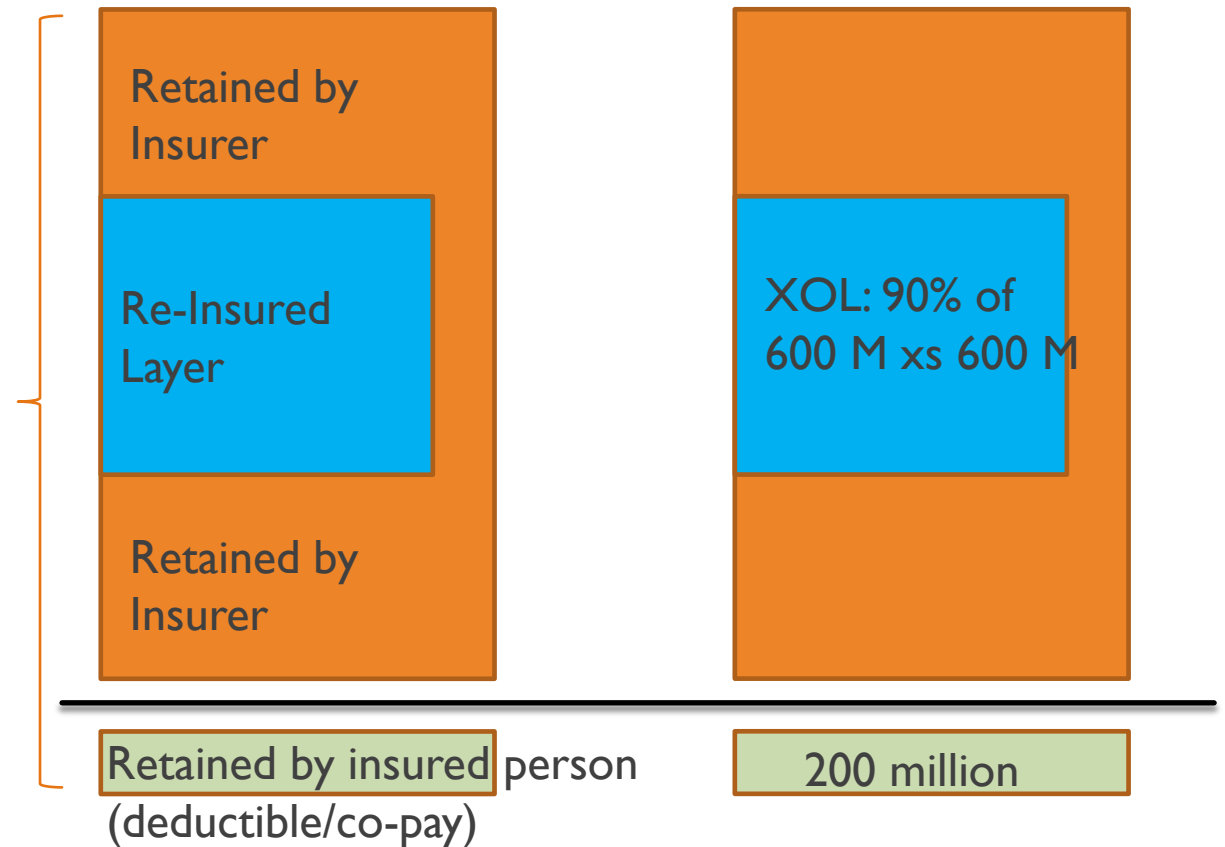
PLAN DESIGN

UNSMIS does not purchase any form of risk transfer mechanism. Prudent management over the years has allowed for the creation of different provisions and reserves:

- IBNR provision
- Currency fluctuation reserve
- Catastrophic risks Reserve
- Actuarial reserve for long term risks
- Accumulated Surplus (reserve fund)

V. Looking at the bigger picture

Total annual medical expenses 2 billion



FINANCIAL CHALLENGES

Pricing the risk

- Demographics
- Trends (i.e. changes in patterns of mental health treatment, diabetes, etc....)
- Changes in medical landscape (i.e. improved surgeries, fewer readmissions but more expensive equipment, «super drugs», etc...)
- Medical inflation
- Geographic distribution and differing
- Pandemics

Budgetary stability

- 20 to 25 year horizon
- Try and ensure premiums do not increase too often to allow for budgetary stability on pay as you go for Organization and staff member who is insured

FINANCIAL CHALLENGES

Similar hurdles in health insurance as with any other type of insurance,

- asymmetrical information: the person purchasing the insurance will always have more information than the insurer.

but there are certain factors that are key to health insurance:

- Expected Loss unknown: health insurance relies on morbidity tables, but impossible to tell what a final hospital bill may come up to in advance. In property insurance the value of the property is known in advance.
- Health risk is closely linked to behavior of policyholders (i.e. smokers, dangerous sports, etc...) , no other insurance risk has such a high correlation between the behavior of policy holders and the losses, if we exclude negligence.
- A health insurance plan/system based on solidarity cannot classify insured subcategories (female v male, smoker v non-smoker, etc...)
- Moral hazard (both ex-ante and ex-post) as well as simple overconsumption can increase as the level of benefits improves.

Pricing the risk

FINANCIAL CHALLENGES

Health insurance is also highly sensible to both static and dynamic risks

Static Risk	Dynamic Risk
Most static risks are pure risks	They are mainly speculative risks.
They are easily predictable	They are not easily predictable
The society derives no benefit or gain from static risk. Static risks are always harmful.	The society derives some benefits from dynamic risk.
Static risks are present in an unchanging economy.	Dynamic risks are only present in a changing economy
Static risks affect only individuals or very few individuals.	Dynamic risk affect large number of Individuals.

Pricing the risk

Static losses appear periodically and are generally predictable. Because of this predictability static risks are easier addressed through insurance.



FINANCIAL CHALLENGES

OBLIGATIONS

Contractual Benefit package foresees Insurance for life for spouse of a deceased staff member as well as after service health insurance coverage subject to specific conditions being met.

This creates liabilities for the employer that according to IPSAS must be calculated and disclosed.

These liabilities belong to the organization, not the health insurance plan: nonetheless any change in benefits, plan design, premium has a direct impact on the value of these obligations.

OPERATIONAL CHALLENGES

Receive invoices from all over the world

All types of languages

Access to healthcare in certain geographic regions

- Automation : data formats vary by country
- Operators need to be aware of different procedures and requirements in different countries.
- Medications with same active molecule have different names in different countries.
- Some geographic areas have limited access to healthcare



THANK YOU



Hôpitaux
Universitaires
Genève

The Swiss healthcare system



The Swiss healthcare system

Confederation of
26 Cantons
26 healthcare policies
26 healthcare plans
1 mandatory health insurance

Costs amounting
to **11,7% of GDP**



Decentralized
healthcare system

A heavyweight in
the economy

More than 8% of jobs in Switzerland
(FSO, 2024)

Financing of the Healthcare System

Care is financed by health insurers, public authorities, and patients.



Five University Hospitals in Switzerland



Swiss University Medicine Association

The five university hospitals and medical faculties in Switzerland join forces to shape the future of medicine.



HUG-CHUV Cooperation

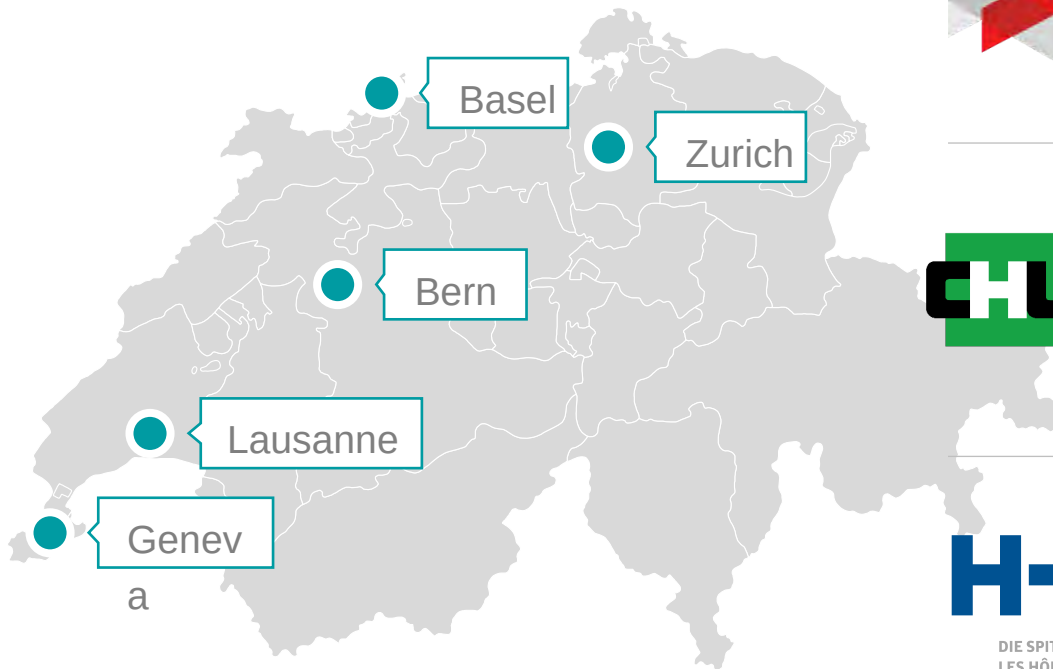
Vaud-Genève association with the Romand University Centers (CURs) to ensure the level of expertise in the field of Highly Specialized Medicine (HSM).



DIE SPITÄLER DER SCHWEIZ
LES HÔPITAUX DE SUISSE
GLI OSPEDALI SVIZZERI

Swiss Hospitals

The association comprises 218 hospitals, clinics, and institutions established on 503 sites.





1st University Hospital in Switzerland*

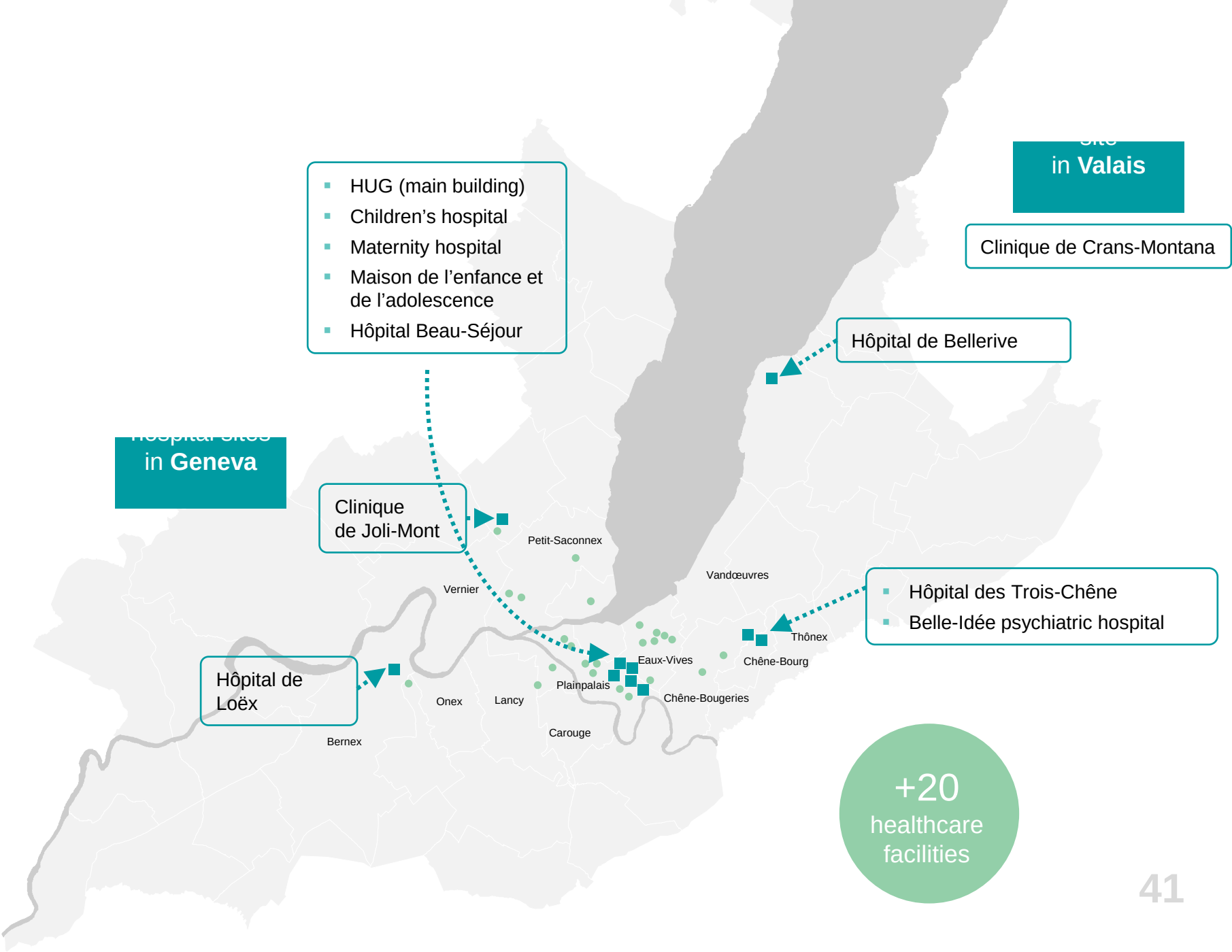
*in terms of volume of activity

Governance and organization



The HUG Network

The HUG network covers all medical specialties, from acute care to rehabilitation.





The Missions of HUG

HUG Missions



To care

is to serve a
community of over
530,000 people



To research

is to contribute to the
progress of medicine and
the care of tomorrow.



To teach

is to educate the
next generation



Care (2025 figures)

Advancing excellence in care



97%

of patients are satisfied with
the care they receive (2025
figures)

Patient Care

(2025 figures)

228,862

patients treated

66,320

hospital cases

1,321,996

consultations
(adults and children)

31,419

surgical procedures

Every 3.5 minutes

1 medical emergency

4,294

births (largest obstetrics
service in Switzerland)

2,073

beds



12
corneal
grafts

47 livers
including 9
transplants in
children

68 allografts
of hematopoietic
stem cells, including
7 in children

11 Langerhans islets
including 1
simultaneous
with a kidney

5 pancreases
combined with a kidney

39 kidneys
12 of which from living
donors (and 3 combined
with a liver)

Transplantations and grafts (2025 figures)



104 organs
transplanted in 91 patients,
including 9 children



13,282
blood donations



2,112 platelets
collected by the Blood Transfusion
Center of HUG



National Reference Centers

- National Influenza Reference Center (CNRI)
- National Reference Center for Emerging Viral Infections (CRIVE)
- National Meningococcal Center
- National Reference Center for Measles and Rubella
- Transplant Immunology Unit and National Reference Laboratory for Histocompatibility (IUT/LNRH)
- Swiss Pediatric Liver Center

HUG Centers of Excellence

+15 centers specialized in an organ or pathology

Center for hepatobiliary and pancreatic disorders

Cancer center

Cardiovascular center

Patient therapeutic education center

Center for medical genomics

Obesity and bariatric surgery center

Center for emerging viral diseases

Center for advanced age medicine

Center for musculoskeletal medicine & sports medicine

Primary care medicine center

Memory center

HUG neurocenter

Clinical research center

Palliative care and supportive care center

Swiss pediatric liver center

Vaccinology center



Highly Specialized Medicine (HSM)

Several mandates from the Swiss Conference of Health Directors are awarded to HUG due to their expertise in specialist fields, sophisticated equipment, the ability of hospital teams to meet quality standards, and to innovate.

These mandates are in the following medical specialties: highly specialized complex visceral surgery; cochlear implants; complex neurosurgery and neuroradiology; pediatric oncology; highly specialized pediatrics and pediatric surgery; complex stroke treatment; treatment of severe injuries; allogeneic hematopoietic stem cell transplants in adults; organ transplants (kidney, liver, pancreas, and Langerhans islet).



Recognized Quality and Safety of Care

smartermedicine

Choosing Wisely Switzerland

HUG is the first university hospital in Switzerland to have received the smarter medicine label awarded by the association

Smarter Medicine is a Swiss healthcare initiative aimed at promoting evidence-based medical practices and reducing unnecessary treatments that may not benefit patients.

The initiative focuses on five key recommendations to avoid over-diagnosis and overtreatment, ensuring better patient outcome and cost-effective care:

1. Avoid imaging for non-specific low back pain within the first 6 weeks;
2. Do not perform PSA screening for prostate cancer without discussing potential risks and benefits;
3. Refrain from prescribing antibiotics for uncomplicated upper respiratory tract infections;
4. Avoid preoperative chest radiography in patients without clinical suspicion of intrathoracic pathology;
5. Do not continue long-term treatment of gastrointestinal symptoms with proton pump inhibitors without titrating to the lowest effective dose.



HUG ranks among the World's Top 20 in the 2026 Newsweek ranking

HUG is now ranked among the 20 best hospitals worldwide according to the “**Newsweek World's Best Hospitals 2026**” ranking.

A rise of 34 places in one year, reaching 19th place worldwide, confirms the institution's commitment to quality and patient safety.

At the European level, HUG ranks 8th.



Research (2025 figures)

Contributing to the medicine of tomorrow



Budget of

CHF 149 million



202

research groups



~ 1090

articles per year published
in journals with editorial
policies

Teaching (2025 figures)

Training the next generation



182

apprentices in total



of which **21**

apprentices in Nursing and Care Assistance (ASA)



of which **78**

apprentices in Community Health and Care Assistance (ASSC)



25

vocational training programs (all trades)



1,925

students at the Faculty of Medicine, including 1,443 in human medicine



145

medical diplomas

Key Figures



2025

 **13,348**
employees

 **160**
professions

 **67,7%**
women

 **228,862**
patients treated

 **97%**
satisfaction

24h HUG Hôpitaux
Universitaires
Genève

 **3,621**
outpatient visits

 **411**
emergency visits

 **252**
calls to 144

 **627**
patients treated

 **85**
surgical
procedures

 **11**
births

 **22,579**
laboratory tests

 **140**
CT scans

 **69**
MRI scans

 **42**
blood and
platelet donations
collected

 **382 MWh**
energy consumed

 **12 tons**
laundry processed

 **9,634**
meals served

 including **2,938**
vegetarian meals

 **211**
beds cleaned

 **7.1 tons**
waste recycled



 **427**
hours of continuing
education

 **3**
scientific
articles
published



Equipment & procedures (2025 figures)

Quantity	Equipment	Activity
7	multi-slice CT scanners	50,610 examinations
9	MRI	24,872 examinations
4	PET-CT (2) and SPECT-CT (2)	6,882 examinations
2	EOS2 imaging systems	6,583 examinations
9	intervention rooms (angiography, cardiology)	5,952 interventions
1	hyperbaric chamber	5,080 oxygen therapy sessions
1	medical cyclotron	2,282 doses prepared for PET-CT examinations
1	radio-oncology scanner	1,146 examinations
3	particle accelerators	1,026 patients treated
5	surgical robots	1,000 interventions



VOTRE DOSSIER EST-IL À JOUR ?

Avez-vous changé :

- ▶ d'assurance maladie depuis votre dernière visite ?
- ▶ de nom, d'adresse ou de numéro de téléphone ?
- ▶ de médecin traitant ?

pour la mise à jour de votre dossier administratif.

* Merci de nous informer afin de garantir une prise en charge optimale de votre dossier administratif.

HUG

The Institution

Human Resources

(2025 figures)

67,7%

women

32,3%

men

13,348

employees

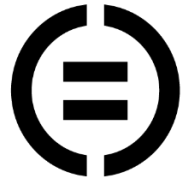
~43 years

average age

160

professions





**EQUAL-SALARY
CERTIFIÉE**

Staff Distribution

(2025 figures)

55,2%

nursing, medical-technical, medical-therapeutic, and social services staff

17,5%

physicians

14,6%

administrative staff

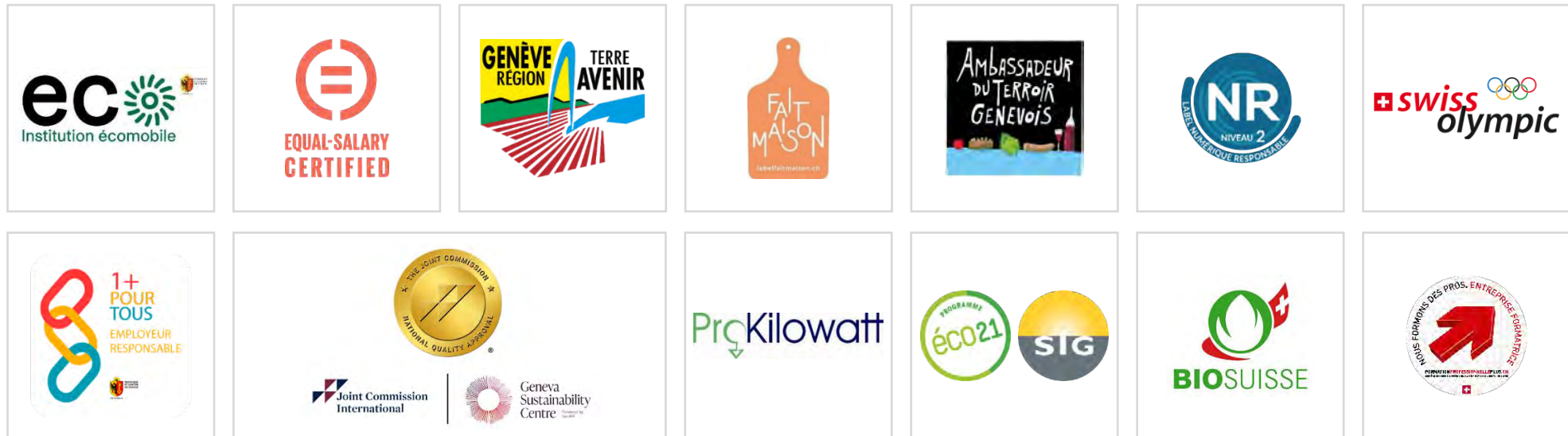
12,8%

logistics, technical, domestic economy, and catering staff



Social and Environmental Responsibility

In July 2025, HUG became the first hospital in Europe and the second in the world to receive the Healthcare Sustainability Certification for hospitals, awarded for a three-year period.



A few accomplishments

(2025 figures)



59%

of HUG vehicles are electric



40,9%

renewable energy



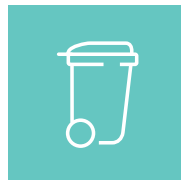
64%

Swiss meat



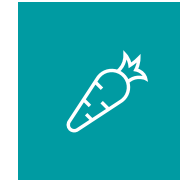
66%

of staff are eco-mobile



+10%

total waste weight
(compared to 2024)



30,5%

vegetarian daily specials



41

Care units engaged in the
internal “eco-units” labeling



45%

waste recycling rate



14,730

reusable containers in circulation
within HUG (takeaway meals)



ArtHUG

For 25 years, ArtHUG has ensured the presence of culture across all HUG sites.

Access to culture is a **fundamental right** that does not stop at the hospital doors. At HUG, Art contributes to holistic care, **as complementary treatment** to conventional medicine.

The significant role of Arts is now recognized by WHO, who emphasizes the arts as an innovative tool for preventive care, rehabilitation, and health promotion.

4 areas of activity

Artistic
and cultural
programming

Cultural heritage
and living
environment

Art and
care projects

Knowledge
sharing



Innovation Center

Platform for exchanges and collective intelligence: gathering, enhancing and implementing the best ideas.

Technology transfer (with UNITEC): promotion of projects, business development, creation of startups, co-development of new solutions with external partners.

In 2025



107

"catalyzed"
projects



2

invention
declarations



5

patents
filed



1

startup
launched

HUG Internationally





Therapeutic
patient
education



Research
and training in
mental health



Telemedicine
and e-health



Epidemic and
pandemic
diseases



Humanitarian
medicine and
disaster
management



Infection
prevention
and control
Antibiotic
resistance

Geneva: Health Capital



World Health
Organization

HUG serves as a hub for World Health Organization (WHO) collaborating centers in the six areas listed on this slide.



International Organizations

In addition to WHO, HUG actively collaborates with the following international organizations (non-exhaustive list):

- CERN (European Organization for Nuclear Research)
- UNOG (United Nations Office at Geneva)
- UICC (Union for International Cancer Control)
- IHF (International Hospital Federation)

... and :

- Organizations such as Gavi, the Vaccine Alliance, and the Global Fund to Fight AIDS, Tuberculosis, and Malaria
- ICRC (International Committee of the Red Cross)
- Terre des hommes, Médecins Sans Frontières (MSF), the World Bank



Humanitarian missions

(2025 figures)



70

staff members



106

missions totaling:

1,202 days



18

new humanitarian and international cooperation projects launched in 2025

+ continuation of 3 projects approved in 2024

FOLLOW US





Access to private healthcare in Geneva

Laurent Philippi, CEO Clinique Générale Beaulieu
08.10.2026



Table of contents

How to cover sickness and accidents in Switerland

Genève-Cliniques Members

Our strengths

Emergency units in Geneva

Clinique Générale Beaulieu



Overview of health insurance in Switzerland

Depending on where you work and live, you will either need to be insured in the Swiss OR the international system

Swiss system

International system

Basic coverage

- Access to most facilities
- General good quality
- Emergency care

Mandatory coverage “LAMal”

Full coverage (basic + supplementary) for UN, WHO, ILO, CERN and international insurance companies

Supplementary coverage (hospitalization)

- Choice of physician
- Choice of hospital
- Faster access
- Comfort (private room...)

Recommended “(half) private” coverage with a Swiss insurer

Specificity: accident (as opposed to sickness)

Swiss system

The accident insurance is mandatory and covers workplace accidents as well as non-workplace accidents.

It is the responsibility of employers to insure their employees for the basic accident coverage

Some employers provide a supplementary coverage (“private”)

International system

The international organizations and coverage plans by private international insurance companies cover accident and sickness without differentiation.

Types of care: inpatient vs outpatient

Inpatient care

Care counts as inpatient care if the patient uses a bed and stays in the hospital past midnight

Outpatient care

Outpatient care allows you to return home on the same day. This includes medical consultations, diagnostic investigations, such as medical imaging examinations, and some surgical procedures.



Examples of insurances companies that offer supplementary coverage (“private”)

Swiss system

Major Swiss health insurers :

Groupe Mutuel, CSS, Assura, Helsana,
Sanitas, Swica, Visana, Allianz, EGK, ÖKK,
Sympany

International system

Major international organizations / health
insurers with whom we have comprehensive
agreements :

UN, WHO, ILO, CERN (UNIQA)

+

Allianz, April, AXA, BUPA, CIGNA,
International SOS, Medigo, VYV



Genève-Cliniques Members

I 9 members

Hôpital de la Tour
Clinique Générale-Beaulieu
Hirslanden Clinique des Grangettes
Hirslanden Clinique La Colline
Clinique de la Plaine
Clinique Belmont
Clinique Les Hauts d'Annières
Clinique de Maisonneuve
Clinique du Grand-Salève

I Proven experience in centres of excellence

Mother and child
Oncology
Orthopedics and sports medicine
Specialised surgery
Addiction treatment
Rehabilitation



Genève-Cliniques Members



607

NUMBER OF BEDS



2,456

COLLABORATORS



2'009

BIRTHS



24,677

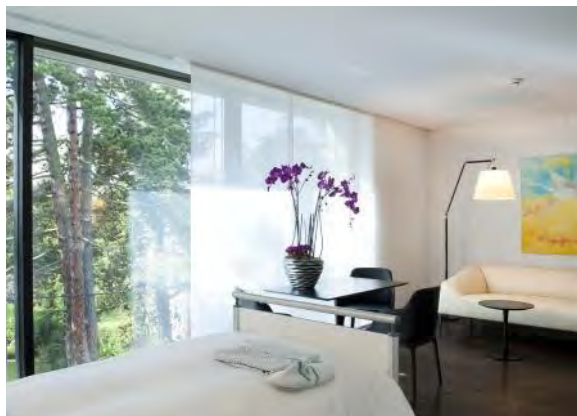
HOSPITALIZATIONS



Hôpital de La Tour



Clinique Les Hauts d'Anières



Hirlanden Clinique des Grangettes



Clinique Générale Beaulieu



SWISS MEDICAL
NETWORK

Our strengths

Clinical excellence

Private hospitals meet and exceed international healthcare standards

Doctors and specialists contribute to international research in medicine and pharmacology

Consistent quality management and cost efficiency

Patient confidence

Personalized patient care

Complete confidentiality of stay and treatment

High patient satisfaction

Emergency Units in Geneva



GRATUIT 24h/24 7j/7

0800 116 117

Centrale Santé Genève

General Emergency number

144

- First assessment by telephone
- An ambulance is not always provided
- Use only in absolute need (waiting list)
- Know where the closest EU is from you (App)
- Adults vs Children emergency



Clinique Générale Beaulieu

Swiss Medical Network member

Swiss Medical Network

Swiss Medical Network is the only player in the Swiss hospital sector with a presence in the four language regions and in 16 cantons.

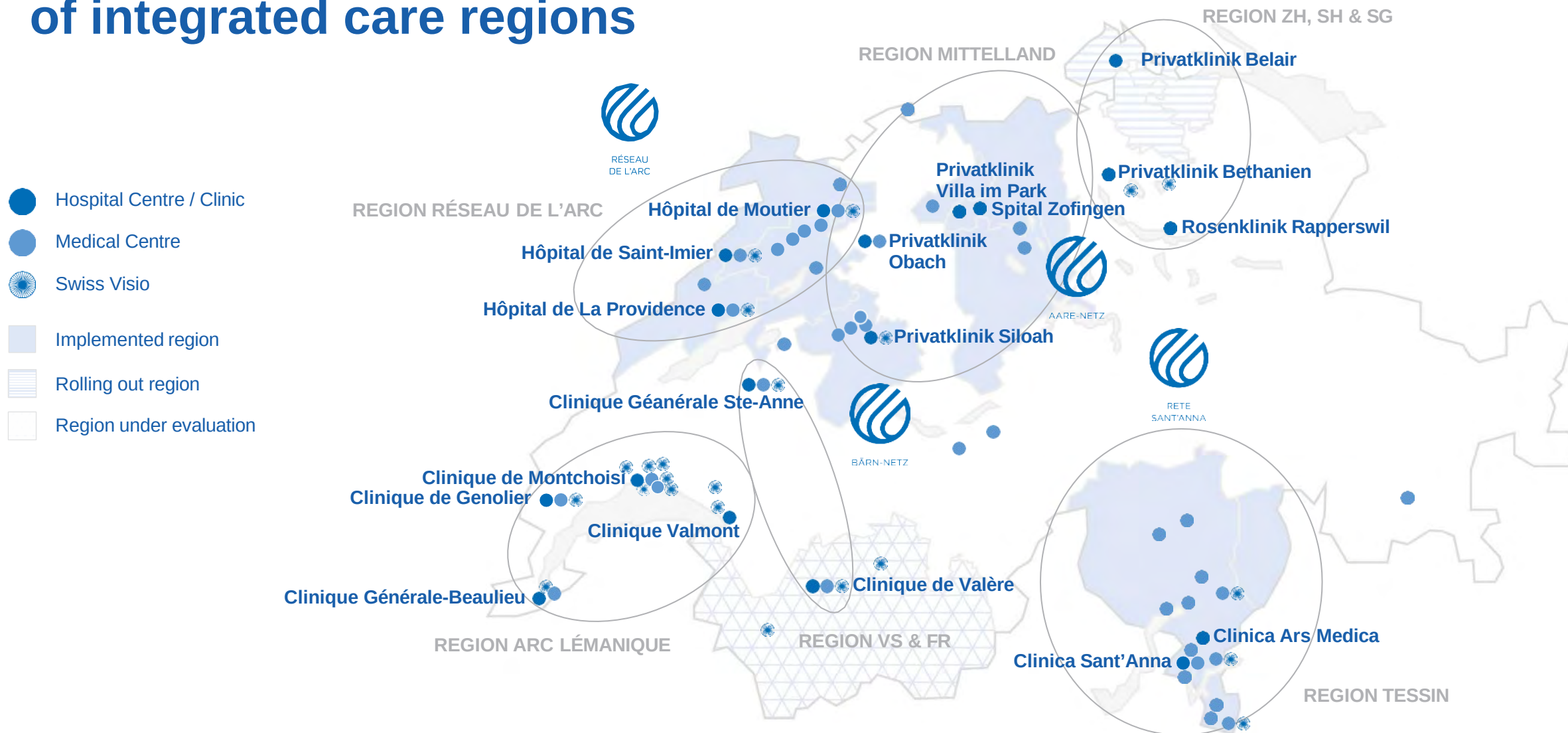
Operational key figures

18 Hospitals	> 80 Medical centers	2'498 Doctors	1'633 Beds	4'960 Employees
46'115 Inpatients	1'14 M Outpatients	2'141 Deliveries	97'929 Surgical interventions	

The historic success is based on three strategic pillars

-  National presence in the 4 language regions
-  State-of-the-art care and equipment
-  First-class relationships with stakeholders

Presence in Switzerland and development of integrated care regions



Clinique Générale-Beaulieu

+ 700

Accredited
physicians

110

Beds

396

Employees

24'642

Radiology
exams

4'355

Inpatient stay

15'024

Inpatient nights

702

Birth

2'921

Outpatient
surgeries



SWISS MEDICAL
NETWORK

Fully equipped diagnostic departement accessible with basic insurance

- I MRI 1.5T
- I MRI 3T
- I iCT Elite 256
- I iQon Spectral CT
- I SPECT CT mCT 870DR
- I PET CT Omni Legend 32cm
- I Mammography, US, conventional radiography



General operation rooms

- | 6 inpatient operation rooms
- | 2 outpatient operation rooms

Robotic surgery expertise

- | Intuitive Da Vinci Xi
- | Stryker Mako Robotic Arm System
- | Medtronic O-Arm S7



Maternity unit

- I **3 delivery rooms**
+ obstetrical operation room
- I **Certified staff**
Start4Néo
- I **Wide range of antenatal and post partum classes**
- I **Reproductive medicine center**
Public-private partnership with
Geneva University Hospital
(HUG) and the lab Fertas



Radiotherapy & oncology center



Label de qualité de la
Ligue suisse contre le cancer
et de la Société
suisse de sénologie

- I **Multiple locations**
In partnership with Clinique de Genolier
- I **BigBore RT**
- I **Accuray Radixact X7**
- I **Accuray CyberKnife FIM System**



SWISS MEDICAL
NETWORK

First class hospitality service



Thank you for your attention



SWISS MEDICAL
NETWORK



Evolution through integration: Building better networks



Khaled Trabelsi

Head of Network Management – West Europe

Agenda

- **Cost and affordability drivers**
- **Integrated International Health strategy**
- **Future-proofing our model: people, processes, technology, rates and utilization**
- **Why it matters to brokers and clients**
- **Our footprint in Geneva**

Main cost drivers in 2026*

Survey of 300+ insurers globally



Tariffs and trade policies are expected to raise care costs over the next 3 years.

81 %

of insurers expect an increase over the next three years.



Outpatient facility costs continue to rise, driven by clinical and contractual factors.

Drugs administered in **outpatient settings** (e.g., high-cost oncology treatments), **advanced implants** and **minimally invasive surgical** tools.



Fertility and family planning coverage is growing.

33 % of insurers cover fertility consultations.
27 % fertility medications.
25 % IVF treatment.



Cancer is the leading condition driving medical claim costs.

Fastest-growing in both utilization and cost
Most expensive diagnosis for insurers, cited by **57 %** globally.



Use of GLP-1 drugs for obesity is expected to rise.

38 % of insurers cover them globally, mostly in the Americas (55%).
68 % expect usage to increase over the next three years.



Artificial intelligence (AI) in health care.

17 % of insurers report significant use of AI in health care.
This is expected to rise to **37 %** within 2 years.

What does this mean for Cigna Healthcare?

We need stronger internal controls and closer monitoring to curb unnecessary medical spending.



*Sources: Milliman Medical Index 2025, WTW Medical Cost Trends Survey 2026, Insurance giant Allianz signals job cuts in AI shift

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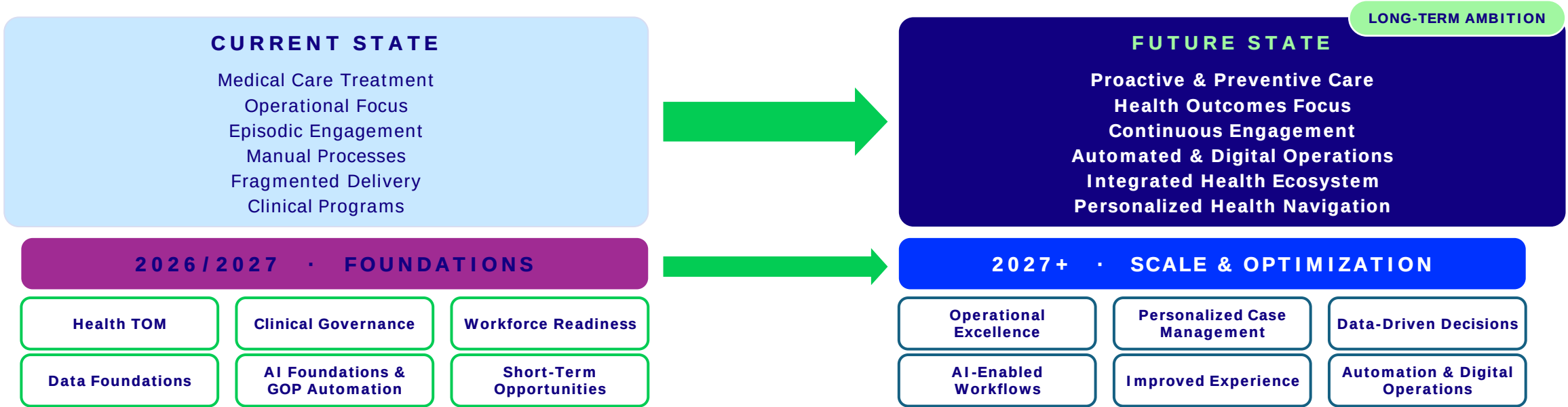
IH health strategy

Our strategy to deliver better health outcomes, affordability, customer experience and sustainable growth

★ MISSION

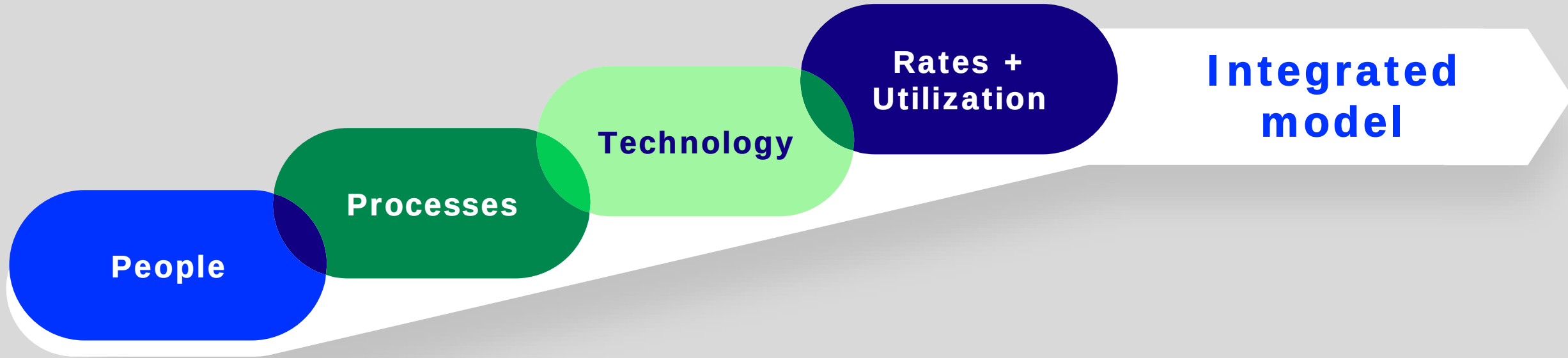
Improve Health Outcomes, Optimize Total Cost of Care, and Enhance Customer Experience Through a Technology-Enabled Health Ecosystem

Improve outcomes, affordability and customer experience while enabling sustainable growth.



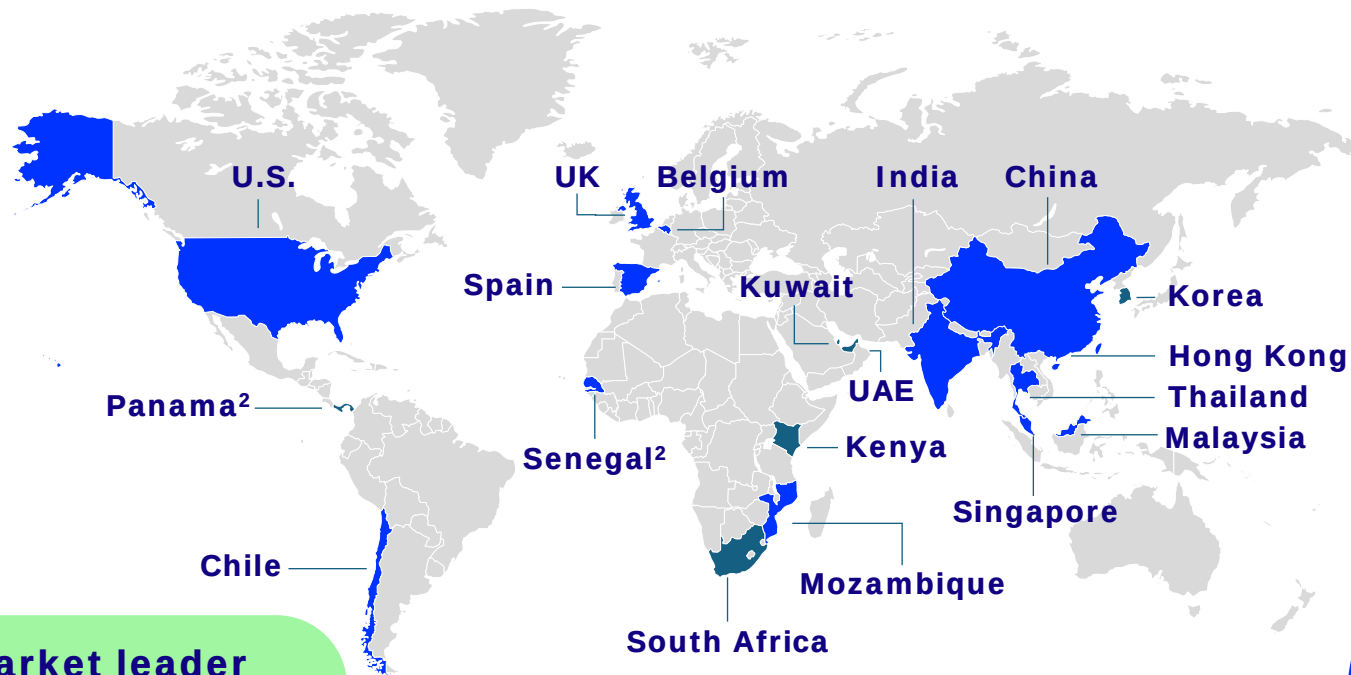
The Foundation for Strategy Execution:
Health TOM, Technology and People / Skills

Future-proofing our model: Layering capabilities



Global contracting with local expertise

37 IH network contracting managers and 34 provider relations managers, supported by 130 provider inquiry team members and 350+ U.S. network contractors¹



**A market leader
in network access**

1. Cigna U.S. has 4 regions, each with 200–300 staff in contracting, provider relations, medical direction and quality.
2. Combined network/provider relations manager roles in Senegal (West Africa) and Panama (Central America) are planned for Q3 '26.
Data are based on Cigna Healthcare's internal Network Demographics database as of September 2026. Subject to change.

International Health



Our team's experience

- 514+** years of Cigna experience
- 33** insurance companies where our team gained best practices
- 20** Nationalities represented
- 32 %** of network contracting staff have a clinical background

Our languages

Arabic
Bahasa
Catalan
Chinese
Cantonese
Dutch
English
French
German
Hokkien
Hindi
Italian
Japanese
Korean
Lingala
Malay
Mandarin
Portuguese
Punjabi
Russian
Sindh
Spanish
Swahili
Tamil
Thai
Turkish
Tagalog
Urdu

Our backgrounds

Physicians
Nursing
Brokerage
Analytics
Conservation
Emergency Assistance
Payment Integrity
HR
Education
Legal
Banking
Insurance
TPA
Pharma
Hospitality
Finance
Hospital Admin
Sales
Logistics
Med Evac
Proj. Mgmt.
Doctor
IT
Physiotherapist
Translator

Provider Market Engagement

- ✓ Representing the **Integrated Health Organization's** strategic value and operational strengths to prospects & clients
- ✓ Addressing and resolving client issues
- ✓ Informing provider strategy based on market and competitive dynamics

Resources

Joshua Snowden-Bahr Director | U.S.-Based

- Americas lead for external partners (brokers & clients)
- Developing commercial provider capabilities
- Strategy alignment & execution

Giulia Branca Senior Lead | Spain-Based

- Strategy alignment & execution
- Supporting go-to-market strategies
- Developing commercial provider capabilities

Lucy Waithaka Specialist | Kenya-Based

- Client reporting & KPI-specific requirements
- RFP coordination & support
- Content & collateral maintenance

Marta Gonzalez Garde Specialist | Spain-Based

- Training & education
- Provider escalations & network insights
- RFP coordination & support

Listening to our providers and customers

Key Considerations for Providers



Volumes (desired cases)



Timely Payments



Coordination & Process Deviations



Capacity & Availability



Existing Relationships



Easier Access

Simplify our processes and procedures



Better Support

Provide resources and tools to help people navigate new health care systems

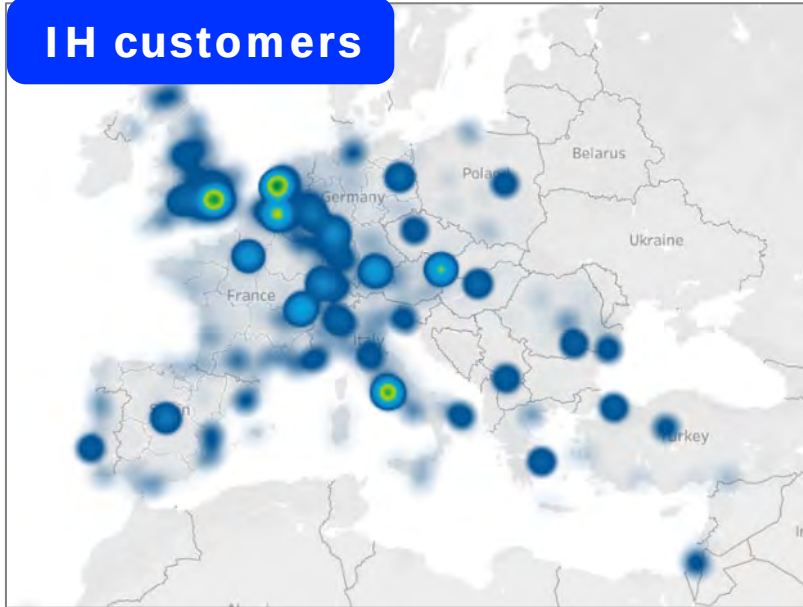


Better Value

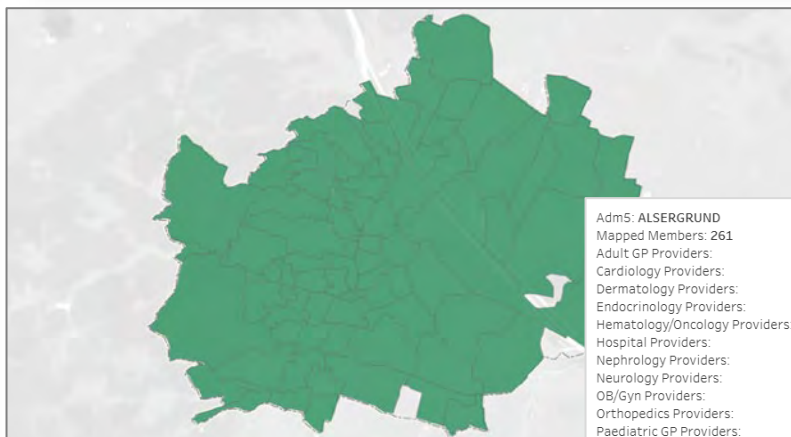
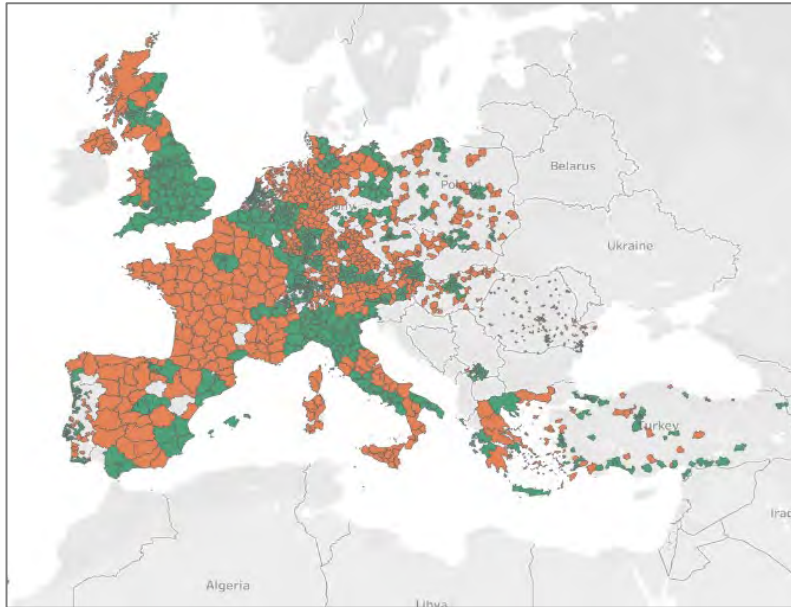
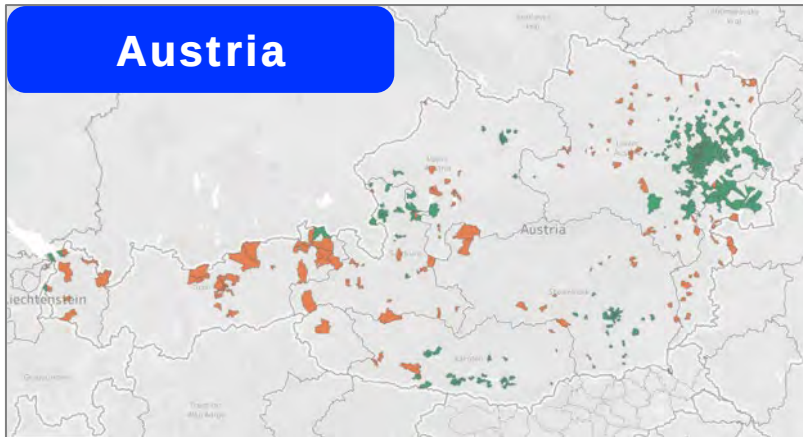
Proactively identify improvements for our customers and patients

Shifting the narrative from quantity to quality

IH customers



Austria



Network Adequacy

Ratios (by Specialty)



Radius (by Density)



Benchmark References



Score (Priorities)

Adm5: ALSERGRUND			
Mapped Members:	261		
Adult GP Providers:	4	Threshold: 1:230	Ratio: 252%
Cardiology Providers:	5	Threshold: 1:410	Ratio: 685%
Dermatology Providers:	4	Threshold: 1:330	Ratio: 406%
Endocrinology Providers:	4	Threshold: 1:860	Ratio: 1218%
Hematology/Oncology Providers:	5	Threshold: 1:560	Ratio: 973%
Hospital Providers:	5	Threshold: 1:2,770	Ratio: 5207%
Nephrology Providers:	3	Threshold: 1:330	Ratio: 279%
Neurology Providers:	5	Threshold: 1:330	Ratio: 532%
OB/Gyn Providers:	4	Threshold: 1:330	Ratio: 406%
Orthopedics Providers:	4	Threshold: 1:330	Ratio: 406%
Paediatric GP Providers:	3	Threshold: 1:230	Ratio: 164%
Psychiatry Providers:	5	Threshold: 1:990	Ratio: 1797%
Pulmonology Providers:	3	Threshold: 1:330	Ratio: 279%

Adm5: ALSERGRUND			
Mapped Members:	261		
Average Adult GP Distance:	0.7469	Threshold: 25	
Average Cardiology Distance:	0.7486	Threshold: 35	
Average Dermatology Distance:	0.7473	Threshold: 40	
Average Endocrinology Distance:	0.9380	Threshold: 55	
Average Hematology/Oncology Distance:	0.7468	Threshold: 55	
Average Hospital Distance:	0.7485	Threshold: 40	
Average Nephrology Distance:	0.9981	Threshold: 45	
Average Neurology Distance:	0.7468	Threshold: 40	
Average OB/Gyn Distance:	0.7469	Threshold: 45	
Average Orthopedics Distance:	0.7473	Threshold: 35	
Average PaediatricGP Distance:	1.048	Threshold: 25	
Average Psychiatry Distance:	0.7501	Threshold: 40	
Average Pulmonology Distance:	0.9404	Threshold: 40	

European provider network quality and expansion, 2027

The newly integrated and refined Europe Network Management team will combine sustained provider engagement in established European markets with targeted direct-network expansion across Eastern and Southeastern Europe.

57

Provider negotiations and targeted in-market visits

6

Regional managers with local expertise

23

European countries being prioritized this year

Geographic strategy

United Kingdom

Strengthen core relationships

Iberia & Southern Europe

Strengthen core relationships and improve affordability

Benelux, DACH & Nordics

Enhance outpatient care through local partnerships

Eastern / Southeastern Europe

Expand direct-network capability

Countries in scope



- UK, Iberia & Southern — strengthen core
- Benelux, DACH & Nordics — outpatient
- Eastern / SE — expand direct network

Maintain regular engagement with core providers while expanding the direct network in Eastern and Southeastern Europe

Shaping the future with trusted AI

Our AI strategy is built on trust, compliance and security, and delivers value for stakeholders

Example

AI assistance for faster answers to customer questions*

**Coming soon*



Enhancing the customer experience



Improving provider claims adjudication

Example

Machine learning for customer and provider claims

Example

Document recognition, indexing and pre-processing for GOP using agentic AI



Digital acceleration for faster access

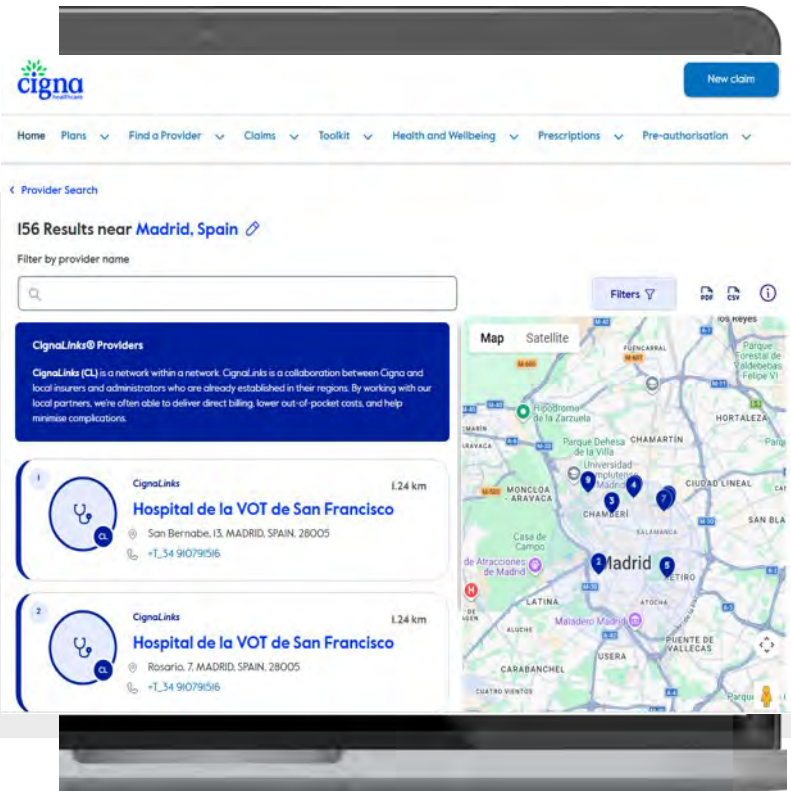


Creating efficient operations

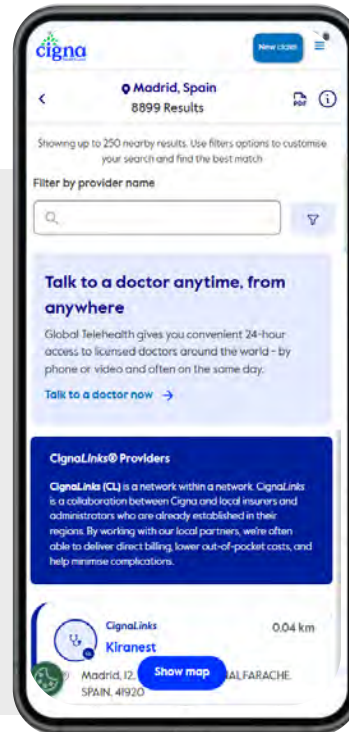
Example

Using AI software engineering agents to support code generation

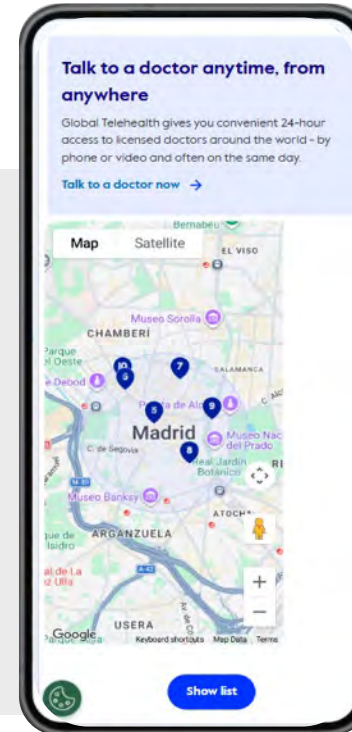
Enhancing the customer experience with providers



**Web
Experience**



**Mobile
Experience
List of Providers**



**Mobile
Experience
Map View**

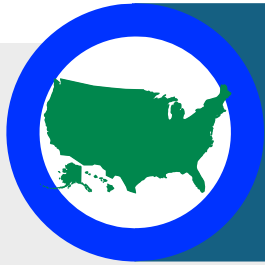
New

- Claims tracking with more detailed statuses
- Improved claims submission
- Global ID cards on mobile

Next

- Carrot details integrated
- Improved user interface
- Enhanced provider search
- Email address as username

Country-specific strategies driving affordability



USA

- Product enhancement for OAP rates
- Member guidance (e.g., Tier 1 providers)



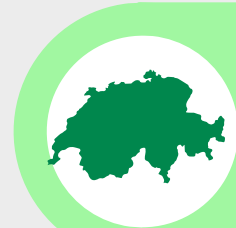
Singapore

- Value-based KPI contract with CL TPA
- Targeted SOC day surgery centers



UK

- Data-driven, clinically led pathways
- Continued rollout of Healthcode



Switzerland

- New model for key public providers
- Renegotiating terms with key private clinics



Germany

- Leverage local partnerships
- Intensify contracting in key locations



Spain

- Expanding bundled pricing with providers
- Strengthening the relationship with our local partner

Uniquely Cigna

Not just scale & coverage,
but a focus on quality, integration,
operational excellence & cost control

Provider Market Engagement
is a **market differentiator**,
acting as a bridge between providers,
brokers, & clients

**Understanding local healthcare
systems and the changing
needs of providers and
customers** helps us prepare for
the future by sharing expertise
and integrating services across
portfolios.

**In the past year, our teams visited 565 providers across 48 countries,
reaching 2,974 facilities. Provider contracting contributed to an average
medical cost trend deflection of 4.2 %.**

Cigna Healthcare:

Your trusted partner for international organisations in Geneva

520k+ (12K)

members in the IO portfolio

60+

years serving international organisations

323 (+16)

international organisations supported

150+

countries

24/7

multilingual member support

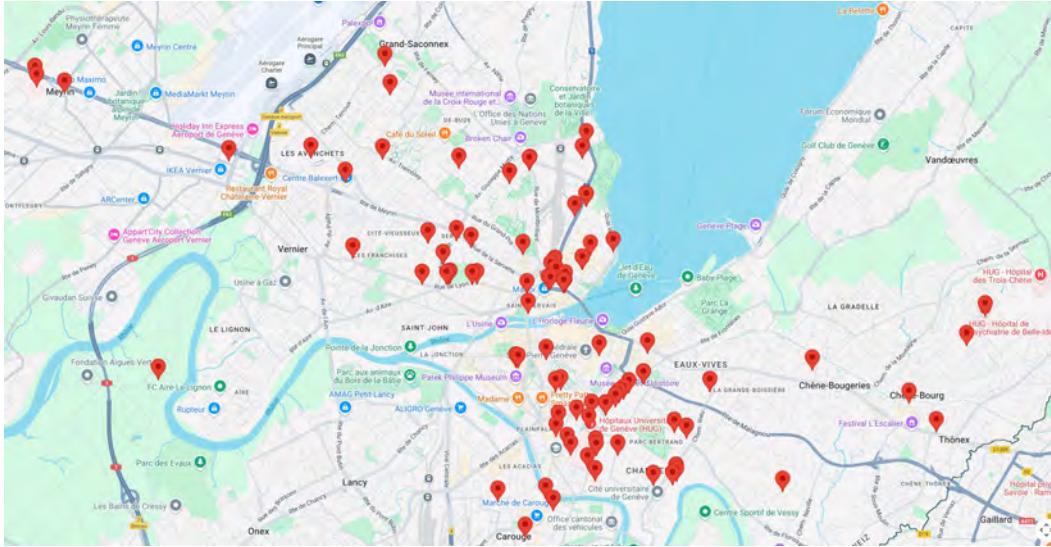
20+ years

average portfolio tenure

Helping clients keep healthcare affordable over the long term while improving every member's experience



Network in Geneva



Our Swiss network has more than 400 providers. We have maintained a **91% direct settlement rate** for inpatient claims.

This includes 187 providers in Geneva:

- 130 Doctors/Physicians
- 22 Hospitals
- 12 Pharmacies
- 8 Outpatient Medical Centres
- 7 Laboratories
- 5 Physiotherapists
- 2 Dentists
- 1 Home Care Provider

Progress over the past 2 years

Operational improvements

- Dedicated account manager
- New way of working with public hospitals
- Enhanced ecosystem

Network development

- Expanding the outpatient network
 - ✓ 2 large medical centres
 - ✓ 1 pharmacy
 - ✓ 1 home nursing provider
 - ✓ 2 clinics for short stays

Network rate improvements

- Improved rates with selected key providers to reduce the cost of care for international organisations

Geneva City Strategy

- Based on insights from the Rome Health Navigator and adapted to the Swiss healthcare system
- The solution offers consultative guidance to key clients, such as WIPO, who can help shape the list of Select Network Providers
- Clients can add incentives or penalties to their healthcare plans to reinforce the guidance

Tier 1

- List 1

Tier 2

- List 2



► **Leverage tiered benefit design to unlock cost savings without compromising patient choice.**





Our commitment to International Geneva remains steadfast. We look forward to continuing our long-standing partnership, working together to support the health and well-being of its international community in the years ahead.



Thank you for your trust and partnership



CAGI



CENTRE D'ACCUEIL DE LA GENÈVE INTERNATIONALE
INTERNATIONAL GENEVA WELCOME CENTRE