

Activity Report 2023



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Commercial success for the second year running


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Editorial



Commercial success for the second year running

How can you sum up a year at Groupe Mutuel in a few words? Groupe Mutuel is delighted with its commercial success and the overall positive outcome of 2023.

"With more than 63,000 new policyholders having joined us in 2023 for basic insurance (AOS/OKP), the commercial results are very satisfactory for the second year running", said Karin Perraudin, President of the Board of Groupe Mutuel.

This success is all the more satisfying given that the context for our industry, and for the economy as a whole, remains very tense. With health costs rising sharply by 3.7% (the biggest increase in 10 years), premiums are also rising sharply. There is also fierce competition, intense regulatory pressure and major political uncertainty, particularly concerning the industry-wide agreement, all of which are having an impact on all stakeholders.

"Life is like riding a bicycle.
To keep your balance, you must
keep moving."

Albert Einstein

In 2023, **more than 63,000 new customers decided to take out insurance with Groupe Mutuel.** After welcoming some 67,500 new insured members the year before, this is a second consecutive success that confirms the choices made by the Board and Executive Board.

"In terms of sales and turnover, we are on the right track in all sectors of the business, which is extremely satisfying. I would like to congratulate all the Groupe Mutuel teams who have contributed to this major new success", said Thomas Boyer, CEO of Groupe Mutuel.





"We will continue to provide our customers **with a full range of new health and pension products that meet both their needs and the expectations of the market.**

We are the only company in Switzerland that can do this for both private customers and companies."

Thomas Boyer, CEO

"Despite the challenges, we have succeeded. I'm extremely satisfied with these results and proud of the teams who contributed to our success. **This shows that we have chosen the right strategy and that our business efforts and commitment to customer satisfaction are beginning to bear fruit.** Let us stay on course."

Karin Perraudin, President

Many business indicators are therefore positive, which means that 2023 was a good year. In the life insurance sector, for example, net new assets reached almost CHF 250 million, that is up more than 40% on the previous year. The Corporate Sector continued to grow, with almost 30,000 corporate customers (+1,500), consolidating our position as Switzerland's fifth-largest insurer, even though some restructuring measures were made necessary by the higher number of claims (more absenteeism, and a sharp rise in psychological disorders).

"This growth in all areas of the business is a confirmation of our diversification strategy. We are therefore going to pursue this path and continue to provide our customers with a **full range of new health and pension products that meet the needs of our customers and the expectations of the market.** We are the only company in Switzerland that can do this for both private customers and companies. This is one of our strengths, and we intend to pursue this development and growth, particularly in German-speaking Switzerland, thanks to our solid and innovative LPP/BVG second pillar pension solutions. These solutions are proving highly successful, with premium income in this sector exceeding CHF 200 million for the first time", said the CEO.

However, despite this good news, and as is often the case in life, finding the perfect balance is never easy. **While the news on the commercial front is excellent, it is a little more contrasted in terms of financial results.** This year's financial loss and last year's are forcing us to be more cautious, to tighten our budgets and to keep a tighter grip on our profitability.

"The higher-than-expected rise in health costs, combined with still-volatile stock markets, means that certain financial indicators require our attention", explained Karin Perraudin.

The regulatory and political pressure to contain premium increases and limit the levels of reserves is understandable. However, this must not be to the detriment of policyholders. Our reserves have fallen sharply, to the point where some of our health insurance providers are in a more vulnerable situation. This is mainly due to the sharp rise in health costs. In short, insurance premiums have not been covering costs for some time now.

Action is therefore urgently needed to prevent further increases in health costs. The Swiss healthcare system is resilient and strong. This was demonstrated during the Covid crisis. But its funding is not sustainable. **"All partners must act together. For this reason, Groupe Mutuel is calling for the creation of a Task Force to bring all stakeholders together around the same table to put forward strong and effective measures, as from 1 January 2025, in order to stabilise**

costs. This is not a fantasy or a new idea. Switzerland is capable of doing this and has proved so in the past", argued Thomas Boyer, CEO of Groupe Mutuel.

Decisions can be taken immediately on the price of medicines, on encouraging the use of more generics, on false incentives and unnecessary medical procedures, and on the general requirement to have an electronic patient file. **"I am convinced that we must do this, and insurers obviously have their share of responsibility for finding the best solutions that are acceptable to as many people as possible. We cannot let things slide and just hope that everything will change without changing our methods,"** said Thomas Boyer.

The challenges for 2024 are numerous and stimulating. The political stakes are also high, with major referendums and heated debates. **"We urgently need to find effective solutions that can be applied quickly. Therefore, I am calling for a little less discussion and more decision-making to truly find a way to help our citizens,"** said Karin Perraudin. Groupe Mutuel will also be stepping up its efforts to make the customer experience more simple and more efficient. **"We will be there to support, advise and help our policyholders every step of the way,"** said Thomas Boyer.

**Karin Perraudin
Thomas Boyer**

Chapter 2

Key figures 2023





63,000

Number of new customers
acquired as of 01.01 of the
following year (67,500 in 2022)

1,420,000

Number of private customers
as of 01.01.2023 (1,360,598 as of
01.01 of the previous year)

29,500

Number of corporate customers
as of 01.01 of the following year
(28,000 in 2022)

39

Number of agencies
throughout Switzerland (38 in
2022)
Six service centres (six in 2022)



5,855,000

Collected premiums / Turnover
(consolidated figures in CHF thousand)
(5,326,000 in 2022)



5,641,000

Insurance benefits
(consolidated figures in CHF thousand)
(5,177,000 in 2022)



-111.5

Annual result
(consolidated figures in CHF million)
(-472 million in 2022)



2,758

Number of employees as of 31.12
(including apprentices) (2,864 in 2022)
56.5% men and 43.5% women

Health costs: at 3.7%, costs continued to rise in 2023

In 2023, according to estimates that were still provisional at the end of March 2024, health costs continued to rise. The increase was significant, at 3.7%. This is the biggest increase in the last 10 years, excluding Covid.

This is not good news as health costs had already risen sharply in 2022, by 4%, and by around 6.3% in 2021, mainly due to a form of catch-up after the periods of partial lockdown imposed during Covid. This means that the increase over three years is close to 14%.

Costs are therefore continuing to rise sharply, whereas the average annual increase over the last 20 years was around 3%.

After a relative standstill in 2019 and 2020, this continuous increase in health costs is very worrying. **Since premiums are required, by law, to cover costs, a further rise in premiums seems unavoidable this autumn.**

This is bad news for the Swiss health system, in particular for premium payers. The Swiss health system remains of outstanding quality, but funding it is becoming increasingly complicated.

29,500 corporate customers (+1,500): strong growth for the Corporate sector

In 2023, 1,500 new companies signed up with Groupe Mutuel, bringing the total number of corporate clients to 29,500 as of 1 January 2024. In terms of loss of earnings insurance for illness, **Groupe Mutuel is now ranked fifth in Switzerland, ahead of private insurers, which is an excellent achievement.**

In 2023, the overall turnover in the Corporate sector increased by close to CHF 146 million to reach CHF 974 million. This makes the Corporate sector Groupe Mutuel's second-largest source of income, ahead of supplemental insurance.

Slight fall in the number of employees

Groupe Mutuel had a workforce of 2,758 employees at the end of 2023. **This means that around 100 positions were left unfilled** so that we could streamline our resources.

Over the past three years, however, 450 new positions have been created in Groupe Mutuel. This major effort demonstrates our commitment to strengthening all business sectors, and in particular internal sales and the contact centre, so that we are even more efficient in responding to the needs of our insured persons.

Equal pay: "We Pay Fair" label

Groupe Mutuel was awarded the "We Pay Fair" label in 2022, which shows that we have an equal pay policy, as confirmed by an independent body, with a gap of 0.7% in favour of women (excluding sales positions) and 3.4% in favour of men for all positions (with a tolerance of 5% set by the Swiss Confederation).

We are continuing our efforts to further reduce the gender gap and to provide employees with greater transparency on salary issues.



New "Friendly Work Space" label

In November 2023, Groupe Mutuel was awarded the **"Friendly Work Space"** label for the first time, by Promotion Santé Suisse.

This label rewards **systematic and sustainable corporate health management (CHM)**, using six criteria for quality that are endorsed by the State Secretariat for Economic Affairs (SECO) and the Federal Office of Public Health (FOPH).





460,000 Customer Area user accounts, i.e. close to 50% of our insured persons

After a 30% increase in the number of user accounts in 2022, no less than 25% more accounts were registered in 2023. This impressive growth means that at 31 December 2023, there were some 460,000 accounts for 600,000 insured persons (account holders and family members), i.e. around 50% of our insureds.

More and more committed users

In 2023, 10 million logins to the Customer Area were recorded, which is an increase of 23% compared to 2022. Some 109,175 set-ups of the application were recorded, 1.7 million invoices and other documents were sent and more than 100,000 automated interactions were recorded (contract modifications and changes to personal data such as a telephone number or email address).

In other words, this means an average of 3.75 monthly logins per user in 2023. Another gratifying feature is that user satisfaction is very high. For the third year running, the Groupe Mutuel app won 1st prize in 2023 in the "Health" category following an assessment by SIQT (Schweizer Institut für Qualitätstests GmbH).

A reduction of CHF 600 million: thanks to invoice control and the use of digital technology to help contain costs.

In 2023, the volume of medical invoices received by Groupe Mutuel exceeded CHF 6.15 billion, all categories combined.

The checks and corrections carried out using new technologies and the experience of our staff **made it possible to reduce expenditure by 9.4%, that is close to CHF 600 million**, which represents a relief on the same amount of premiums.

In 2023, the most significant savings came from:

Other outpatient care with
190.5 million francs
(21.4% savings ratio)

Hospitalisation / EMS with
106.9 million francs
(6.9% savings ratio)

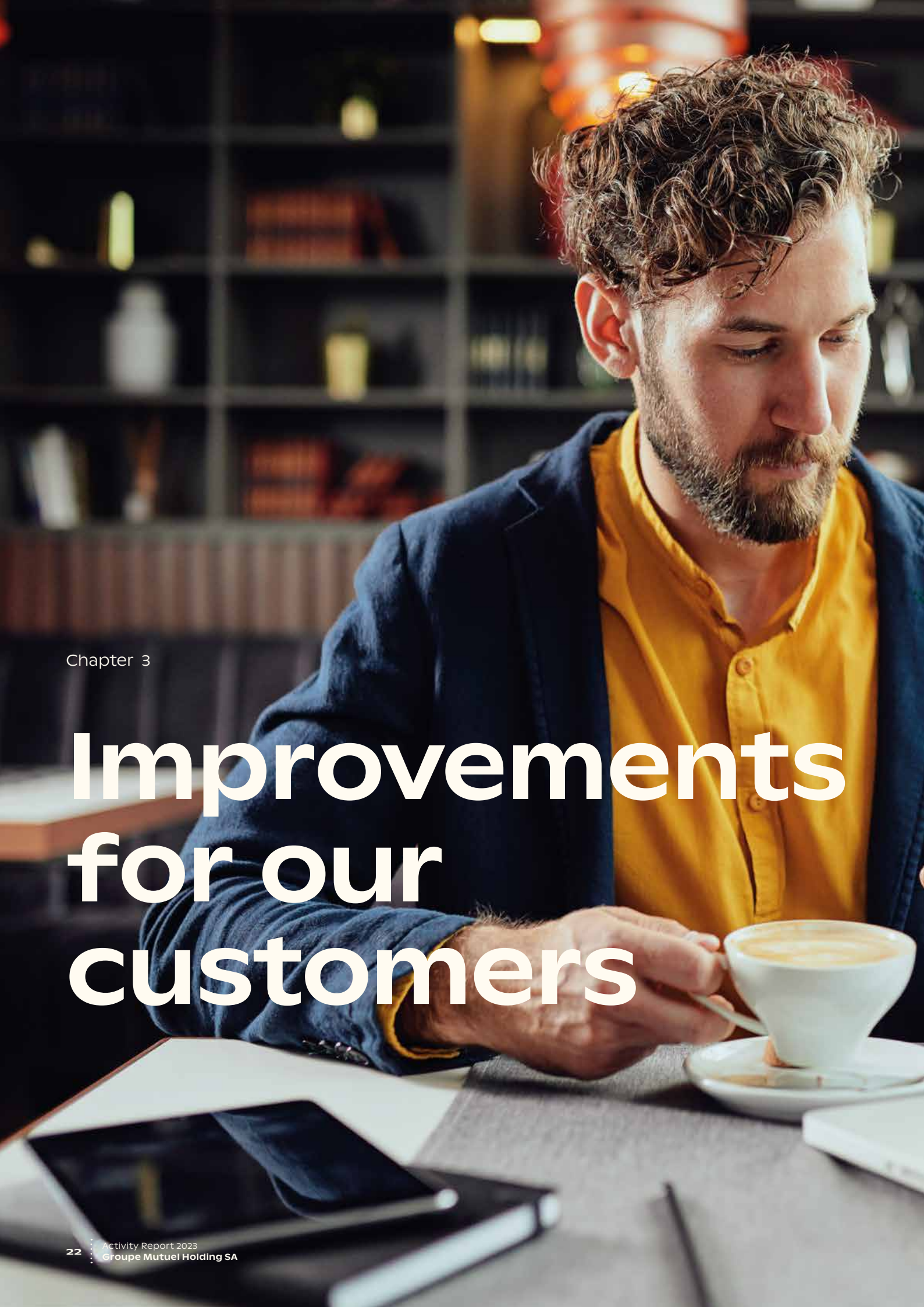
TarMed (Outpatient hospitalisation and doctors) with
94.0 million francs
(3.5% savings ratio)

Dental costs with
66.6 million francs
(39.5% savings ratio)

11.8 days: refunding benefits without delay is added value for our customers

In 2023, the time taken to reimburse invoices (from receipt of the invoice to sending out the refund document) was 11.8 days on average, compared to 10.3 days in 2022.

In terms of the average time taken to reimburse insured persons, **we are maintaining our objective to refund benefits within 16 days.**



Chapter 3

Improvements for our customers



Customer experience is at the heart of our activity

Customer Experience (CX) is a key theme for Groupe Mutuel, and not just since 2020. **Customer experience has been part of our strategic orientation for many years.**

In order to raise customer experience to the highest possible level throughout the company, the Executive Board is constantly increasing the scope of the actions taken by all departments.

Start & Go: to ensure a pleasant experience for new customers

There are many different kinds of experience. They leave their mark on us, for example, when we meet new people during a trip. When we first come into contact with a new company or brand, we also have a number of experiences, whether positive or negative. At this point in time, first customer impressions need to be well planned and coordinated as part of a customer experience chain.

In order to deliver an optimal experience from the very first encounter, Groupe Mutuel launched the Start & Go programme in 2021 and successfully completed it by the end of 2023.

Start & Go focused on the following three phases of Groupe Mutuel's experience chain: to inform, to conclude and to put into practice. During the initial phase of the project, managers from the various departments reviewed the first stages of a new customer's journey, then quickly identified and implemented short-term gains to optimise the customer experience for new policyholders. Here are some examples:



Simplified communication and reduced use of paper – for environmental purposes



A simplified overview of insurance offers and benefits



In-depth training for the sales team to ensure an optimal new customer experience and high satisfaction



A seamless and simplified experience across all customer touch points, both online and offline



A clear overview of the different steps a new customer needs to follow to feel welcome

Assessing the three phases of the new customer experience resulted in an action plan that included 19 optimisation projects, which were implemented as part of the Start & Go programme. These projects were based on the following improvement opportunities for the period 2021-2023.

Opportunities for improvement	Challenges
Digital and autonomous customer experience	Time spent searching for information and products Personalised advice
Sequencing and reducing the amount of information	Discontinuity in the digital journey / Too many documents
Clear and personalised content	Many documents / Unclear templates
Quality and access to advice	Discontinuity in the digital journey / Transparency
Help with product selection	Comparison of different insurance models / Simple models
Access to the Customer Area and the app	Easy access to the portal for all insureds
Customer records status and tracking	Processing times and progress

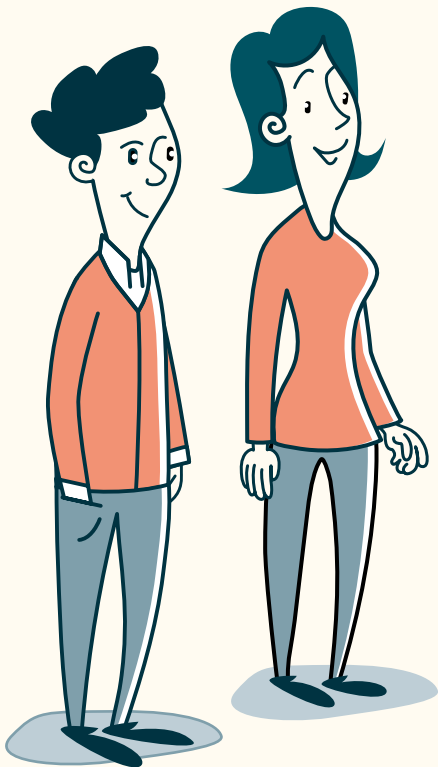
Thanks to everyone's involvement and to our team spirit, customer experience and the customer experience chain were optimised for new policyholders. The Executive Board and the Board of Groupe Mutuel would like to thank the employees who contributed to this success and commend the committed and cross-functional teamwork that was achieved. The Start & Go programme was officially closed on 31 December 2023.

CX experts in every department

Following a series of in-depth training courses and specialist workshops as part of Groupe Mutuel's CX Accelerator, CX experts were appointed in each department.

Their mission: to enhance customer experience at Groupe Mutuel and reinforce customer-focused actions in each department.

A network of around 30 in-house CX specialists was created. These specialists work alongside their colleagues in their respective departments to help them improve customer experience. But what does this mean in practice?



CX in-house experts...

- **provide support** in implementing a customer-focused approach as part of a project that has an impact on customers,
- **help define the objectives and KPIs** relating to customer experience in their department,
- **exchange on the state of customer-oriented practices** within Groupe Mutuel (best practice),
- **define improvements** that can have a positive impact on customer satisfaction.

As a result, all Groupe Mutuel employees are required to constantly comply with the basic rules of customer experience and its strategic role, as well as with best practices, ways of thinking and behaviours relating to customer orientation by means of concrete cases.



One Voice **or** **how to speak to** **customers with** **one single voice**

The aim of the “One Voice” project is to respond more effectively and consistently to customer queries via all customer contact points, in order to reduce the number of different answers given to similar questions.

Back in 2020, the Groupe Mutuel satisfaction questionnaire showed that action is needed in this area to further improve customer satisfaction and strengthen our position in the market.







One Voice therefore focuses specifically on the following objectives:

Improving turnaround times for customer queries and tracking them across all sectors, providing consistent and coordinated responses for all customer contact points within the company.

Improved satisfaction during the “Put into practice” customer experience phase, which has a positive effect on overall customer satisfaction.

Strengthening cross-sector activities to optimise customer experience and standardise customer interactions, combining the strengths of all departments to improve Groupe Mutuel’s customer contact points.

Here too, through participative workshops, the staff involved in the project very quickly identified the first short-term gains and successfully implemented them. Here are some examples:

-  **Encouraging contact by phone**
-  **Simplified confirmation of payment arrangements**
-  **Optimisation of automatic email responses**
-  **Proactive announcement of the average processing time for customer queries**

Complaints management: the key discipline in customer satisfaction

To improve customer satisfaction in the most effective way, we need to take action where the problem lies. To this end, a seamless and professional complaints management system is essential to our success.

By redesigning its complaints procedure to create a new one that will apply throughout the company, Groupe Mutuel has defined a consistent basis for handling, managing and monitoring complaints, and has been working on its implementation since the end of last year.

The aim is to roll out the new complaints procedure by the beginning of 2025.

Thanks to its great number of actions, the One Voice project has improved customer experience. A huge thank you to all the employees who took part in the development of this project! Your involvement and cooperation are crucial to the ongoing improvement of the customer experience offered by Groupe Mutuel.

2023 Premium Hotline:
**"The extent of our
team's knowledge is
impressive"**

In the autumn of 2023, following the announcement of a further increase in premiums for the entire industry, our insured persons were taken aback and questions came in thick and fast. In particular, they wanted to know how they could optimise their current insurance contracts to save on premiums.

To answer their many questions, Groupe Mutuel once again set up a free Premium Hotline between October and December.

Specially trained staff were on hand to help current insureds and potential customers, between 8:00 and 19:00. Within three months, the team had answered some 612,000 calls.

What qualities do you need to be able to respond effectively to the Premium Hotline and help customers in the best possible way?



Miriam Alacqua is a training officer at the Contact Centre and knows exactly what it takes to provide a top-notch service despite the turmoil caused by premiums in the autumn.

Miriam, what qualities do you need to be able to handle so many calls?

A great deal of know-how, because our healthcare system is complex. Even when we don't have an immediate answer to a question, we need to know where to find the information.

Rising premiums are a cause of unhappiness and anger. How do you deal with this?

Empathy is key. We show understanding and compassion. The current premium increases affect many households. It is therefore understandable that they should give rise to discontent. We try to find solutions that allow insured persons to benefit from lower premiums, such as increasing their deductible amount.

What shows that you have succeeded?

The gratitude and positive feedback from our customers. I'm delighted when I can offer policyholders the support they need. Via the Premium Hotline, we can achieve this very often and very quickly.



Sometimes, members of the Executive Board get to answer calls...

The Premium Hotline is so appreciated by Management that the Head of Sales himself decided to pick up the phone to answer customer queries relating to the new premiums. To do this, he was accompanied by a long-standing employee from the Contact Centre.

"I was very impressed by the extent of the knowledge that our colleagues on the Premium Hotline have to call upon", said Cédric Scheiben, Head of Sales and member of the Executive Board.

Miriam Alacqua

Chapter 4

Making life easier



Our staff strives to make life easier for our customers

Groupe Mutuel's vision is clear: **to be the leading health and pensions partner for private and corporate customers.** **Being a partner means to show a responsible and caring attitude.** Especially in an area that affects people's physical health or financial needs throughout their lives. Groupe Mutuel strives to make life easier for its customers, by offering new products and services and providing high-quality and user-friendly advice.

But sometimes, it's the small and everyday improvements that have the biggest impact. **Our staff, who are in daily contact with our insured persons, often notice that processes could be improved and come up with plenty of ideas that are quick and easy to implement.** Here are a few examples of improvements that were implemented in 2023 thanks to the initiative of our employees who are committed to helping our policyholders.



Refunding breast pumps



Valérie and Cristiana, who work in the Claims department in Lausanne, noticed that **several insured women had asked for breast pumps to be reimbursed following the birth of their child, and that this reimbursement was sometimes refused.** The conditions are that the breast pump must be prescribed by a doctor and purchased directly from an approved supplier or pharmacy. This excludes internet stores such as Galaxus or Interdiscount, even if the product is the same. Normally, breast pumps are partially covered by basic insurance and partially by the insured person's supplemental insurance.

Valérie and Cristiana discussed these ideas with the rest of the team and passed on the inconsistencies to their managers. Both employees contacted their customers to update them on the situation. Customers appreciated this personal contact and were very understanding.

Finally, the decision was made. Breast pumps would be reimbursed for all suppliers, subject to the following conditions: the supplier would be recognised as a provider if it was entered in the commercial register and its prices were accordance with the LiMA/MiGeL amounts and with the person's supplemental insurance, within the framework of the law. This practice benefits many insured persons and brings consistency to the way their claims are dealt with.

"We really felt useful to our policyholders and noticed that we were able to change things. This is very rewarding", said Valérie and Cristiana.



Every day, the “Pharmacy” department teams of Groupe Mutuel receive many invoices from policyholders. **However, the prescription to justify the purchase of the prescribed drugs is often missing. As a result, we have to systematically contact customers to ask them for the prescription, by post.** If insured persons do not have the Customer Area app and have to return the paper prescription by post, the procedure is long and tedious. It also happens that policyholders no longer have the prescription, in which case they have to contact the doctor who prescribed it. This means that the 30 or 60-day time limit is sometimes exceeded, and that no reimbursement is possible.



Refund of pharmacy costs without a medical prescription

A working group was therefore set up. This made it possible for managers to propose several solutions to optimise work processes. The collaboration led to a number of solutions, all of which were put to the test during a meticulously executed trial phase.

And that’s how a new working method was developed.

Firstly, if the pharmacy receipt contains all the information required for reimbursement, no additional prescription is required.

Secondly, if the receipt is incomplete, the claims officers check the insured person’s claims history in the system, and are generally able to establish the link between the doctor’s bill and the receipt. In this case too, there is no need to request a prescription.

“Setting up this kind of process takes time, but it’s been extremely instructive. And I’m pleased to know that we’re making life easier for our policyholders. After all, there’s a person behind every invoice”, concluded Isabella, an employee on the project team. The entire Pharmacy team is now working according to the new process.



Another case is the refund of family home help by supplemental insurance. According to existing regulations, family home help is intended to meet a customer's temporary needs, such as when returning from hospital. However, this assistance is financially limited to CHF 300 per week, for a maximum of 12 weeks. In some cases, such as those involving the elderly, the need is less than CHF 300 per week, but requires support over a longer period, sometimes for one year.



Payment of family home help on a yearly basis



Our claims officers demonstrated a pragmatic approach in their day-to-day work that now benefits customers. In order to meet the needs of customers who have been loyal to Groupe Mutuel for many years, our employees do all they can to find compromises.

Given that the limit on reimbursements is CHF 3,600 once a year, the idea is to operate as follows: this maximum amount can be granted over 52 weeks, when required by a person's situation.

This is not a new practice, but it has been formally brought to the attention of the Executive Board, which has decided to share and extend this good practice to all employees.



Before 2018, most of Groupe Mutuel's alternative models, as well as those of almost all of its main competitors, did not refund benefits when policyholders had not complied with their alternative model (e.g. visiting their family doctor first).



Rethinking the penalty system for alternative insurance models

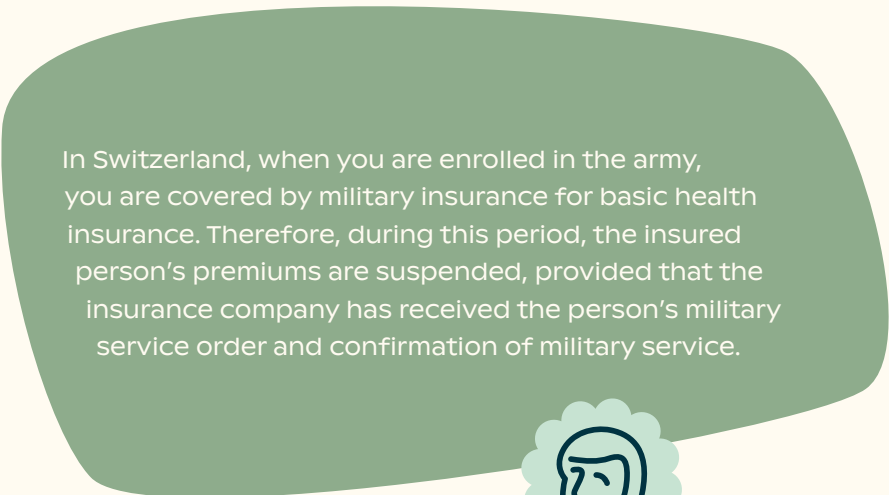


A few years ago, the Products team was already thinking about how to improve customer service in the management of penalties as part of alternative insurance models. Employees were convinced that it was not normal in a statutory insurance scheme to refuse all benefits to a policyholder simply because he or she had not respected the principles of an insurance model. In their view, it would be fairer to reimburse the insured in full but then to transfer the person, after several penalties, to the standard model with free choice of doctor.

As of 1 January 2020, two new alternative models were launched using this procedure, and a third model started applying the process in 2021.

In 2022, the Products teams embarked on a huge project to standardise the alternative insurance models, of the "family doctor" type. They drastically reduced and merged Groupe Mutuel's range of alternative insurance models, bringing it down to six models from an initial twelve, almost all of which had different ways of operating and managing penalties, and most of which refusing to refund benefits. The new standardised, customer-oriented management of penalties was therefore extended in 2023 to all insureds with a "family doctor" type model.

Finally, with the launch of the successful PrimaFlex product, the range of AOS/OKP basic insurance products was reduced from six to four models, all of which now operate uniformly under the new penalty management system for all policyholders who have opted for an alternative model. What's more, this work has been recognised and supported by the "Fédération des Consommateurs" (organisation for the protection of consumer rights), which awarded Groupe Mutuel the highest score of all its competitors for the management of penalties. Grégory and Olivier, in the Products team, said: **"We are extremely pleased to see that the Fédération des Consommateurs values and agrees with our vision of being forward-thinking in the Swiss health system, with the aim to show a caring attitude towards our policyholders."**



In Switzerland, when you are enrolled in the army, you are covered by military insurance for basic health insurance. Therefore, during this period, the insured person's premiums are suspended, provided that the insurance company has received the person's military service order and confirmation of military service.



Suspension of the payment of the AOS/OKP basic insurance premium **during military service**



When processing the many invoices received in her department, a member of staff in the Contracts department was on the phone one day with a policyholder who was surprised to have to pay a premium for the month of December. He was on military leave, between basic recruit school, which ended on 4 December, and officer training, which resumed on 8 January of the following year. Until then, Groupe Mutuel's practice had always been to bill the period between military service periods.

On her own initiative, the employee carried out a quick Internet search of the information provided by the army on military insurance. She found that an interruption of less than six weeks between two periods of service is also covered by military insurance, as this period is considered as "leave". This provision does not appear in the LAMal/KVG and OAMal/KVV that define the conditions to be exempt from paying insurance premiums.

The employee reported this to her manager, who in turn made enquiries and informed senior managers. In view of this, the former practice was reviewed. As a result, policyholders who are between military service, as long as they send the required certificates to Groupe Mutuel, no longer have to pay basic health insurance premiums to Groupe Mutuel.

The new procedure was widely communicated and immediately adapted.

"All I did was my job by taking a close interest in it. But it's great to see that I've been able to contribute to changing something that now makes perfect sense," she concluded.





Chapter 5

Customer Area



Impressive progress for the Groupe Mutuel app

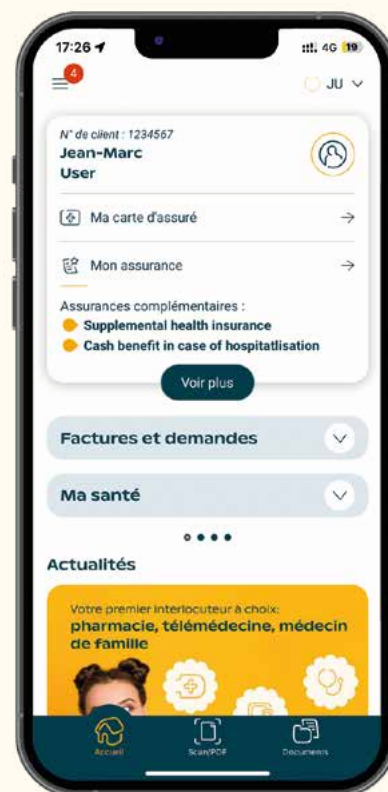
The Groupe Mutuel app provides customers with 24/7 access to their health insurance information. They can view their data at any time, wherever they are. The app is available for download on the Google Play and App Store platforms, and as a web version on the Groupe Mutuel website.

Easy access to the application, user-friendliness, and features to manage insurance and benefits, which are continuously upgraded, make the app an increasingly popular tool for policyholders.

Customer Area

To be able to meet our customers' needs and expectations: this is the overriding priority that has guided Groupe Mutuel for several years now, as a life partner for its policyholders.

The Groupe Mutuel application offers a fluid experience, with the aim that insureds become self-sufficient. At a time when digitization continues to progress in most areas of life, the Customer Area provides users with the most practical and comfortable tools.



It's one of the easiest ways to manage health insurance and, in the medium term, Groupe Mutuel customers will also be able **to access information and features relating to their private pension policies** (such as life insurance).

Designed to make life as simple and as easy as possible for insured persons, the Customer Area makes the most of the opportunities offered by technology, innovation and artificial intelligence, while ensuring complete transparency of processes. The aim is to provide customers with the best possible customised service and maximum ease of use, including expert and tailor-made advice.

Since 2022, major changes have been made to the application, and a number of marketing and communication campaigns have been put in place to promote its use.



More and more committed users

In 2023, 10 million logins to the Customer Area were recorded, i.e. an increase of 23% compared to 2022.

Close to 9 million documents were viewed, 1.7 million invoices for reimbursement and other documents were sent and more than 100,000 automated interactions were recorded (contract modifications and changes to personal data such as a telephone number or email address). **In other words, this means an average of 3.75 monthly logins per user in 2023.**

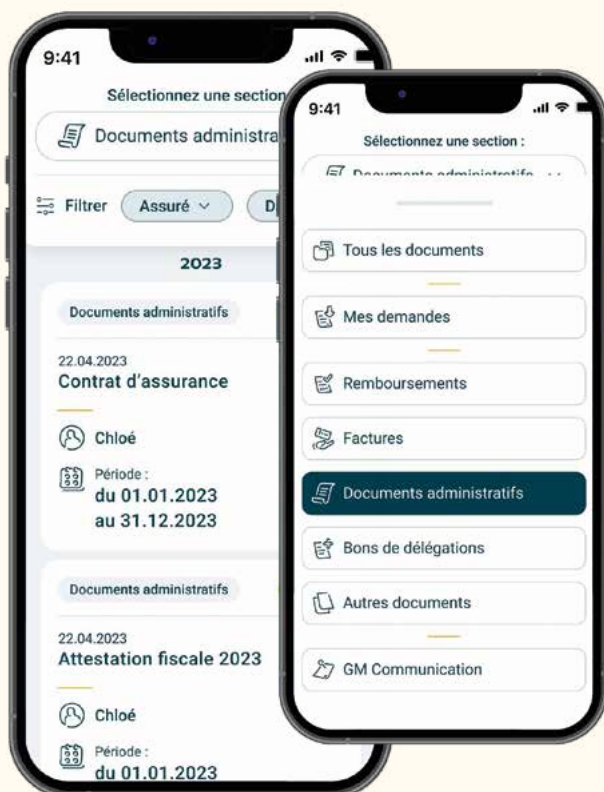
Customers supported on a daily basis and at important times

Understanding its customers is at the heart of Groupe Mutuel's concerns.

Thanks to the implementation of customer satisfaction measurements (CSAT), as part of our continuous improvement process (Feedback Loop), an ever finer and more precise understanding of customer needs has been achieved, allowing us to fine-tune user experience.

While the application not only empowers customers, it also helps to reduce the number of telephone calls made to the Groupe Mutuel call center, which saves time for the customer and enables Groupe Mutuel to optimise its resources so that it can concentrate on activities with higher added value for the customer.

Major improvements and our Customer Area as a privileged point of entry for useful and practical services.



Several of the Customer Area's key features were optimised over the course of 2023:

➤ A new homepage now provides **direct access to essential information** and offers greater autonomy.

➤ The navigation of the documents section was redesigned. **Categories and filters simplify administrative management.**

New care and prevention services were put forward:

➤ **A symptom checker is now available thanks to Ada artificial intelligence!** By answering a few questions, insureds receive a list of possible causes of their symptoms and recommendations on the next steps to take.

➤ A new digital prevention service was launched for a pilot phase. Our policyholders were offered **free access to the Premium version of Pregnancy+, the most widely used pregnancy monitoring application in Switzerland.**

➤ Groupe Mutuel joined Compassana, **a new ecosystem that contributes to efficient and high-quality healthcare.** This new health partner for our policyholders can be accessed via the Customer Area.

High customer satisfaction: 4.4 stars out of 5!



The overall satisfaction of insureds using the Customer Area is measured on a regular basis, and stood at 4.4 stars out of 5 in 2023.

High-quality and technically reliable services keep the number of requests to a minimum.

Despite a sharp increase in the number of accounts (25%) and sessions (23%) in 2023 compared with 2022, the volume of calls to the IT helpdesk has only increased by 3% compared to 2022.





Customer testimonials

"With the Customer Area, everything is much faster. I no longer need to send anything to Groupe Mutuel by post, I save on postage costs, and I can simply scan the invoices and send them on."

Dominic, 48 years old

"I regularly use the Customer Area on my mobile phone. The application is very handy for quickly checking whether I've received a notification from Groupe Mutuel."

Noomi, 24 years old

"Thanks to the Customer Area, I can send my invoices and check the status of my reimbursements. This feature is really easy to use and useful."

Tiago Miguel Luis, 43 years old

In-house testimonials



Arnaud Dadure, IT Engineer, Engineering Community

"I am a developer. Based on the marketing and graphic mock-ups of the pages to be created, we produce them right up to the point where they are made available in the Apple and Google stores.

90% of our work consists of programming. Our application was created to make it easier for insured persons to interact with Groupe Mutuel. For example, they can scan invoices and send them directly via their mobile phone.

I love my job, and all of our technology is cutting-edge. As technology evolves, we develop the application at the same time, and as a person insured with Groupe Mutuel myself, **it's particularly gratifying to develop an application that I can then use directly."**



Michaela Zezulkova, Service Designer for the Customer Area

"My role is a bit like that of an architect, who has to understand how a client wants to use the space. We have to understand the customer's wishes and needs, then draw up sketches for the layout of the space and the design of the features, before gathering feedback from our customers. The aim is to create an application that is seamless, intuitive and efficient, in a process of continuous improvement.

What really motivates me?

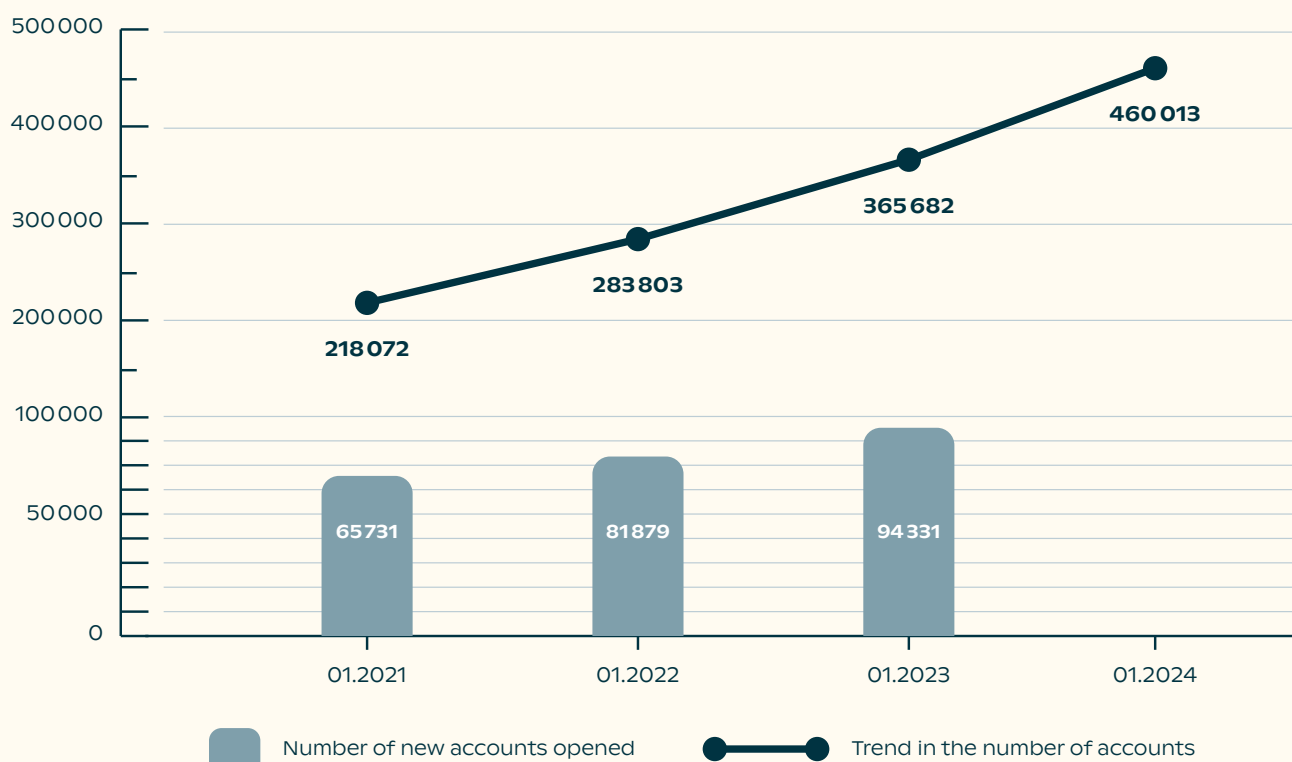
The fact that the customer is always at the heart of our work. And that our work has an impact on hundreds and thousands of users. I love working with complexity and turning it into simplicity, it's a challenge every time and it's exciting. "




Andrea Leone, Head of the Support Team for the Customer Area

"Our role is to respond, by telephone or email, to all our customers' requests, for example relating to technical or user problems. My more specific task is to coordinate the team, ensuring that it works in the best possible conditions and remains up to date with the latest information and technical developments. **What motivates me the most is the human side of team management.** I like to see my team at ease and making progress, and happy to come to work. It's also exciting to be able to help or inform a customer with their questions or procedures. "

After a 30% increase in the number of user accounts in 2022, no fewer than 25% more accounts were registered in 2023. **This impressive growth was reflected as of 31 December 2023, with some 460,000 user accounts for 600,000 insured persons (policyholders and family members), i.e. around half of Groupe Mutuel's insured persons.**





Chapter 6

Locally-based services



Remaining close to our customers in the digital age

Our world is becoming increasingly digital.

While Groupe Mutuel is a pioneer in digitization, proximity to its customers through physical agencies remains firmly anchored in its strategy. With 39 branches throughout Switzerland, **Groupe Mutuel has established a relationship of trust with its customers in every canton.** When it comes to dealing with complex insurance issues, nothing is more effective than face-to-face advice.



Barbara Furegati-Koller,
General Agent in St. Gallen,
and **Vincent Hornung**,
General Agent in Geneva,
give us an insight into
the day-to-day work in an
agency.

"Human contact is important to us"

At the gateway to the old town, at Oberer Graben 37, the friendly team at the Groupe Mutuel branch in St. Gallen welcomes visitors, even without an appointment. General Agent Barbara Furegati-Koller explains why nothing replaces face-to-face advice.

"We're so much more than a health insurance company", said Barbara Furegati-Koller, General Agent for Eastern Switzerland.

Indeed, people are not always aware that Groupe Mutuel not only insures private individuals in the event of illness or accident, but is also one of the largest insurance providers for companies.

"Whether it's health insurance, life insurance, protection against cybercrime, daily allowance benefits or accident insurance for companies, we offer all kinds of solutions under one roof and work with our customers to find the the insurance solution that will suit them", explained Barbara Furegati-Koller.

This means that anyone living in St. Gallen can visit the agency to receive personalised advice on the full range of health and pension insurance benefits.

A solution for everyone

Thanks to its multi-brand strategy, Groupe Mutuel can offer its policyholders the right product for every life situation. Depending on one's personal budget or specific needs, **the range of products and possible combinations is so vast** that there is a solution for everyone.

But why does Groupe Mutuel need to be based in St. Gallen? The answer is simple. Because they are based in Eastern Switzerland, the insurance staff at Oberer Graben is able to advise customers and potential customers much more effectively, not only in terms of insurance, but also with cultural sensitivity and proximity.

"And because we love our city, we support the economic development of St. Gallen to help make our city even more attractive. This is very important to us!", explained Barbara Furegati-Koller.

"Nothing can replace personal contact on the spot"

In this digital age, one might also ask why Groupe Mutuel still relies on local agencies.

Here too, Barbara Furegati-Koller, who became an insurance agent by passion, has the answer: **"Human contact with our customers is very important to us. There's no substitute for personal contact and on-site advice, especially when it comes to complex insurance issues. You can't communicate as effectively over the phone or online as you can when you are face to face with the customer. And that's where my team comes in. With us, you can also drop in without an appointment for an advisory meeting".**



“Human contact is important to us”

Barbara Furegati-Koller





“Our customers are at the heart of our concerns”

Vincent Hornung



A man with many hats

Four years ago, Vincent Hornung became the General Agent for the Geneva-based agencies. He manages two agencies, but the Geneva Mont-Blanc agency stands out for its significantly higher number of customer visits. With 27,803 visits in 2023, it is by far the busiest Groupe Mutuel agency in Switzerland. Insurance is not his only passion. Vincent Hornung is also the mayor of the small town of Céligny, and married with three children. With his great talent for organisation, he manages to reconcile everything.

When asked what makes the Geneva Mont-Blanc agency so special, Vincent Hornung replies: **"With 27,803 visits in 2023, it's the busiest Groupe Mutuel agency in Switzerland. We have five or six counters to welcome customers and I'm very proud of my staff, who work with great resilience and efficiency. If we compare the months of January 2023 and 2024, there were 600 additional visits, which represents an increase of +20%. Senior management has supported us by agreeing to set up a ticket dispenser to help us cope with the large influx of visitors and ensure a fair waiting time for all customers."**

Closely responding to the needs of our policyholders is a key factor in our success

Vincent Hornung believes that to succeed in an agency, you need to have a number of qualities. For example, employees in direct contact with customers have good listening skills. With a great deal of empathy and a thorough knowledge of the insurance sector and Groupe Mutuel's processes, they are able to advise customers in the best possible way. They also need a good dose of stress resistance!


In a nutshell: **"Our aim is to satisfy the wishes of our policyholders, and that's what leads to success,"** said Vincent Hornung. The multilingualism that characterises Geneva also plays an important part. If someone speaks a language other than French, such as Spanish, Portuguese, English or Albanian, that's a major asset for the agency. Whether a customer does the paperwork online or comes to the agency is up to them.

Even though it is now possible to take out insurance online, the staff in Geneva are well aware that policyholders are looking for a personal contact on the spot for complex questions. **"We give our customers the choice of communicating with us via our customer application, which is the leader of its kind in Switzerland, or coming to one of our branches for face-to-face advice. It is clear however that face-to-face meetings allow us to answer questions more comprehensively and also to anticipate other questions that may arise later."**

Local agencies play an important role in Geneva. **"Nearly 30% of the population of Geneva are insured with Groupe Mutuel, and the quality of our services is well established. Thanks to personal contact, we are much better at establishing a relationship of trust with our customers, because they are at the centre of our work,"** concluded Vincent Hornung.

The figures speak for themselves. Agencies are popular. The top three agencies with the largest number of visits in 2023:

German-speaking Switzerland		French speaking-Switzerland	
Zurich	15,789	Geneva Mont-Blanc	27,803
Bienne	10,036	Lausanne Métropole	21,264
Bern	8,225	Martigny	12,551



Chapter 7

Priority to women's health



Priority to women's health

Groupe Mutuel considers women's health to be one of its priorities. Biological and socio-cultural differences between genders have health and therapeutic repercussions.

In addition, because of the menstrual cycle and hormonal fluctuations, half the population has problems that are specific to women. Despite this, only 4% of medical research funding is allocated to women's health, and women are under-represented in many clinical studies.

In 2023, new products, new partnerships and the third season of Tech4Eva, a start-up acceleration programme unique in Switzerland, **strengthened our focus on women's health**. Our customers and staff **benefited from a wide range of medical services**, and we raised public awareness of crucial issues such as breast cancer prevention and menstruation.



A close-up photograph of a woman's hands performing a breast self-examination. Her hands are positioned on her chest, with fingers gently palpating the breast tissue. She is wearing a light-colored, possibly white, t-shirt. The background is dark, making the subject stand out.

Know-how – Palpa facilitates **early detection of breast cancer**

Every year, around 6,500 women develop breast cancer and nearly 1,400 women die from it. It is the leading cause of death in women aged between 40 and 50. As early detection of a possible breast tumour can be decisive for treatment, a mammogram every two years is recommended for women over 50. What's more, everyone should carry out a breast self-examination.

The start-up company Palpa has designed a tool to learn how to carry out a breast examination in the shower. Many women don't know exactly how to examine their breasts, forget to do so on a daily basis, or don't know what the characteristics of a tumour are. The breast-shaped container filled with liquid soap created by Palpa makes breast palpation an integral part of a woman's personal hygiene routine. With a hard mass to suggest an anomaly, it becomes possible to palpate a "tumour", a nodule that is still and firm to the touch.

Last year, Groupe Mutuel offered the Palpa device to all its female employees to encourage them to take care of their health and to promote prevention.



Palpa was one of 21 start-ups taking part in the third season of Tech4Eva, an acceleration programme set up in 2021 by Groupe Mutuel and the EPFL Innovation Park to provide nine months' support for young companies that offer innovative solutions in the field of women's health.

The third season of Tech4Eva was a great success in 2023.



21 start-ups



147 applications



+ 1,000 people
attended events



4 international tours



180 million Swiss francs
raised
(three cohorts)

.....

Groupe Mutuel's PrimaFlex basic insurance model actively encourages regular breast cancer screening.

For insured persons living in cantons where no screening programme is offered, mammograms are exempt from the deductible.

In addition, some Groupe Mutuel supplemental insurance policies **that cover preventive gynaecological examinations partially refund** the method "Discovering hands®", that was implemented by the Swiss organisation Pretac+.

Pregnancy: a unique stage in life

The birth of a child is an extraordinary event. To ensure that our insured women have the best possible pregnancy experience, we provide intensive support throughout this period.

As part of our partnership with Philips announced in autumn 2023, insured families expecting a child have **free access to Pregnancy+, the most widely used antenatal monitoring application in Switzerland. This partnership was awarded the "ITC DIAMOND Award 2023 for the best strategic innovation"**. Once activated in the GM Customer Area, it provides access to tailored content, to video courses – for example prenatal yoga, interactive tools such as contraction and step counters, and to expert advice on pregnancy and childbirth.

Thanks to our exclusive partnership, **our insured women also benefit** from preferential rates on a selection of Philips childcare products: breast pumps, babyphones with or without video and feeding bottles of various sizes.

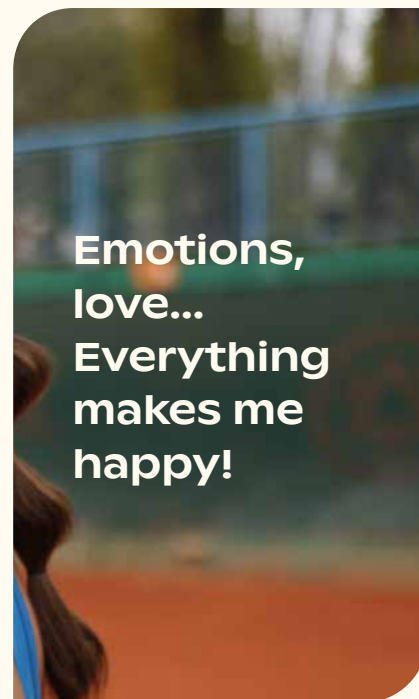
Pregnancy raises many questions. Therefore, the presence of a specialist is invaluable during this phase, particularly at childbirth.

Groupe Mutuel has been working closely with the association Doula CH since 2023. Some of our supplemental insurance plans offer **a lump sum to cover assistance for future parents by a doula recognised by the association.** The doula profession complements that of midwife and gynaecologist. Experience and numerous studies have shown that this type of service has a positive impact on the birth process, and therefore contributes to the health of both mother and child.



Céline Relecom, an innovation expert at Groupe Mutuel:

"Personalised support can make all the difference, especially when it comes to health. By signing an agreement with the association Doula CH, we are able to provide our insured women with comprehensive support and security, since the association's members are certified and have ratified an ethical charter".



**Emotions,
love...
Everything
makes me
happy!**

Belinda, **Groupe Mutuel ambassador and mother-to-be**

How are you experiencing your pregnancy?

Fortunately, I'm doing very well and I don't have any major problems. I'm enjoying the time I have to myself, and I'm finally seeing my friends and family. I get out and about a lot and give myself enough rest.

What's your advice for mums-to-be?

To follow your instincts. I'm convinced that we spontaneously know what to do at any given moment, and that it's good to trust your intuition. I've been advised not to worry and not to read too much about motherhood. Of course, it's important to be informed, but not to let the stress build up.

What other advice have you received?

I've learnt that when parents are calm, the baby senses this and tends to imitate their behaviour. The baby senses parental stress. So we try to stick to a "zen attitude".

What do you enjoy the most?

Emotions, love... Everything makes me happy! We're already overjoyed and can't wait for our baby to be born.

Menstruation is still a taboo...

On average, women menstruate **during 3,650 days in their life**. Menstruation is a monthly phenomenon.

Yet we still don't talk about it that much. By carrying out a representative survey, Groupe Mutuel wanted to find out more about how women feel during their periods, and how they deal with menstruation on a daily basis.

The results of the survey are revealing

One in five Swiss women suffers from severe menstrual pain, and more than half of those surveyed use painkillers for relief. In the under-35 age group, more than 25% of respondents reported severe pain.

Most of them feel restricted in their daily lives because of their periods. 60% refrain from certain activities during menstruation, the most frequently cited being swimming and sexual intercourse (in almost half of cases), followed by sports (33%). Young people and women in French-speaking Switzerland are the most likely to give up these activities.

Several experts, including **Dr Nora Wieloch**, head of the Women and Sports Division at the Balgrist University Clinic, **Claudia Kubica**, a sports science specialist at the University of Bern, and **Anne-Marie Flammersfeld**, a former ultratrail champion and running coach, were invited to two events in Basel and Winterthur to introduce the subject from different perspectives.

Participants were also given the opportunity to physically experience different levels of menstrual pain using a simulator.





At the women's races in Winterthur and Basel, where Groupe Mutuel is the main sponsor, we raised runners' awareness of menstruation by using the slogan "Real life takes its course, with peace of mind". Fifteen information panels along the race route offered food for thought on the subject of menstruation. On the Groupe Mutuel stand, participants were invited to express their views in a survey.

"Being in direct contact with the participants in the 15 or so sporting competitions that we sponsor throughout the year, we aim to encourage discussion. Alongside the women's races, we are keen to tackle a subject that concerns all athletes, every month, and to highlight its repercussions on the practice of sports",

said **Manuel Toscan**, Events & Sponsorship Project Manager at Groupe Mutuel.



Chapter 8

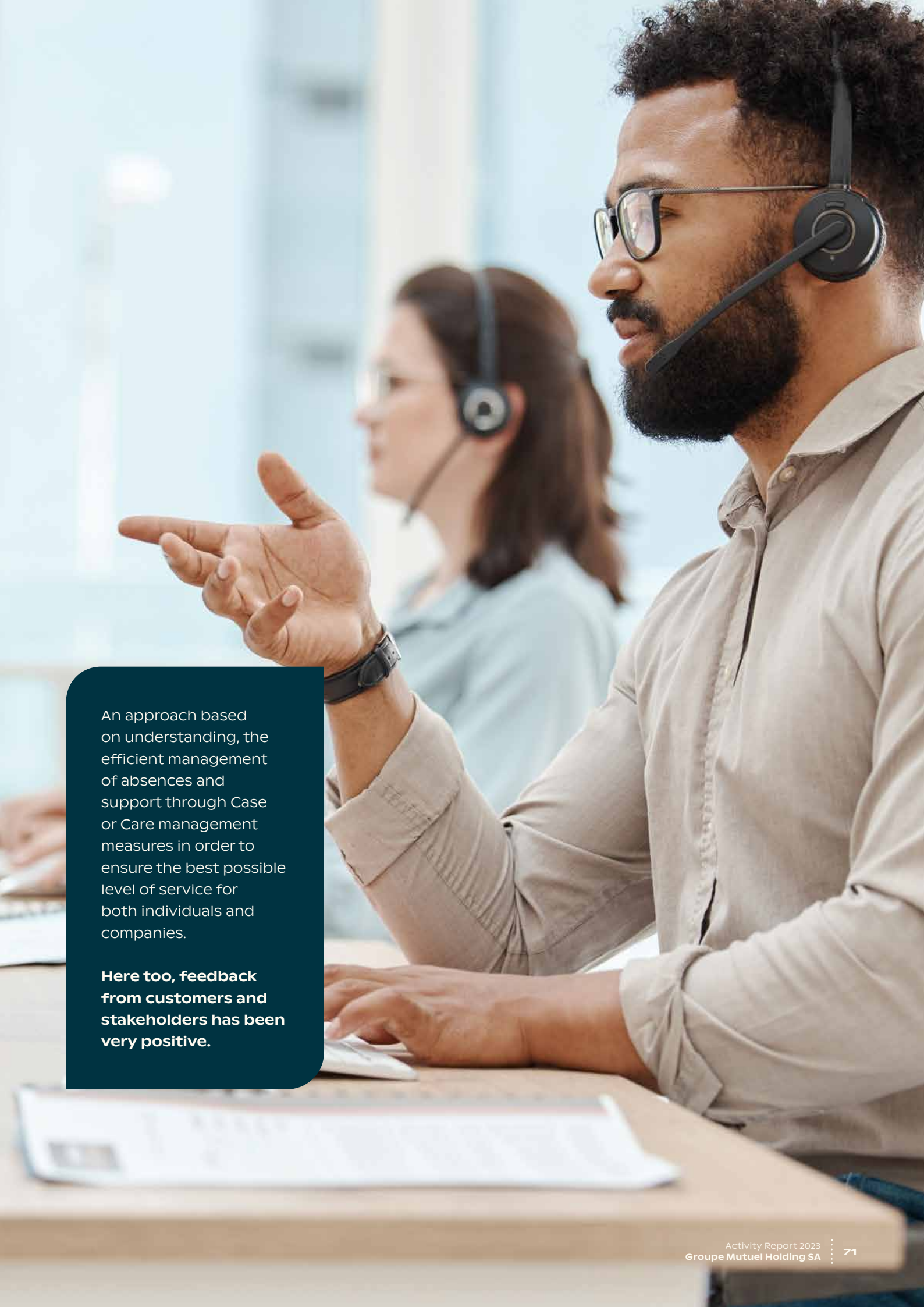
Corporate Sector



Continued growth

Customer satisfaction is at the heart of Groupe Mutuel's strategy.

Michelle Bender, Head of Corporate Strategic Planning, explains what measures were implemented **to better meet customer expectations.**



An approach based on understanding, the efficient management of absences and support through Case or Care management measures in order to ensure the best possible level of service for both individuals and companies.

Here too, feedback from customers and stakeholders has been very positive.

Satisfying our partners' expectations is a strategic objective for Groupe Mutuel, and one that is becoming increasingly important...

For several years now, Groupe Mutuel has been measuring customer satisfaction through annual surveys, both on a qualitative and quantitative level. Every other year, we carry out a survey of some 4,000 corporate customers, across all branches (LPP/BVG, daily benefits and LAA/UVG). It is based on our customer experience and aims to identify areas for improvement. The other year, a satisfaction survey is carried out by the independent polling institute Ampuls, which allows us to compare ourselves with the market. This gives us a clear idea of where we stand in relation to our competitors.

Since 2020, the two surveys have delivered similar messages in terms of our partners' expectations, i.e. **improvements to the corporate customer area, a better understanding of CorporateCare** (part of Corporate Health Management) and what it represents, **as well as better monitoring of and information on claims.**

It was therefore on the basis of feedback from companies that the new corporate customer portal was launched in 2023...

Yes. We launched a completely revamped portal, both in terms of ergonomics and available services and content. To achieve the result made available in September, we took into account customer feedback gathered over the last few years. The satisfaction rate resulting from the survey carried out between December 2023 and January 2024 is very pleasing. **At over 90%, it confirms that we have identified expectations and needs and have been able to respond to them, which is essential to building customer loyalty.**

To prepare for the future, we also asked customer companies about their needs in terms of additional features. As a result, we were able to draw up our 2024 IT development plan, based on this feedback. **We will continue this process of continuous improvement based on customer expectations.**

The monitoring of client accounts and claims was integrated into the corporate customer portal...

Indeed, monitoring now includes the clearest possible information on the progress of current claims, **whether at the processing or reimbursement stage, with a view to ensuring transparency** and, of course, complying with the confidentiality of the process. This enables employers to access the information they need with complete autonomy.

In 2023, you also revised the terminology related to corporate health management...

Yes, and that includes the terminology used by the people who work in this field. For example, the claims officer is now called the health officer.

This approach is intended to highlight the care given to the human dimension

(HumanCare) and our ability to analyse and provide solutions at an organisational level (CorporateCare).

These are the two pillars of Corporate Health Management (or CHM).

An approach based on understanding, efficient absence management and support through Case or Care management

ensuring the best level of service for both individuals and companies. Here too, feedback from customers and stakeholders has been very positive.

After each visit to our customers, a short survey is carried out, which enables us to build up our satisfaction database.

What are your main development priorities for the coming months?

In 2024, we're going to continue **to develop the digitization of absence reports in a number of ways**, including developing Application Programming Interfaces (API) to link up with the tools of large companies that manage their staff using their own systems – for example, when they report a claim, so that information on salary, employee number and person is automatically fed back into our management tool.

We are also going to strengthen **our integration with IGB2B to improve the service to brokers**, with the implementation of an additional module that will allow brokers to check their commissions and the premium invoices for their clients.

Speaking of brokers, what feedback do they give you on the services offered by Groupe Mutuel?

In addition to company surveys, every year we take part in the Broker Panel, a survey of brokers conducted with the support of an independent institute.

This survey has shown that we are the insurance company that has the most direct interaction with brokers, who form a very important group of partners for Groupe Mutuel. Their feedback is invaluable to us.

Thank you for these clarifications. In conclusion, where would you say that Groupe Mutuel is particularly well positioned?

What emerges clearly from the surveys and studies is the quality of the relationship with our Relationship Managers and our Health and Contracts officers, who are much appreciated by our partners. Our staff are able to establish an authentic personal relationship with our corporate customers. This proximity is reinforced by the fact the the officers who handle absences, contracts and CHM get to meet their customers in person. Therefore, for a company, a Groupe Mutuel employee has a face and not just a name. Groupe Mutuel is rated very positively for everything to do with customer relations. It is perceived as friendly and pleasant in its interactions. We also continue to be rated as fast and efficient in terms of reimbursements, with very good value for money, particularly in terms of daily allowance benefits.

Would you say then that it's a question of developing an approach centred around the customer?

Exactly. And that's why our staff are so focused on customer experience, which is what we do best. Because the customer is our boss!



New phone accessibility

"In 2023, we implemented a new phone accessibility concept, a model called Waterfall, which is currently unique in Switzerland. This model provides our customers with a dedicated contact person. When a company contacts Groupe Mutuel, it is always the same employee who will deal with its requests. And if that employee is absent, for holiday or other reasons, a back-up will take over, who also knows the case, or even a third contact person if the second is not available, who also knows the case. **Ultimately, the aim is to ensure that the customer always finds someone to talk to who can answer questions and provide a comprehensive follow-up.** As a result, the loss of calls that disappear into the system has been drastically reduced by around 15%."

Michelle Bender, Head of Strategic Planning, Corporate Sector



Vincent Claivaz, Member of the Executive Board and Head of Health & Pension Provision for Corporate Customers

"The 2023 overall results for Groupe Mutuel's Corporate sector are positive, despite the global uncertainty that makes everything much more fragile".

"The LPP/BVG second pillar achieved positive growth in 2023, with more than CHF 200 million in premiums collected. Despite the uncertainties, we have achieved success, **because the solutions offered by GMP and Opsion meet customer expectations.** And we have begun the process of merging GMP and Opsion. The final phase will take place this year, with the birth of a new entity on 1 January 2024: Fondation Collective Groupe Mutuel, which now encompasses all our LPP/BVG business."

"Every day, we do everything we can to respond closely to our customers' needs. We have to offer the best service at the best price, all the time. That's why we have invested heavily in 2023 to serve our customers better and make their lives easier with, for example, a new software for our LPP/BVG customers and a new corporate customer area to make life easier for our insured companies. **This effort will be stepped up even further in 2024."**

A thick yellow line that starts from the left edge, curves upwards to a peak, and then curves downwards to the right.

Chapter 9

Governance

A thick yellow line that starts from the middle, curves downwards to a trough, and then curves upwards to the right edge.

Groupe Mutuel is organised in the form of a holding company. The companies that make up the holding company are active in various insurance fields, such as health and pensions, both for private individuals and companies.

Groupe Mutuel

Groupe Mutuel Holding SA is wholly owned by Fondation Groupe Mutuel, a non-profit foundation. The Foundation supports the well-being of people in Switzerland, as well as health promotion and prevention measures, through a number of activities.

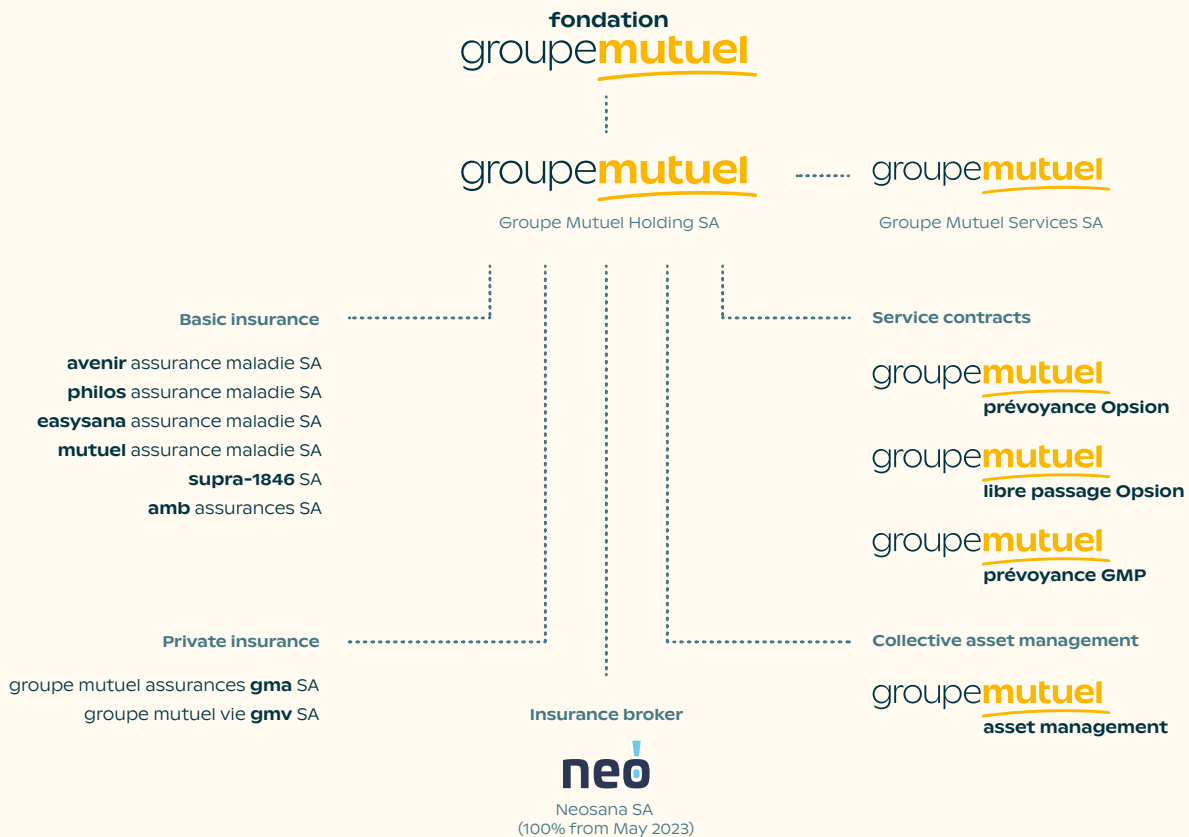
The subsidiary company Groupe Mutuel Services SA has made its administrative infrastructure and employees available to the other companies of the Group.

Similarly, Groupe Mutuel Asset Management GMAM SA manages collective assets for the companies in the holding company & partners. This pooling of resources makes it possible to develop synergies that benefit all companies and clients. Services are clearly differentiated

between the various insurance segments, in particular between compulsory health insurance (LAMal/KVG) and supplemental insurance (LCA/VVG), as well as between the different companies.

Services are invoiced to member companies according to allocation keys in line with the industry's good practices. The services allocated are audited by an independent third party so that each company's contribution is in line with the actual use of resources.

Groupe Mutuel Services SA and Groupe Mutuel Asset Management SA GMAM SA can also offer their services to third parties. This is the case for health insurance and occupational pension benefits.



Overview of the subsidiaries of **Groupe Mutuel Holding SA** and their activities

Groupe Mutuel Holding SA owns six health insurance companies, that offer compulsory health insurance:

- **Mutuel Assurance Maladie SA,**
- **Philos Assurance Maladie SA,**
- **Avenir Assurance Maladie SA,**
- **Easy Sana Assurance Maladie SA,**
- **SUPRA-1846 SA,**
- **AMB Assurances SA.**

The private insurance company that offers supplemental health insurance and patrimony insurance is **Groupe Mutuel Assurances GMA SA.**

For its part, **Groupe Mutuel Vie GMV SA** offers life insurance products.

Neosana SA, in which the holding company has a majority stake, offers brokerage services in the fields of health and life insurance and thus contributes to the distribution of Groupe Mutuel Holding SA insurers' products.

Groupe Mutuel Services SA makes its administrative infrastructure and employees available to the other companies of the Group.

Groupe Mutuel Asset Management GMAM SA manages the assets of Groupe Mutuel companies.

Specialised committees of **the Board**

The Audit and Risk Committee

The Audit and Risk Committee is chaired by **Jean-Blaise Conne** (left on the photo) and comprises two other members of the Board. Its main task is to verify the integrity of financial information, compliance with legislation, internal regulations and guidelines, supervision of the internal control system and audit processes. It organises and assesses the performance, certification and independence of internal and external auditors.

The Strategic Projects and Innovation Committee

The Strategic Projects and Innovation Committee is chaired by **Jürg E. Tschanz** (right on the photo). It also includes three other members of the Board. It defines and submits to the Board the strategy for transformation and innovation, and diversification and digital maturity, taking into account technology, political and market environment changes, as well as the medium and long-term development of Groupe Mutuel. In addition, it defines and proposes the strategy for using new information and communication technology for the benefit of the company. It also examines the partnership or acquisition strategy to be implemented in order to achieve the objectives set and makes recommendations to the Board. Finally, it monitors the progress of projects related to strategic initiatives.

The Remuneration and Appointments Committee

The Remuneration and Appointments Committee is chaired by **Marc-André Ballestraz** (in the middle, on the photo) and comprises three other members of the Board. It submits proposals to the Board regarding the remuneration of Board and Executive Board members. It is also responsible for the appointment and replacement of Board and Executive Board members. It sets the individual objectives of the Chief Executive Officer and assesses them. It reviews the remuneration system on a regular basis.





The Board of Groupe Mutuel Holding SA and its specialised committees

The Board is responsible for the strategic management of Groupe Mutuel Holding SA. It consists of a five to nine members elected for four years. It defines the company's position and strategy, exercises high-level management and supervision and sets the organisational structure and principles of the internal control system. Its work is supported by three specialised committees: **the Audit and Risk Committee, the Strategic Projects and Innovation Committee, and the Remuneration and Appointments Committee**. The committees inform the Board of their activities on a regular basis.



From left to right:

Jean-Blaïse **Conne**, Marc-André **Ballestraz**, Jürg E. **Tschanz**,
Karin **Perraudin**, Roland Marcel **Eberle**, Fabio **Naselli Feo**,
Petra **Feigl-Fässler**, Charles **Relecom**

The Board members of Groupe Mutuel Holding SA in 2023

Karin Perraudin, **President**²

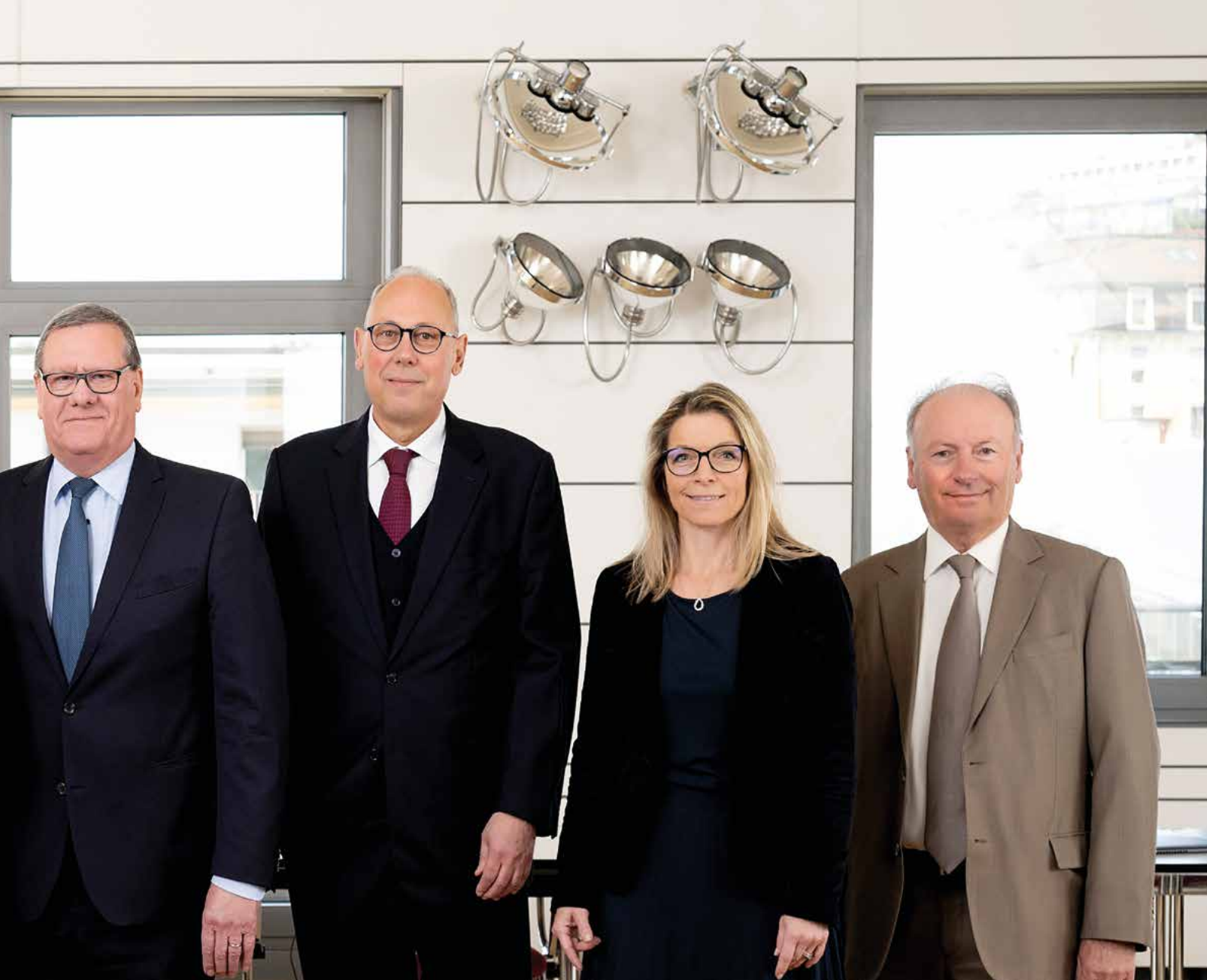
Master's degree in Business (HEC).
Certified chartered accountant.
Board Director for companies.

Roland Marcel Eberle, **Vice-President**³

Agricultural Engineer.
Former member of the Council of States
(2011-2019)
Board Director for companies.

Fabio Naselli Feo, **Secretary**^{1,2}

Entrepreneur. Board Director for companies.



Jürg E. Tschanz, member²

MBA in Finance and Strategic Management.
Entrepreneur.
Co-founder and President of planitswiss.

Charles Relecom, member^{2,3}

Master's degree in Actuarial Sciences
and Mathematics.
Board Director for companies.

Petra Feigl-Fässler, member³

Degree in Economics, HSG. Member of the
Executive Board and Head of Human Resources at
Migros Industrie.

Marc-André Ballestraz, member^{1,3}

Master's degree in commercial and industrial
sciences.
Certified chartered accountant.

Jean-Blaise Conne, member¹

Certified chartered accountant.
Board Director for companies.

-
- ¹ Member of the Audit and Risk Committee
 - ² Member of the Strategic Projects and Innovation Committee
 - ³ Member of the Remuneration and Appointments Committee



The **Executive Board**

The Executive Board, which comprised nine members in 2023, is responsible for the operational management of Groupe Mutuel and its companies. It implements the **strategies** approved by the Board and applies the principles of **risk management**. It also **monitors legal and regulatory developments** and ensures that they are complied with.

Members of the **Executive Board** in 2023

Thomas Boyer

Chief Executive Officer

Master's degree in Business (HEC).

Thomas J. Grichting

Services

Doctor of Law / Lawyer

Vincent Claivaz

Health & Pension Provision – Corporate Customers

Diploma of Senior Technician in Catering and Tourism. Master's degree in Hospital Management

Paul Rabaglia

Finances

Master's degree in Business (HEC).

Cédric Scheiben

Sales

Executive MBA in financial services and insurance.

Pierre-Luc Marilley

Customer Relations

Master's degree in Business.

Philippe Buthey

Technology

Computer Scientist Diploma ES.

Sophie Revaz

Individual Benefits

Master's degree / Lawyer. Executive MBA.

Jérôme Mariéthoz

Health & Pension Provision – Private Customers

Master's degree in Business (HEC).

Code of conduct

Groupe Mutuel Holding has a Code of Conduct, adopted by its governing bodies, to provide a framework for all its activities. The Code of Conduct clearly sets out the ethical and professional values as well as guidelines for behaviour.

The executive bodies and employees of Groupe Mutuel Holding SA or its member companies must all comply with the Code of Conduct. It is supported by a specialised and independent external whistleblowing platform that allows employees to report any actions that do not comply with the Code of Conduct or the laws in force. The aim is to protect both the employees themselves and the company by maintaining sound governance within Groupe Mutuel.

Internal control system

The Board adopted guidelines and principles for risk management and controls. It instructed the Executive Board to implement them.

The risk management process and the internal control system make it possible to identify potential risks, assess them and develop appropriate measures.

The implementation of risk management and the internal control system follows the principle of three lines of defence.

The first line of defence is provided by management and the business units.

The second line of defence comprises the control functions, in particular Compliance, Risk Management and the appointed Actuary.

Internal Audit forms the third line of defence.

The control functions and Internal Audit have an unrestricted right to information and enjoy the independence necessary to carry out their activities.



Compliance function

The Compliance function is responsible for compliance with Groupe Mutuel's internal and external legislation and regulations, as well as those of all the companies that have delegated the Compliance function to it.

Risk management function

The Risk Management function is responsible for the monitoring and appropriate management of risks, including the independent assessment of risks and controls and the management of the internal control system.

Internal Audit

The Internal Audit supports the Board in its supervisory role. It regularly informs the Board of its results and proposes measures for improvement.

Remuneration of the members of the Board and the Executive Board

The remuneration of the Board of Groupe Mutuel is governed by regulations adopted by the bodies of the Holding companies.

It consists of a set amount and the reimbursement of representation and travel expenses. No variable portion is allocated. These regulations, which apply to all companies of the Holding, limit the annual remuneration per entity to CHF 25,000 for the President and CHF 24,000 for other Board members. Furthermore, there is a ceiling on the total annual remuneration of the members of the Board, regardless of the number of board positions they hold in Groupe Mutuel Holding SA companies. The upper limit is CHF 250,000 for the President, CHF 120,000 for the Vice-President and the Chair of the Audit and Risk Committee, CHF 110,000 for the Chairmen of the other specialist committees and CHF 100,000 for the other directors.

Upon proposal of the Remuneration and Appointments Committee, the Board of Groupe Mutuel Holding SA sets the remuneration of the members of the Executive Board. The guidelines for the remuneration of the of the Executive Board members are specified in a set of regulations

issued by the Board. This remuneration consists of a set amount and a variable allowance based on the previous year's results.

The variable portion paid depends on the extent to which objectives are achieved in the following categories:

- Financial and operating results of the various Group entities and objectives linked to strategic projects.
- Individual quantitative and qualitative objectives.

Objectives are set for one year and no deferred remuneration is paid. Any fees relating to professional mandates on behalf of Groupe Mutuel within other companies are repaid in full to the company.

Total cash payments (set and variable) to members of the Executive Board in 2023 amounted to CHF 3,257,307. Employer pension contributions amounted to a total of CHF 518,935. The highest remuneration was that of the CEO, with cash payments of CHF 669,802 and employer pension contributions of CHF 114,900.

Organisational chart of Groupe Mutuel as of 31.12.2023

Board of Groupe Mutuel Holding SA

President

**Karin
Perraudin**

Vice-President

**Roland Marcel
Eberle**

Secretary

**Fabio
Naselli Feo**

Member

**Marc-André
Ballestraz**

Member

**Jean-Blaise
Conne**

Member

**Charles
Relecom**

Member

**Petra
Feigl-Fässler**

Member

**Jürg E.
Tschanz**

Executive Board



Thomas Boyer
Chief Executive Officer



Sophie Revaz
Director of
Individual Benefits



Paul Rabaglia
Director of
Finances



Thomas J. Grichting
Director of
Services



Pierre-Luc Marilley
Director of
Customer Relations



Jérôme Mariéthoz
Director of
Health & Pension
Provision - Private
Customers



Philippe Buthey
Director of
Technology



Vincent Claivaz
Director of
Health & Pension Provision
- Corporate Customers



Cédric Scheiben
Director of
Sales





Impressum

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Insurance companies under Groupe Mutuel Holding SA : Avenir Assurance Maladie SA / Easy Sana Assurance Maladie SA / Mutuel Assurance Maladie SA
Philos Assurance Maladie SA / SUPRA-1846 SA / AMB Assurances SA / Groupe Mutuel Assurances GMA SA / Groupe Mutuel Vie GMV SA
Fondations administrées par Groupe Mutuel Services SA : Mutuelle Neuchâteloise Assurance Maladie / Groupe Mutuel Prévoyance-GMP
Fondation Collective Opsion / Fondation Opsion Libre Passage