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Humana Continues to Deliver Exceptional Star Ratings for its Medicare Advantage Members in 2024

- *94% of Humana Medicare Advantage members are enrolled in plans rated 4 stars and above*
- *61% of members are in plans rated 4.5 stars and above for 2024*
- *Humana received a 5 out of 5-star rating for four contracts, covering approximately 790,000 members*
- *Humana has Medicare Advantage plans rated 4 stars and above in all 50 states and Puerto Rico*

LOUISVILLE, Ky. – Oct. 13, 2023 – Humana Inc. (NYSE: HUM), one of the nation’s leading health and well-being companies, announced today that nearly 5.5 million, or 94%, of its Medicare Advantage members currently are enrolled in plans rated 4 stars and above for 2024 by the Centers for Medicare and Medicaid Services (CMS).

Four of Humana’s contracts received a 5-star rating on CMS’s 5-star rating system, covering approximately 790,000 members nationwide and more than doubling the number of members in 5-star plans in 2023. This contributes to the nearly 3.6 million, or 61%, of Humana Medicare Advantage members in plans rated 4.5 stars and above.

“Our excellent CMS Star Ratings reflect our continued focus on the quality of care, clinical outcomes and industry leading customer service for our members,” said **George Renaudin**, Humana’s President of Medicare and Medicaid. “Our continued delivery of quality care for our members has enabled our consistent high performance in Stars, even as changes to the rating methodology were introduced this year. This is a testament to the dedication of the Humana team to putting our members at the center of everything we do.”

For the first time, Humana Medical Plan, Inc. in Florida, North Carolina, Oregon, Mississippi and Kentucky achieved a 5-star rating. Cariten Health Plan Inc. in Tennessee has achieved a 5-star rating for the fourth time, and Humana Health Plan of Ohio, Inc. in Kentucky is receiving the 5-star rating for the third year in a row. In its first year being rated, Humana’s Group PPO, Emphesys Insurance Company, also received 5 stars.

Humana has Medicare Advantage plans rated 4 stars or higher available in all 50 states and Puerto Rico. About 97.5% of retirees in Humana’s Group Medicare Advantage plans remain in 4-star or above contracts.

Humana Medicare Advantage member Nancy Fish says she stays with Humana because she is confident she will get the care she needs.

“With Humana, I feel like I’m very well taken care of and that I’m covered,” said Fish, a National Senior Games athlete from North Carolina. “I feel I don’t have to worry about my health care – it’s all taken care of.”

Humana has served Medicare beneficiaries for decades, with nearly 8.7 million Medicare members in all 50 states, Washington, D.C., and Puerto Rico, as of Sept. 30, 2023. More than 5.8 million of those members are enrolled in a Medicare Advantage plan.

About Medicare Advantage Enrollment

The Medicare Advantage and Prescription Drug Plan Annual Election Period (AEP) begins Oct. 15 and continues through Dec. 7. During this enrollment period, people eligible for Medicare can choose Medicare Advantage and Prescription Drug Plans for the upcoming year – with coverage that takes effect Jan. 1.

People eligible for Medicare may make a one-time election to enroll in a plan offered by an MA organization with a Star Rating of 5 stars during the year in which that plan has the 5-star overall performance rating, provided the enrollee meets the other requirements to enroll in that plan. This 5-star special election is available Dec. 8 through Nov. 30 of the following year.

For more information about Humana’s 2024 Medicare offerings, visit [Humana.com/Medicare](https://www.humana.com/Medicare) or call toll-free 1-800-706-1368 (TTY: 711). Licensed sales agents are available 8 a.m. to 8 p.m. local time, seven days a week.

About CMS Star Ratings

The CMS rating system measures the excellence of Medicare plans nationally each year. A plan may receive a rating between one and five stars, with five stars representing the highest rating. CMS uses information from member-satisfaction surveys, health plans, and health care providers to assign overall Star Ratings to plans. The rating system uses more than 40 different quality measures across nine categories, including:

- Staying Healthy: Screenings, Tests and Vaccines
- Managing Chronic (Long Term) Conditions
- Member Experience with Health Plan
- Member Complaints and Changes in the Health Plan’s Performance
- Health Plan Customer Service
- Drug Plan Customer Service
- Member Complaints and Changes in the Drug Plan’s Performance
- Member Experience with Drug Plan
- Drug Safety and Accuracy of Drug Pricing

Additional information about the CMS Star Ratings can be found at: www.medicare.gov.

Listed below is a breakdown of Humana’s contracts that achieved a rating of 5, 4.5 and 4 stars:

Humana 5-Star Rated Contracts

- H1036 HUMANA MEDICAL PLAN, INC. (FL, KY, MS, NC, OR HMO)
- H0292 HUMANA HEALTH PLAN OF OHIO, INC. (KY HMO)
- H4461 CARITEN HEALTH PLAN INC. (TN HMO)
- H7617 EMPHESYS INSURANCE COMPANY (GROUP CONTRACT LPPO)

Humana 4.5-Star Rated Contracts

- H1468 HUMANA BENEFIT PLAN OF ILLINOIS, INC. (IL HMO)
- H1951 HUMANA HEALTH BENEFIT PLAN OF LOUISIANA, INC. (LA HMO)
- H4007 HUMANA HEALTH PLANS OF PUERTO RICO, INC. (PR HMO)
- H5216 HUMANA INSURANCE COMPANY (AL, AZ, AR, CO, CT, DC, DE, FL, GA, HI, ID, IL, IN, IA, KY, KS, LA, MA, MD, ME, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NC, ND, OH, OK, OR, PA, SC, SD, TN, TX, UT, VA, VT, WA, WV, WI, WY LPPOs)
- R0110 HUMANA INSURANCE COMPANY (LA, MS RPPOs)

Humana 4-Star Rated Contracts

- H0028 CHA HMO, INC. (AZ, CO, HI, IA, IL, KS, MO, NE, NM, SD, TX HMOs)
- H1019 CAREPLUS HEALTH PLANS, INC. (FL HMO)
- H2463 HUMANA HEALTH PLANS OF TEXAS, INC. (AZ HMO)
- H4141 HUMANA EMPLOYERS HEALTH PLAN OF GEORGIA, INC. (GA HMO)
- H4623 HUMANA REGIONAL HEALTH PLAN, INC. (MO HMO)
- H5525 HUMANA BENEFIT PLAN OF ILLINOIS, INC. (CA, GA, ID, IL, IN, KY, MT, NC, ND, OH, OR, PA, RI, SC, SD, WV, WY LPPOs)
- H5619 ARCADIAN HEALTH PLAN, INC. (AL, AR, CA, ID, IN, KY, ME, NH, OK, SC, VA, WA, WV HMOs)
- H6622 HUMANA WI HEALTH ORGANIZATION INSURANCE CORP. (DE, KY, MD, MN, MS, MT, NC, NJ, NV, OH, OK, PA, VA, WI HMOs)
- H7284 HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC. (FL LPPO)
- H8145 HUMANA INSURANCE COMPANY (AR, CO, GA, IL, IN, IA, KS, KY, MI, MN, MO, MT, NM, NC, ND, OH, OK, PA, SC, SD, TX, VA, WV, WI PFFS – Full Networks)
- R0865 HUMANA INSURANCE COMPANY (IN, KY RPPOs)
- R0923 HUMANA INSURANCE COMPANY (PA, WV RPPOs)
- R3392 HUMANA INSURANCE COMPANY (GA, SC RPPOs)
- R3887 HUMANA INSURANCE COMPANY (MI RPPO)
- R5361 HUMANA INSURANCE COMPANY (IL, WI RPPOs)
- R5495 HUMANA INSURANCE COMPANY (OH RPPO)

About Humana

*Humana Inc. is committed to putting health first – for our teammates, our customers, and our company. Through our **Humana** insurance services, and our **CenterWell** health care services, we make it easier for the millions of people we serve to achieve their best health – delivering the care and service they need, when they need it. These efforts are leading to a better quality of life for people with Medicare, Medicaid, families, individuals, military service personnel, and communities at large. Learn more about what we offer at [Humana.com](https://www.humana.com) and at [CenterWell.com](https://www.CenterWell.com).*

Additional Information

Humana is a Medicare Advantage HMO, PPO and PFFS organization and a stand-alone prescription drug plan with a Medicare contract. Enrollment in any Humana plan depends on contract renewal. Every year, Medicare evaluates plans based on a 5-star rating system. Other providers are available in the Humana network. Other providers are available in the Humana network.

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