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Humana

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Humana Louisiana Medicare Advantage Plan Receives Highest Possible Rating for Two Years in a Row

NEW ORLEANS, La. – Oct. 7, 2022 – <u>Humana Inc.</u> (NYSE: HUM), one of the nation's leading health and well-being companies, has announced that its statewide Louisiana Medicare Advantage HMO plan has received a top 5-star rating from the Centers for Medicare and Medicaid Services (CMS) for a second consecutive year.

The Humana Health Benefit Plan of Louisiana, Inc. HMO plan, which has nearly 196,000 members as of September, is one of three Humana plans in the nation that received a 5-star rating, reflecting Humana's commitment to high quality care, patient-centered clinical outcomes and reliable customer service for members.

"We are grateful to receive a 5-star rating for our Humana Health Benefit Plan of Louisiana HMO plan for the 2023 plan year. Receiving this recognition for a second year reflects Humana's strong and longtime commitment to our great state of Louisiana and to the health of our members and the many communities we serve," said Matt Berger, Region President - Gulf States Medicare for Humana.

"Our health plans, tailored to the specific needs of Louisianans, provide access to quality care, and as a result, our members are scheduling regular visits to their primary care physicians, as well as completing preventative testing and screenings, which is a proven and vital way to stay healthy," he said. "We've also increased the number of rural communities we serve, and we take steps to ensure our members have everything they need to stay consistent with their medication regimens. Humana's CenterWell Pharmacy, which mails prescription medications right to our members' doorsteps, is just one way to do this."

Dan Bruce, Humana Health Benefit Plan of Louisiana member, chose "fabulous" when describing CenterWell Pharmacy. "When I retired, I received a plethora of mail from so many plans, asking me to join. After talking to my primary care physician, I got on with Humana Medicare Advantage and started learning all about the different aspects of my plan and the many things that Humana can do for its members like offering a pharmacy that delivers my medications straight to my home."

About Medicare Advantage

Medicare Advantage delivers financial savings to members in the form of lower out-of-pocket costs and reduced premiums. Medicare Advantage members reported spending <u>nearly \$2,000 less on out-of-pocket costs</u>, compared to fee-for-service Medicare. Medicare Advantage plans also have limits on out-of-pocket costs. These financial protections may be critical for older Americans on fixed incomes.

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Unlike fee-for-service Medicare, Medicare Advantage plans often include affordable prescription drug coverage. For Humana members, 100 percent of the savings achieved through manufacturer rebates and discounts in pharmacy programs are returned to members through lower premiums and improved benefits.

Medicare Advantage plan members had more than a <u>30 percent lower level of emergency room visits</u>, and <u>40 percent lower level of inpatient hospital care</u>, compared to beneficiaries with fee-for-service Medicare. In addition to improving health, these outcomes demonstrate real savings for people with Medicare and the health system. Medicare Advantage plans reinvest these savings by expanding supplemental benefits, supporting providers and coordinating care.

About Medicare Advantage Enrollment

The Medicare Advantage and Prescription Drug Plan Annual Election Period (AEP) begins Oct. 15 and continues through Dec. 7, 2022. 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, 2023.

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 2022 Medicare offerings, visit <u>www.Humana.com/Medicare</u> or call toll-free 1-888-372-2614 (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: <u>www.medicare.gov</u>.

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About Humana

Humana Inc. is committed to helping our millions of medical and specialty members achieve their best health. Our successful history in care delivery and health plan administration is helping us create a new kind of integrated care with the power to improve health and well-being and lower costs. Our efforts are leading to a better quality of life for people with Medicare, families, individuals, military service personnel, and communities at large.

To accomplish that, we support physicians and other health care professionals as they work to deliver the right care in the right place for their patients, our members. Our range of clinical capabilities, resources and tools – such as in-home care, behavioral health, pharmacy services, data analytics and wellness solutions – combine to produce a simplified experience that makes health care easier to navigate and more effective.

More information regarding Humana is available to investors via the Investor Relations page of the company's website at <u>humana.com</u>, including copies of:

- Annual reports to stockholders;
- Securities and Exchange Commission filings;
- Most recent investor conference presentations;
- Quarterly earnings news releases and conference calls;
- Calendar of events; and
- Corporate Governance 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.

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