

B. Company Background

2. Corporate Information

a. Provide required 42 CFR 455.100-107 disclosures::

a.i.1.

The name and address of any person (individual or corporation) with an ownership or control interest in the disclosing entity, fiscal agent, or managed care entity. The address for corporate entities must include as applicable primary business address, every business location, and P.O. Box address.

Humana Inc. has a 100% controlling interest in Humana Health Plan, Inc. Please see below for Humana Inc.'s corporate address.

Humana Inc.
500 West Main Street
Louisville, Kentucky 40202

a.i.2.

Date of birth and Social Security Number (in the case of an individual).

This question is not applicable. Humana Inc., which has a 100% controlling interest in Humana Health Plan, Inc., is a corporation.

a.i.3.

Other tax identification number (in the case of a corporation) with an ownership or control interest in the disclosing entity (or fiscal agent or managed care entity) or in any subcontractor in which the disclosing entity (or fiscal agent or managed care entity) has a 5 percent or more interest.

The tax identification number for Humana Inc., which has a 100% controlling interest in Humana Health Plan, Inc., is 61-0647538.

a.ii.

Whether the person (individual or corporation) with an ownership or control interest in the disclosing entity (or fiscal agent or managed care entity) is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling; or whether the person (individual or corporation) with an ownership or control interest in any subcontractor in which the disclosing entity (or fiscal agent or managed care entity) has a 5 percent or more interest is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling.

None.

a.iii.3.

The name of any other disclosing entity (or fiscal agent or managed care entity) in which an owner of the disclosing entity (or fiscal agent or managed care entity) has an ownership or control interest.

None.

a.iv.4.

The name, address, date of birth, and Social Security Number of any managing employee of the disclosing entity (or fiscal agent or managed care entity).

Please refer to **Table I.B.2-1** for a list of all managing employees of Humana Health Plan, Inc.

Table I.B.2-1: Humana Health Plan, Inc.'s Managing Employees

Name	Date of Birth	Social Security #	Address
Bruce Dale Broussard	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Timothy Alan Wheatley	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Brian Andrew Kane	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Christopher Howal Hunter	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Charles Wilbur Dow, Jr.	████████	████████	550 West Adams Street, Chicago, Illinois 60661
Bruno Roger Piquin	████████	████████	11430 NW 20th Street, Suite 300, Miami, Florida 33172
John Edward Barger, III	████████	████████	4030 Boy Scout Blvd, Suite 1000, MetWest One, Tampa, Florida 33607
Jeffrey Carl Fernandez	████████	████████	One Galleria Blvd., Suite 1200, Metarie, Louisiana 70001
Steven Edward McCulley	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Vanessa Marie Olson	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Richard Donald Remmers	████████	████████	500 West Main Street, Louisville, Kentucky 40202
George Renaudin, II	████████	████████	302 Seven Springs Way, Suite 200, Brentwood, Tennessee 37037
Donald Hank Robinson	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Gilbert Alan Stewart	████████	████████	100 Mansell Court E, Suite 400, Roswell, Georgia 30076
Daniel Andrew Tufto	████████	████████	1221 S. Mo Pac Expy, Suite 300, Austin, Texas 78746-7625
Richard Andrew Vollmer, Jr.	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Cynthia Hillebrand Zipperle	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Alan James Bailey	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Douglas Allen Edwards	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Sean Joseph O'Reilly	████████	████████	500 West Main Street, Louisville, Kentucky 40202

Table I.B.2-1: Humana Health Plan, Inc.’s Managing Employees

Name	Date of Birth	Social Security #	Address
William Mark Preston	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Ralph Martin Wilson	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Andrew J. Besendorf III	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Courtney Danielle Durall	████████	████████	500 West Main Street, Louisville, Kentucky 40202
Joseph Matthew Ruschell	████████	████████	500 West Main Street, Louisville, Kentucky 40202

b.

Indicate the Vendor’s form of business (e.g., corporation, non- profit corporation, partnership, etc.) and provide the following information:

Humana Health Plan, Inc. is a for-profit corporation incorporated in the Commonwealth of Kentucky.

b.i.

Names and contact information for all officers, directors, and partners.

Please refer to **Table I.B.2-2** for a list of Humana Health Plan, Inc.’s officers and directors.

Table I.B.2-2: Humana Health Plan, Inc.’s Officers and Directors

Name	Title	Phone	Address
Bruce Dale Broussard	Director, President, and Chief Executive Officer	502-580-1000	500 West Main Street, Louisville, Kentucky 40202
Timothy Alan Wheatley	Director, Segment President, Retail	502-580-2003	500 West Main Street, Louisville, Kentucky 40202
Brian Andrew Kane	Director, Chief Financial Officer	502-580-1599	500 West Main Street, Louisville, Kentucky 40202
Christopher Howal Hunter	Segment President, Group Business	502-580-1000	500 West Main Street, Louisville, Kentucky 40202
Charles Wilbur Dow, Jr.	Regional President	312-441-5082	550 West Adams Street, Chicago, Illinois 60661
Bruno Roger Piquin	Regional President	305-441-9400	11430 NW 20th Street, Suite 300, Miami, Florida 33172
John Edward Barger, III	Senior Vice President, Medicaid President	813-287-6130	4030 Boy Scout Blvd, Suite 1000, MetWest One, Tampa, Florida 33607
Jeffrey Carl Fernandez	Senior Vice President, Medicare West and MarketPOINT	504-219-6635	One Galleria Blvd., Suite 1200, Metarie, Louisiana 70001
Steven Edward McCulley	Senior Vice President, Medicare	502-580-3921	500 West Main Street, Louisville, Kentucky 40202
Vanessa Marie Olson	Senior Vice President, Chief Actuary	502-580-8973	500 West Main Street, Louisville, Kentucky 40202
Richard Donald Remmers	Senior Vice President, Employer Group Sales	502-580-3590	500 West Main Street, Louisville, Kentucky 40202

Table I.B.2-2: Humana Health Plan, Inc.’s Officers and Directors

Name	Title	Phone	Address
George Renaudin, II	Senior Vice President, Medicare East & Provider	615-370-1801	302 Seven Springs Way, Suite 200, Brentwood, Tennessee 37037
Donald Hank Robinson	Senior Vice President, Tax	502-580-3727	500 West Main Street, Louisville, Kentucky 40202
Gilbert Alan Stewart	Senior Vice President, Medicare Divisional Leader	770-998-8936	100 Mansell Court E, Suite 400, Roswell, Georgia 30076
Daniel Andrew Tufto	Senior Vice President, Medicare Divisional Leader	512-338-6168	1221 S. Mo Pac Expy, Suite 300, Austin, Texas 78746-7625
Richard Andrew Vollmer, Jr.	Senior Vice President, Medicare Divisional Leader	502-580-2295	500 West Main Street, Louisville, Kentucky 40202
Cynthia Hillebrand Zipperle	Senior Vice President, Chief Accounting Officer & Controller	502-580-3938	500 West Main Street, Louisville, Kentucky 40202
Alan James Bailey	Vice President and Treasurer	502-580-1112	500 West Main Street, Louisville, Kentucky 40202
Douglas Allen Edwards	Vice President	502-476-4713	500 West Main Street, Louisville, Kentucky 40202
Sean Joseph O'Reilly	Senior Vice President, Enterprise Compliance & Chief Compliance Officer	502-580-8791	500 West Main Street, Louisville, Kentucky 40202
William Mark Preston	Vice President, Investments	502-580-1616	500 West Main Street, Louisville, Kentucky 40202
Ralph Martin Wilson	Vice President	502-580-3715	500 West Main Street, Louisville, Kentucky 40202
Andrew J. Besendorf III	Appointed Actuary	502-580-4012	500 West Main Street, Louisville, Kentucky 40202
Courtney Danielle Durall	Senior Legal Professional & Assistant Corporate Secretary	502-476-9728	500 West Main Street, Louisville, Kentucky 40202
Joseph Matthew Ruschell	Associate Vice President, Assistant General Counsel, & Assistant Corporate Secretary	502-580-1769	500 West Main Street, Louisville, Kentucky 40202

b.ii.

Relationship to parent, affiliated and/or related business entities and copies of management agreements with parent organizations.

Humana Health Plan, Inc. is a wholly owned subsidiary of Humana Inc. (direct and ultimate parent company), a for-profit company incorporated in the state of Delaware. Please refer to the following attachments for copies of service agreements with the parent company and affiliates:

- **Attachment I.B.2-1** Corporate Services Agreement with Humana Inc.
- **Attachment I.B.2-2** Services Agreement between Humana Health Plan, Inc., Humana Insurance Company, and Humana Inc. (#284)

- **Attachment I.B.2-3** Services Agreement between Humana Health Plan, Inc., Humana Insurance Company, and Humana Inc. (#194R)
- **Attachment I.B.2-4** PBM Services Agreement

b.iii.

Provide copies of the Vendor's articles of incorporation, bylaws, partnership agreements, or similar business entity documents, including any legal entity having an ownership interest of five percent (5%) or more.

Please refer to **Attachment I.B.2-5** and **Attachment I.B.2-6** for Humana Health Plan, Inc.'s and Humana Inc.'s (100% controlling interest in Humana Health Plan, Inc.) articles of incorporation and bylaws, respectively.

b.iv.

Provide the Vendor's Uniform Certificate of Authority or application for the Uniform Certificate of Authority, as well as copies of reports filed with the Kentucky Department of Insurance during the prior twelve (12) months, if applicable.

Please refer to:

- **Attachment I.B.2-7** for a copy of Humana Health Plan, Inc.'s Certificate of Authority
- **Attachment I.B.2-8** for copies of prompt pay reports (last four quarters) and Dental prompt pay reports filed with the Kentucky Department of Insurance (DOI) during the prior 12 months
- **Attachment I.B.2-9** for the data reporting manual report and Health Effectiveness Data Information Set (HEDIS) reports filed with the Kentucky DOI during the prior 12 months

Note: Pursuant to Addendum 1 regarding attachments over 10 pages, we provided **Attachment I.B.2-9** electronically only on flash drive due to the size of the documents.

c.

Demonstrate financial viability for the Vendor and each Subcontractor, as evidenced by sustained bottom line profitability and no current areas of significant financial risk for the past three (3) calendar years or the Vendor or Subcontractor's fiscal years. For the Vendor and each Subcontractor, provide copies of financial statements from the most recently completed and audited year.

Humana Inc. is a financially viable entity, as demonstrated by its positive net income and operating cash flows for fiscal years ended December 31, 2016, 2017, and 2018. Further, on December 31, 2018, Humana Health Plan, Inc. reported \$757.9 million in total adjusted capital with an RBC ratio of 661.6%, or over three times the amount required per NAIC and Kentucky regulations. Humana Health Plan, Inc. historically has, currently has, and in the future will maintain strong capitalization ratios.

Please refer to Humana's flash drive¹ for the following financial statements (in their entirety) for Humana Health Plan, Inc.² and its affiliated Subcontractors². Humana has printed select pages of its financials for the hard copy, including the applicable audit opinion, balance sheet, income statement, statement of equity, and statement of cash flows.

- **Attachment I.B.2-10** Humana Health Plan, Inc.'s 2016-2018 audited financial statements

¹ Pursuant to Addendum 1 regarding attachments over 10 pages, we provided all listed financial statements, in their entirety, on the flash drive due to the size of the documents. Please refer to the folder on the flash drive titled "Financial Statements" for all financial statements referenced in this section.

² The financial statements included for Humana Health Plan, Inc. and its affiliated and non-affiliated Subcontractors represent the most current financial statements available for release.

- **Attachment I.B.2-11** Humana Health Plan, Inc.'s 2016-2018 Health Annual Statements
- **Attachment I.B.2-12** Humana Inc.'s 2016-2018 10-K reports⁵
- **Attachment I.B.2-13** Humana Insurance Company's 2016-2018 audited financial statements⁵
- **Attachment I.B.2-14** Humana Pharmacy Solutions, Inc.'s 2016-2018 audited financial statements

Note: Humana Pharmacy, Inc., an affiliated Subcontractor, is not a regulated legal entity. Therefore, audited financial statements are not available. Please refer to **Attachment I.B.2-12** for the 2016-2018 10-K annual reports for Humana Inc., the direct and ultimate parent company of Humana Pharmacy, Inc.

Please refer to Humana's flash drive¹ for the following financial statements (in their entirety) for Humana's non-affiliated Subcontractors²:

- **Attachment I.B.2-15** Arcadian Telepsychiatry, LLC's 2016 and 2017 unaudited profit and loss statements³
- **Attachment I.B.2-16** MYnd Analytics, Inc.'s (Arcadian's parent company) 2018 Fiscal Year 10-K report (Year ended September 30, 2018), and 2019 10-Q report (Quarter ended December 31, 2018)⁴
- **Attachment I.B.2-17** The Guardian Life Insurance Company of America's (Avēsis's parent company) 2015-2018 audited financial statements
- **Attachment I.B.2-18** Braillet, Inc.'s 2018 and 1st quarter 2019 profit and loss statements and balance sheets⁵
- **Attachment I.B.2-19** Centauri Holdings, LLC's 2016-2018 audited financials
- **Attachment I.B.2-20** DST Systems, Inc.'s 2016 and 2017 10-K reports and SS&C's 2018 10-K report⁶
- **Attachment I.B.2-21** DSS Research's 2016-2018 unaudited statements of revenues and expenses and balance sheets⁷
- **Attachment I.B.2-22** Equian Buyer Corp. and Subsidiaries' 2016-2018 audited financial statements
- **Attachment I.B.2-23** FOCUS Health, Inc.'s 2016–2018 unaudited balance sheets
- **Attachment I.B.2-24** Citra Health Solutions' 2015-2018 audited financial statements⁸
- **Attachment I.B.2-25** LanguageSpeak's 2016-2018 unaudited profit and loss statements⁹
- **Attachment I.B.2-26** MDLIVE, Inc.'s 2016-2018 audited financial statements
- **Attachment I.B.2-27** NCH's 2016-2017 audited financials and Evolent Health's 2018 10-K report¹⁰
- **Attachment I.B.2-28** Bertelsmann's 2016 and 2017 audited financial statements and 2018 annual report¹¹
- **Attachment I.B.2-29** Cardinal Health Inc.'s 2017-2019 (fiscal year ending June 30th) 10-K reports¹²
- **Attachment I.B.2-30** Revel Health's 2016 unaudited balance sheet and 2017-2018 audited balance sheet

³ Arcadian Telepsychiatry Services, LLC did not have its financials audited in 2016 and 2017. Attached are Arcadian's unaudited Profit and Loss Statements for FY 2016 and for January 1, 2017–November 13, 2017.

⁴ On November 13, 2017, MYnd Analytics, Inc. (MYnd) acquired Arcadian Telepsychiatry Services LLC. Arcadian Telepsychiatry Services LLC is a 100 percent wholly owned subsidiary of MYnd Analytics, Inc. and does not produce financials separately. Please note, MYnd's fiscal calendar runs October 1 to September 30 each year. On July 17, 2019, MYnd Analytics merged with Emmaus Life Sciences, which has a December 31 fiscal year end.

⁵ Braillet does not have audited financials prior to 2018. Please see their attached YTD 2018 and first quarter 2019 profit & loss statements and balance sheets.

⁶ DST Pharmacy Solutions, Inc. (d/b/a SS&C Health) is a wholly owned subsidiary of DST Systems Inc., which was acquired by SS&C Technologies Holdings, Inc. on April 16, 2018.

⁷ DSS Research was acquired by SPH Analytics (SPH) on June 28, 2019. SPH's 2019 financials are not yet available.

⁸ Citra Health Solutions was acquired by Carenet Health on July 1, 2019. Carenet's 2019 financials are not yet available.

⁹ LanguageSpeak, Inc. does not have audited financials. Please see their attached profit and loss statements.

¹⁰ In 2018, Evolent Health acquired New Century Health (NCH). NCH is a wholly owned subsidiary of Evolent Health, Inc.

¹¹ The Bertelsmann Group is the parent company for Offset Paperback Manufacturer (OPM) and Relias, LLC.

¹² Outcomes, Inc. dba OutcomesMTM, is a subsidiary of Cardinal Health, Inc.

- **Attachment I.B.2-31** United Language Group Holdings, LLC’s 2016-2018 audited financial statements
- **Attachment I.B.2-32** VIA LINK, Inc.’s 2017-2019 (fiscal year ending June 30th) audited financial statements
- **Attachment I.B.2-33** Condensed Cryacom International, Inc.’s (Voiance Language Services, LLC’s parent company) 2016-2018 audited financial statements
- **Attachment I.B.2-34** Tivity Health, Inc.’s 2016-2018 10-K reports¹³

d.

Provide a statement of whether there is any past (within the last ten (10) years or pending litigation against the Vendor or sanctions, including but not limited to the following:

Yes, there is pending or recent litigation against Humana Health Plan, Inc., and there are sanctions to report within the past ten (10) years. Please see below for further details.

d.i.

Litigation involving the Vendor’s failure to provide timely, adequate, or quality Covered Services. If any litigation listed, include damages sought or awarded or the extent to which adverse judgment is/would be covered by insurance or reserves set aside for this purpose. Include an opinion of counsel as to the degree of risk presented by any pending litigation and whether the pending or recent litigation will impair your organization’s performance in a Kentucky Medicaid Managed Care Contract.

Attachment I.B.2-35 includes litigation for the medical lines of business involving Humana Inc. (parent company) and all of its affiliates and subsidiaries in all 50 states and Puerto Rico for the last 10 years. The litigation listing includes, but is not limited to, litigation involving Humana’s failure to provide timely, adequate, or quality Covered Services.

Please refer to **Attachment I.B.2-36** for a signed opinion of counsel on the risk presented by any pending litigation and whether it will affect Humana’s performance in the Kentucky Medicaid Managed Care Contract.

d.ii.

Sanctions for deficiencies in performance of contractual requirements related to an agreement with any federal or state regulatory entity. Include monetary sanctions the Vendor has incurred pursuant to contract enforcement from any state, federal, or private entity, including the date, amount of sanction, and a brief description of such enforcement, corrective action, and resolution.

Please refer to **Attachment I.B.2-37** for the listing of all sanctions involving Humana Inc. (parent company) and all of its affiliates and subsidiaries for the last 10 years. The list of sanctions includes, but is not limited to, sanctions for deficiencies in the performance of contractual requirements related to an agreement with a federal or state regulatory entity.

d.iii.

Any Securities Exchange Commission (SEC) filings discussing any pending or recent litigation. Include information for Parent Company, affiliates, and subsidiaries. The Vendor may exclude workers’ compensation cases.

Please refer to **Attachment I.B.2-38** for all material litigation within the last 10 years.

We have disclosed all material past, pending, threatened litigation, or regulatory proceedings in Humana’s annual reports on Form 10-K and quarterly reports on Form 10-Q, available at www.sec.gov.

¹³ WholeHealth Networks, Inc. is a subsidiary of Tivity Health, Inc.

e.

For the Vendor, Parent Company, subsidiaries and all Subcontractors list and describe any Protected Health Information (PHI) breaches (within the past five years) that have occurred and the response. Do not include items excluded per 45 CFR 164.402.

HUMANA PROTECTED HEALTH INFORMATION (PHI) BREACHES

In accordance with federal regulations (45 CFR 164.408), Humana has included a list of PHI breaches in **Attachment I.B.2-39** that have occurred within the past five years involving Humana Health Plan, Inc. (Vendor), Humana Inc. (direct and ultimate parent company), and Humana Inc.'s subsidiaries.

3RD PARTY SUBCONTRACTORS

The following Subcontractors provided information on PHI breaches within the past five years:

1. Avēsis

Avēsis's information security infrastructure is overseen by their parent company, Guardian. Over the last five years, Avēsis has had one privacy breach affecting 500 or more Enrollees. In January 2019, Avēsis became aware of a privacy breach related to eligibility file errors resulting in utilization review decision letters being sent to incorrect Enrollees. This breach affected more than 650 Medicaid Enrollees in the Commonwealth of Kentucky.

Avēsis used its standard breach protocol to conduct a root cause analysis, which identified that a code change associated with the 834 file created waterfall logic that resulted in Enrollee mailing addresses cascading to other Enrollee records. To mitigate the issue:

- Incorrect code was replaced with the correct code and logic
- Eligibility files were reloaded and tested to ensure records were loaded correctly

2. NCH Management dba New Century Health

NCH was upgrading to a Software Defined Network (SDWan) on December 26, 2017 through January 8, 2018, and the external IP address was mapped to the wrong internal address. This resulted in a folder containing one PDF to be exposed to the internet. The pdf contained (1) member's PHI record; no other member's PHI was exposed. Upon discovery on January 9, 2018, NCH removed the record, and Google removed cached copies. On January 9, 2018, the NCH Information Security team audited all external IP addresses and found no other inconsistencies or unauthorized documents. All internal IP addresses have been reviewed and verified that they do not have any external IP address open to the internet. Covered entity and member were notified as defined in our PHI Breach and Incident Policy.

3. Outcomes, Inc. dba OutcomesMTM

A subset of member data was unintentionally sent via fax to the wrong entity. Outcomes' internal risk assessment categorized this incident as a breach. The faxing process used has been temporarily discontinued until a new process can be defined to reduce the risk of inadvertently disclosing PHI.

4. Centauri Health Solutions, Inc.

In 2017, a breach of PHI occurred when an associate disclosed a health plan member's PHI to an unauthorized household member. The associate was disciplined and retrained according to policy.

In 2019, a breach of PHI occurred when an associate left a message containing sensitive information belonging to one individual on an unrelated person's voicemail. The associate was disciplined and retrained according to policy.

f.

Has the Vendor ever had its accreditation status (e.g., National Committee on Quality Assurance (NCQA), Utilization Review Accreditation Commission (URAC), or Accreditation Association for Ambulatory Health Care (AAAHC)) in any state for any product line adjusted down, suspended, or revoked (within the past five years)? If so, identify the state and product line and provide an explanation. Include information for the Vendor's Parent Company and subsidiaries.

Humana's Commitment to Quality

At Humana, quality improvement is a core value that guides our day-to-day behaviors, decisions, and actions. Our performance in NCQA and Centers for Medicare and Medicaid Services (CMS) ratings demonstrates a comprehensive, organization-wide commitment to quality and continuous quality improvement (CQI).

- Humana has **never** received a Provisional NCQA rating
- Since receiving Utilization Review Accreditation Commission (URAC) accreditation in 2010, Humana Pharmacy, Inc., Humana Specialty Pharmacy, and Humana Pharmacy Solutions, Inc. have all maintained a **Full URAC accreditation status**
- Since receiving Accreditation Association for Ambulatory Health Care (AAAHC) accreditation in 2009, Humana's CarePlus Health Plans, Inc. (MAPD HMO) has maintained a **Full AAAHC accreditation status**
- Humana currently operates an **NCQA-accredited Medicaid plan in Kentucky. Humana has been an NCQA-accredited health plan in Kentucky since 2016**. Our current accreditation is active and valid through November 2022. We recently completed the renewal process for NCQA full accreditation and received our full accreditation status notification in November 2019. We have an additional four NCQA-accredited plans (in other lines of business) in Kentucky, two of which have a Commendable status.
- Our NCQA-accredited **Florida Medicaid plan is tied for first in quality** among 12 participating Florida Medicaid plans, according to NCQA
- Humana operates **37 NCQA-accredited health plans** nationwide across our Commercial, Medicaid, and Medicare Advantage (MA) lines of business; **20 plans have a Commendable status**
- Humana leads all national MA plans with **84% of Humana MA Enrollees enrolled under contracts with 4-plus Stars in 2019**. Nationally, approximately 244,000 Humana Medicare Enrollees are in 5 Star (perfect rating) health plans.
- Humana employs **more than 1,000 associates fully dedicated to quality improvement throughout our organization**
- We have **more than 100 Humana associates specifically dedicated to supporting quality improvement for our Kentucky Medicaid program**

Revoked or Suspended

Humana has **never** had its NCQA, URAC, or AAAHC accreditation status revoked or suspended.

Accreditation Status Adjustments

URAC: Humana Pharmacy, Inc., Humana Specialty Pharmacy, and Humana Pharmacy Solutions, Inc. received URAC accreditation in 2010. Humana has maintained a **Full URAC accreditation status** since 2010, never experiencing a downward adjustment.

AAAHC: Humana's CarePlus Health Plans, Inc. (MAPD HMO) received AAAHC accreditation in 2009. Humana has maintained a **Full AAAHC accreditation status** since 2009, never experiencing a downward adjustment.

NCQA: Humana operates **37 NCQA-accredited health plans** nationwide across our Commercial, Medicaid, and Medicare Advantage (MA) lines of business. Humana's dedicated team of associates regularly review quality metrics and data, and employ rapid-cycle improvement methods to continually monitor, assess, and assure the delivery of high-quality care. Despite these continuous efforts, there are a number of factors that can influence the accreditation score and create status fluctuations year over year. HEDIS and CAHPS scores, which are measured on annual basis, represent 50 percent of the accreditation score and play a significant role in accreditation status adjustments. Revisions to the technical specifications of the HEDIS measures can also be a

contributing factor, driving changes in the datasets and eligible populations from year to year. While it can be very difficult to pinpoint the exact measures that contributed to a downgrade in status, Humana has robust Quality Improvement (QI) processes in place to monitor, identify, and address any such movement as it occurs.

Please refer to **Table I.B.2-3** for details regarding downward and upward adjustments of Humana’s NCQA accreditation status for 2015–2019 by Humana legal entity, state, and product line. **Please note that the fluctuations in accreditation status are not the result of any sanctions, fines or compliance issues.**

Table I.B.2-3: NCQA Accreditation Status Adjustments (2015– 2019)

Legal Entity	Product	Changed From	Changed to	Adjustment
2019				
Humana Health Benefit Plan of Louisiana, Inc.	Commercial HMO/POS	Accredited	Commendable	Upward
Humana Health Plan of Texas, Inc.	Commercial HMO/POS	Accredited	Commendable	Upward
Humana Health Plan, Inc. (Tennessee)	Commercial HMO/POS	Commendable	Accredited	Downward
Humana Health Plan, Inc. (Kentucky)	Commercial PPO	Accredited	Commendable	Upward
Humana Insurance Company (Wisconsin)	Commercial PPO	Commendable	Accredited	Downward
CHA HMO Inc. (Arizona)	Medicare HMO	Accredited	Commendable	Upward
CHA HMO Inc. (Colorado)	Medicare HMO	Accredited	Commendable	Upward
CHA HMO Inc. (Kansas/Missouri)	Medicare HMO	Accredited	Commendable	Upward
CHA HMO Inc. (Texas)	Medicare HMO	Accredited	Commendable	Upward
2018				
Humana Health Plan, Inc. (Kentucky)	Medicaid HMO	Commendable	Accredited	Downward
Humana Medical Plan, Inc. (Florida)	Medicaid HMO	Accredited	Commendable	Upward
Humana Wisconsin Health Organization Insurance Corporation (Wisconsin)	Commercial HMO	Accredited	Commendable	Upward
Humana Insurance Company (Illinois)	Commercial PPO	Accredited	Commendable	Upward
Humana Insurance Company (Wisconsin)	Commercial PPO	Accredited	Commendable	Upward
2017				
Humana Health Plan, Inc. (Kentucky)	Medicaid HMO	Accredited	Commendable	Upward
Humana Wisconsin Health Organization Insurance Corporation (Ohio)	Medicaid HMO	Accredited	Commendable	Upward
Humana Insurance Company (Wisconsin)	Commercial PPO	Commendable	Accredited	Downward
2016				
Humana Insurance Company (Wisconsin)	Commercial PPO	Accredited	Commendable	Upward
Humana Insurance Company (Illinois)	Medicare PPO	Commendable	Accredited	Downward
Humana Health Plan, Inc. (Kansas/Missouri)	Medicare HMO	Commendable	Accredited	Downward
Humana Health Plan, Inc. (Arizona)	Medicare HMO	Commendable	Accredited	Downward
Humana Health Plan, Inc. (Colorado)	Medicare HMO	Commendable	Accredited	Downward

Table I.B.2-3: NCQA Accreditation Status Adjustments (2015– 2019)

Legal Entity	Product	Changed From	Changed to	Adjustment
2015				
Humana Insurance Company (Arizona)	Medicare PPO	Accredited	Commendable	Upward
Humana Health Benefit Plan of Louisiana, Inc.	Commercial HMO/POS	Commendable	Accredited	Downward
Humana Medical Plan, Inc. (Florida)	Commercial HMO/POS	Commendable	Accredited	Downward
Humana Insurance Company (Wisconsin)	Commercial PPO	Commendable	Accredited	Downward
Humana Benefit Plan of Illinois, Inc.	Medicare HMO	Excellent	Commendable	Downward
Humana Employers Health Plan of Georgia, Inc.	Medicare HMO	Commendable	Accredited	Downward
Humana Health Plan of Ohio, Inc.	Medicare HMO	Commendable	Accredited	Downward
Humana Health Plan of Texas, Inc.	Medicare HMO	Commendable	Accredited	Downward
Humana Medical Plan, Inc. (Florida)	Medicare HMO	Excellent	Commendable	Downward
Cariten Health Plan, Inc. (Tennessee)	Medicare HMO	Excellent	Commendable	Downward
Humana Health Benefit Plan of Louisiana, Inc.	Medicare HMO/POS	Excellent	Commendable	Downward
Humana Insurance Company (Kansas/Missouri)	Medicare PPO	Commendable	Accredited	Downward

Process for Improvement

Our Continuous Quality Improvement process flags any instance in which Humana receives a downgrade to its accreditation status. When these downgrades occur, our Market Quality Operations team informs our QI Director Audra Summers, RN, PMHNP, to prompt a local response. Under the direction of Ms. Summers, our Quality Assessment and Performance Improvement (QAPI) Coordinator Ms. Brenda Stamper, RN, and Quality Performance Coordinator collaborate to construct and deploy subsequent quality initiatives.

In addition, we proactively identify underperforming areas through internal controls, robust data analytics, and communications and coordination among our integrated business units to inform future quality initiatives to not only render downgrades a rare occurrence but to improve the health of our communities. To ensure the continued efficacy of these programs, our Quality Improvement Committee (QIC) provides ongoing oversight of quality initiatives and fully evaluates our initiatives each year through the Quality Improvement Evaluation (QIE).

Humana Health Plan, Inc. (Kentucky): Our Plan CEO, Jeb Duke, has ultimate oversight of our Kentucky Quality Management/Quality Improvement program. Our Medical Director, Lisa Galloway MD, MRO, FACOEM, co-chairs the Kentucky Medicaid QIC and reviews quality of care issues. Audra Summers RN, PMHNP, our QI Director, co-chairs the QIC and oversees the day-to-day operations of Humana’s QI program in Kentucky.

As mentioned above, there are a number of factors that can lead to a downgrade (or upgrade) in accreditation status. We were able to identify a few HEDIS measures whose decline from 2017 to 2018 may have contributed to the 2018 downgrade in NCQA accreditation status (Commendable to Accredited) of Humana Health Plan, Inc.’s Medicaid HMO plan. These HEDIS measures include:

- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents
- Comprehensive Diabetes Care – HbA1c Control (<8%)
- Flu Vaccinations for Adults Ages 18-64
- Prenatal and Postpartum Care

- Postpartum Care – Statin Therapy for Patients With Diabetes Statin Adherence 80%
- Controlling High Blood Pressure
- Appropriate Treatment for Children With Upper Respiratory Infection

Humana’s proposal includes a number of services/incentives that addresses these HEDIS measures identified above:

- Humana’s value-added services list includes adult immunizations for Enrollees 21 or older – one vaccine or immunization per Enrollee based on periodicity schedule
- Humana’s Maternity Incentive Program measures OB/GYNs’ performance against critical measures that correlate with healthy births, including Timeliness of Prenatal Care and Postpartum Care. To improve prenatal care and engage Enrollees in our MomsFirst maternity care management program, Humana will offer an incentive for OB/GYN providers who submit a “Notice of Pregnancy Form.” [REDACTED]
- Humana’s state-of-the-art rewards platform Go365 engages Enrollees in improving their health. We will incentivize Kentucky Enrollees for the following specific behaviors:
 - Prenatal exams and postpartum visits
 - Well-Child visits
 - Completing education on when to access the ED (level of care education)
 - Diabetes screenings/exams
 - Annual flu vaccination
 - Annual preventive care visit
 - Child completion of dental visit
 - Health Risk Assessment (HRA) completion
 - Completion of recommended mammogram and cervical cancer screenings

g.

Provide a listing of Medicaid managed care contracts held in the past ten (10) years for which the Vendor, Vendor’s Parent Company, and subsidiaries has:

g.i.

Voluntarily terminated all or part of the contract under which it provided health care services as the licensed entity

Humana Health Plan, Inc. has not voluntarily terminated all or part of a Medicaid Contract under which it provided healthcare services as the licensed entity in the past 10 years.

Humana Health Plan, Inc.’s parent company, Humana Inc., has not voluntarily terminated all or part of a Medicaid Contract under which it provided healthcare services as the licensed entity in the past 10 years.

None of Humana Inc.’s subsidiaries have voluntarily terminated all or part of a Medicaid Contract under which it provided healthcare services as the licensed entity in the past 10 years.

g.ii.

Had such a contract partially or fully terminated before the contract end date (with or without cause).

Humana Health Plan, Inc. has not had a Medicaid Contract partially or fully terminated before the Contract end date (with or without cause) in the past 10 years.

Humana Health Plan, Inc.’s parent company, Humana Inc., has not had a Medicaid Contract partially or fully terminated before the Contract end date (with or without cause) in the past 10 years.

None of Humana Inc.'s subsidiaries have had a Medicaid Contract partially or fully terminated before the Contract end date (with or without cause) in the past 10 years.

g.iii. Had a contract not renewed.

Humana Health Plan, Inc. has not had any Contracts for continuing Medicaid programs not renewed in the past 10 years.

Humana Health Plan, Inc.'s parent company, Humana Inc., has not had any Contracts for continuing Medicaid programs not renewed in the past 10 years.

None of Humana Inc.'s subsidiaries have had any Contracts for continuing Medicaid programs not renewed in the past 10 years.

g.iv. Withdrawn from a contracted service area.

Humana Health Plan, Inc. has not withdrawn from a contracted service area in the past 10 years.

Humana Health Plan, Inc.'s parent company, Humana Inc., has not withdrawn from a contracted service area in the past 10 years.

None of Humana Inc.'s subsidiaries have withdrawn from a contracted service area in the past 10 years.

g.v. Had a reduction of enrollment levels imposed?

Humana Health Plan, Inc. has not had a reduction of enrollment levels imposed in the past ten years.

Humana Health Plan, Inc.'s parent company Humana Inc., has not had a reduction of enrollment levels imposed in the past ten years.

None of Humana Inc.'s subsidiaries have had a reduction of enrollment levels imposed in the past ten years.