Humana_®

FREQUENTLY ASKED QUESTIONS FOR BROKERS & AGENTS:

Humana's Employer Group Commercial Medical Products exit

Revised 4/22/2024

Overview:

After a strategic and financial review of our business, Humana has decided to exit the Employer Group Commercial Medical Products business. This includes all fully insured, self-funded and Federal Employee Health Benefit medical plans, as well as Commercial embedded and standalone Go365®.

Taking into account valuable feedback from our customers and members, among other considerations, we determined that we were not able to meet the long-term needs of our Employer Group Commercial Medical customers.

Our goal is to always provide the best experience to our members, and, in this case, we are not able to continue to do that in a manner that is sustainable for Humana long term.

No other Humana health plan offerings – including Individual / Group Specialty (Dental, Vision, Disability, Life), Medicare Advantage, Medicare Supplement, Group Medicare, Medicare Prescription Drug Plans, Medicaid and Military – or any of our CenterWell healthcare services lines of business are materially impacted by this decision. It also does not impact our FEDVIP program.

SALES & RENEWALS

What will happen to in-force Humana Employer Group Commercial Medical groups?

Medical coverage for all current Humana employer groups will remain in-force through the end of the policy period and will be non-renewed, per the exit process in each state. Notifications of this exit to fully insured and self-funded (Level Funded Premium and Administrative Services Only) employer groups began in April, May or June 2023 for groups that would otherwise renew in November 2023, December 2023 or January 2024.

All impacted groups will be notified at least 180 days prior to the date that the group's Medical coverage would otherwise renew and will now be terminated due to this exit. The notification process will continue monthly until all impacted groups are notified.

What are the last new business effective dates available for Humana Employer Group Commercial Medical fully insured groups?

Humana Employer Group Commercial fully insured medical plans are only available with effective dates on or before the following:

10/1/2023: AZ, IN* (only Large Group / 51+), KS, KY, MI, MS, MO & WI

• 11/1/2023: NV, GA, LA, OH & TN

• 12/1/2023: FL, IL & TX

Medical plans purchased for plan year 2023 are <u>not</u> renewable and will be discontinued as of the plan renewal date on or after the following:

11/1/2023 effective date: AZ, IN (only Large Group / 51+), KS, KY, MI, MS, MO & WI

12/1/2023 effective date: NV, GA, LA, OH & TN

• 1/1/2024 effective date: FL, IL & TX

Notice of Humana's Employer Group Commercial Medical exit and non-renewability of medical plans will be provided upon quote.

* For Indiana fully insured small group (1-50) only, plan year 2023 medical plans are available through 12/1/2023 effective date. Additionally, pending approval of our Indiana ACA-compliant small group filings, we intend to offer Plan Year 2024 medical plans for only the 1/1/2024 through 6/1/2024 effective dates.

How does this change affect sales of Humana's Specialty lines of business?

We remain committed to our Group Specialty lines of business and continue to invest in our go-forward strategy. This strategy includes standing up a Specialty-focused distribution organization, new products and product enhancements, an industry leading **Specialty Broker Bonus** program, and more. We have also implemented a renewal strategy to mitigate the impact of bundled business accounts from terming their Specialty lines of coverage through extended rate guarantees and additional broker incentives.

How do I manage Humana Employer Group Commercial Medical groups coming up for renewal?

There will be no immediate changes to the Medical renewal process. We will follow individual state guidelines on when the non-renewal process will start in a given state and are committed to keeping you informed as we progress.

All impacted groups will be notified at least 180 days prior to the date that the group's Medical coverage would otherwise renew and will now be terminated due to this exit. The notification process will continue monthly until all impacted groups are notified. Prior to each month's mailing of the notification to impacted groups, we will send an email to the writing agent and agent of record that includes a list of their groups to be non-renewed for that upcoming renewal month along with a link to the sample employer letter (including sample member letter).

The notification timing for this exit to fully insured and self-funded (Level Funded Premium and Administrative Services Only) groups is as follows:

- Notifications started in April 2023 for 11/1/2023 effective date: AZ, IN** (only fully insured Large Group / 51+ & self-funded),
 KS, KY, MI, MS, MO & WI
- Notifications started in May 2023 for 12/1/2023 effective date: NV, GA, LA, OH & TN
- Notifications started in June 2023 for 1/1/2024 effective date: FL, IL & TX

- If plan is ACA-compliant fully insured small group and the group's renewal date falls between 7/1/23 through 12/1/23, medical coverage will end upon the group's renewal date in 2024 (between 6/30/24 and 11/30/24).
- If plan is fully insured small group grandfathered or grandmothered (transitional relief), medical coverage will end on 8/31/24.

 All groups except those with a September 2023 renewal date will have a short plan year.
- Pending approval of our Indiana ACA-compliant fully insured small group filings for Plan Year 2024: If plan is ACA-compliant small group and group's effective or renewal date falls between 1/1/24 through 6/1/24, medical coverage for a short plan year will end upon the group's renewal date in 2024 (between 6/30/24 and 8/31/24).

^{**}For Indiana fully insured small group (1-50) only, Humana must provide a one (1) year notification to all impacted groups.

This notification will be mailed to all impacted fully insured small groups in June 2023 – this is a one-time mailing. The timing of the medical fully insured small group exit varies as follows:

Will you be sending me notifications when my Humana Employer Group Commercial Medical groups are renewing and/or terming?

Yes, you will continue to receive our standard renewal communications until the non-renewal process begins based on each state's guidelines. Your Retention Executive (Small Group) or Client Executive (Large Group) can assist with case-specific questions.

Since Humana is exiting the Employer Group Commercial Medical business, why should I consider renewing my Medical groups with Humana?

Renewing your Humana Employer Group Commercial Medical customers allows for continuity of service and gives your clients enough time to evaluate their needs before transitioning to a new carrier. Existing compensation arrangements will remain in place and are being updated. For more information, please consult the agent portal.

I'm in the middle of closing a new Humana Employer Group Commercial Medical case. Can I continue to sell the case?

Yes. We will continue to quote and install fully insured new business Medical sales until we reach the non-quoting date per each state's guideline. After the 4/1/2023 effective date we will no longer quote or install new self-funded groups – Level Funded Premium (LFP) or Administrative Services Only (ASO).

Where can I get a list of my current Humana Employer Group Commercial Medical groups?

You can find a list of your groups by signing into the agent portal on <u>Humana.com</u>. You can also contact your Retention Executive (Small Group) or Client Executive (Large Group) for assistance.

Who will be my primary Humana contact moving forward for my Humana Employer Group Commercial business – for both Medical and Specialty?

For your Humana Employer Group Commercial Medical business, you will continue to work with our Medical Account Management Executives through 2023 for current clients. Any new business Employer Group Commercial Medical opportunities will be supported by a telephonic sales support team. Additionally, Humana's account management team will continue to support you and your Medical clients.

Your Humana Specialty business will be supported by your Specialty new business Sales Executive and the retention work will remain with the current account management team. Humana has expanded its Specialty benefits organization to have a local sales presence across the nation to support our brokers and customers with their Specialty benefit needs.

Will you be helping me move my Small Group Medical business to another carrier?

Humana is committed to helping you transition your Employer Group Commercial Medical business upon each state's non-renewal guideline and renewal thereafter. Please contact your Humana Retention Executive or Client Executive for additional support.

What happens if other carriers are unable write my Humana business for any reason?

We will support the transition of business as best we can, but also recognize that this may leave some employers with limited options. Small employers (generally those with 1-50 employees) may be eligible to purchase Medical coverage through the Small Business Health Options Program (SHOP) Marketplace. To view Medical plan options on the SHOP Marketplace, please go to HealthCare.gov.

Can I move Humana Employer Group Commercial Medical business to another carrier off renewal?

We encourage our Employer Group Commercial Medical customers to retain their Humana Medical plan until their policy ends on their annual effective date and based on the state's non-renewal guidelines. To support this process for all of our current Medical customers, we offer a suite of transition support resources that will be available to you and your customers leading up to each customer's renewal period. These resources will support an effective transition to a different Medical carrier.

While it is possible for a group to move off renewal, our capacity to offer this level of support may be limited for groups that opt to move off renewal; therefore, we strongly encourage transitioning your customers at their annual effective date and not before.

What reporting / experience will be available to help the client move to a different carrier?

We have always prided ourselves on delivering a strong service experience and will continue to support our customers. We offer a suite of transition support resources that will be available to you and your customers leading up to each customer's renewal period. These resources will support an effective transition – starting with the shopping process and carrying through the transition.

Will Humana be sending deductible and out-of-pocket reports to the new carriers? How should this be requested?

For Large Group customers, the Client Executive can provide a file with deductible and out-of-pocket data upon termination of the Employer Group Commercial Medical plan and submit directly to the new carrier contact. For Small Business customers, this information can be requested by contacting our Humana Business Services team at 800-592-3005.

Will I still have in-market resources to help with things like open enrollment meetings, wellness fairs and in person meetings?

Small Business customers will be supported remotely through Retention Executives and a telephonic sales support team. We anticipate Large Group customers will continue to be supported by Client Executives in the market and their assigned Single Point of Contacts (SPOCs). We will be leveraging virtual assets wherever possible to ensure appropriate coverage of client needs.

Will my access to the Single Point of Contact (SPOC) team (on behalf of my clients) continue?

Yes, if you have access to the SPOC team today, you will continue to be able to contact the SPOCs assigned to your clients.

Who should I contact if I have questions on my Humana Employer Group Commercial Medical business?

You can reach out to your Humana Retention Executive or Client Executive who can help or refer you to our telephonic support team. You can also contact our Humana Business Services team for service support at 800-592-3005 for Small Group assistance. For 100+ groups, please reach out to the Single Point of Contact (SPOC) assigned to each of your groups.

Should I sell or quote new Go365® standalone business or proceed with renewals?

Go365 new sales are not currently being sold and we have no intentions to resume them. Renewals for Go365 clients with renewal dates through July 2023 will be honored; non-renewal notification initial wave will begin April 1, 2023, with a second notification wave planned for August 1, 2023.

COMMISSIONS & BONUSES

How does this impact my commissions and bonuses?

There will be no changes to standard Medical commission schedules. However, we have amended the <u>Medical Growth Bonus</u> program for the remainder of 2023.

Will you be offering any incentives to renew my groups one more time?

We value your relationship and appreciate the business you've written with us through the years. Our **2023 Medical Growth Bonus** has been amended to reward you for continuing to renew your Medical business with us until the non-renewal process begins.

I am a 2022 Leaders Club qualifier, will there be any changes to the program?

There will be no changes to the program benefits for 2022 Leader's Club qualifiers. You will be notified of any Leader's Club program changes, along with any other changes made to the Producer Partnership Plan.

Will Concierge service continue for Leaders Club brokers?

Yes, Leaders Club Concierge service will continue through 2023 for any brokers who achieved Leaders Club status in 2022. Any program changes for Leaders Club will be communicated throughout 2023.

EMPLOYERS & MEMBERS

How will Humana support employers and members during this transition?

We have a long history of caring for people and continuing to provide a high level of customer care is of great importance to Humana. Employers and members can be assured we are committed to maintaining our service levels and benefit payments during this transition period. In the immediate term, employers and members do not need to take any action. Employers will be notified at least 180 days ahead of when their Employer Group Commercial Medical plan would have renewed letting them know what to expect next.

Is there information I can share with my clients?

We are providing this **Employer FAQ** that you can share with your clients or use to help answer their questions.

