



Humana Group Medicare

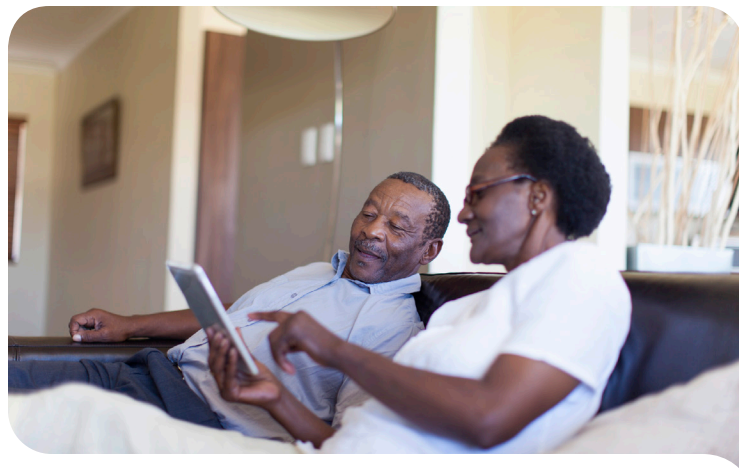
Plans That Go
the Extra Mile

Humana

[Humana.com](https://www.humana.com)

GHHJ6YYEN

Today's Member Environment



It is constantly changing. With aging baby-boomers and higher medical costs, plan sponsors are faced with a number of challenges while providing members with the Medicare plan they need. At Humana, we have a unique perspective to providing Group Medicare plans that are an answer for many of today's challenges and help your members live happily and healthily.

Changing Member Landscape

The retiree population is increasing
10 times faster than the working population.¹



Medical Costs are Rising

10% of member household income goes to healthcare, which is **72% higher** than 10 years ago.²



Why the Environment is Changing For You



Changing Government Regulations



Continually Increasing Medical & Benefit Costs

For Your Members



Unhealthy Lifestyles



Tighter Budgets

How Humana Can Help

At Humana, we offer a variety of strategies to help you tackle those challenges and build the plan you've been looking for. We fit plans to meet your unique needs and minimize member disruption.

Our dedicated team works with you to limit administrative needs and create a smooth transition. We believe in an analytical approach to identify gaps in care as early as possible to improve the health of your members. *Let us give your members the Group Medicare plan that they need.*

¹ Source: Social Security Administration, 2005.

² Source: AARP. The Effects of Rising Health Care Costs on Middle-Class Economic Security, 2013.

What Good Looks Like Humana Group Medicare Advantage

Aren't all Group Medicare plans the same? Not at Humana. Our ultimate goal is helping members live happily and healthily. To get the most out of healthcare after retirement, you need to provide the three benefits of a best-in-class Group Medicare plan to best serve your members.



Foundational Coverage

We offer your members the Medicare benefits they need to help address chronic conditions and prevent illness after retirement. Your members receive complete access to medical and pharmacy benefits. Humana limits member disruption and administrative needs by utilizing its dedicated service team, and working with you to find a plan that fits your needs and using its leading provider network.



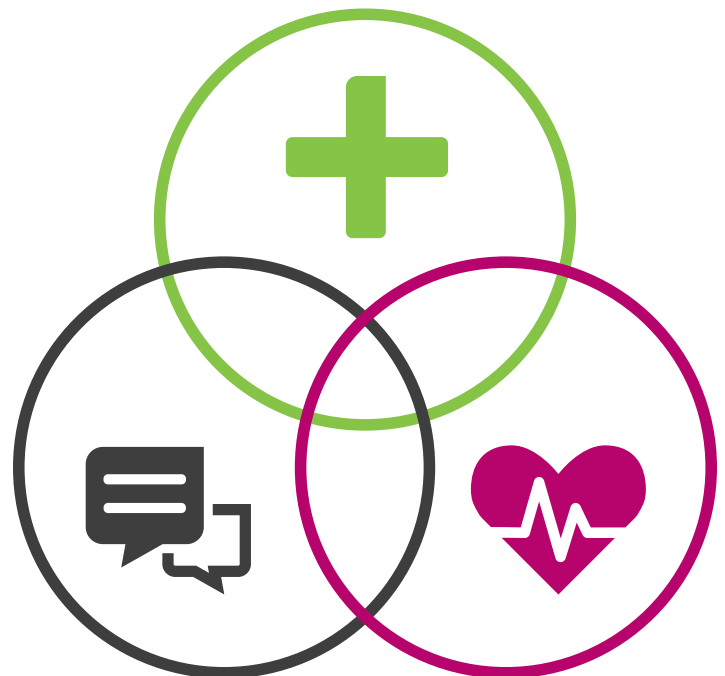
Outreach & Engagement

Outreach and Engagement ensures members are engaged in their health, and can identify health issues before they become serious. Humana uses a multi-tiered assessment strategy to analyze data on every member daily, which helps to identify any gaps in care as early as possible. The model then determines the best outreach method and engagement strategy to ensure that the gap in care doesn't become a major health issue.



Health & Wellness

Health & Wellness gives members the potential to manage chronic and acute health concerns and live a healthier lifestyle by providing members preventive care, exercise programs, incentives and realistic goal setting. Humana is dedicated to the health and wellness industry and has seen powerful results due to engagement in incentive-based wellness programs.



55.7% of seniors 65 and older are overweight or obese, and spent 42% more for medical care than they did in the 2000's.³



Establish Foundational Coverage

At Humana, we understand the value your members have brought to your organization. When they retire, they need more than original Medicare. They need coverage they can count on, administered by people they can trust.

Give Members Reliable Medicare Coverage

Humana Group Medicare Advantage plans combine all of the benefits of Original Medicare Part A and Part B in a single plan that Humana underwrites and administers. Your members will have one card, one claims payer and one place to go with questions.

Exceed standards with Humana Group Medicare

Humana provides your members more than original Medicare by offering additional services and programs. Our additional services and programs are designed to enhance member engagement and to keep members focused on their health.

- **TAILORED PLANS:** Our Humana Group Medicare experts develop a tailored plan based on your needs.
- **NATIONWIDE COVERAGE:** We offer one of the largest provider networks in the industry, helping you minimize disruption.
- **ACUTE & CHRONIC CONDITION MANAGEMENT:** We offer clinical programs that address members' health and benefit needs. Humana's proprietary tools and methods identify those in need of special care or at risk for health problems.
- **EXTENSIVE PRESCRIPTION DRUG COVERAGE:** We offer options for an open formulary that give your members stress-free prescription coverage.



62% of middle-class seniors had to reduce household spending over the past year.⁴



Provide Personalized, Proactive and Preventive Outreach and Engagement

Each member comes with a different health history and health concerns that may need specialized care. Humana Group Medicare is equipped to give members the support they need to identify current gaps in care, and the tools to help them stay healthy.

Promote Healthy Habits with Outreach & Engagement

Engage members in their own personal health with support from Humana. We monitor each individual's health claims to identify gaps in care before issues arise or worsen. By engaging members in their health and well-being, they are able to drive their own healthcare costs and proactively identify when they need to take action.

Identify Gaps in Care as Early as Possible

We tailor plans by considering all member health concerns as a part of our modeling and outreach approach. We engage your hard-to-reach members through our reliance on analytics to uncover the best method for their unique situation.

- **PREDICTIVE MODELING:** We gather, integrate and analyze available healthcare data on each member to understand their full picture and address individual health issues.
- **PROACTIVE OUTREACH:** We use a variety of methods to reach each member as quickly as possible.
- **TARGETED ENGAGEMENT STRATEGIES:** We review each member's clinical profile and build personalized strategies that fit the need of that individual.
- **PREVENTIVE CARE:** We increase awareness and encourage members to participate in preventive measures like routine physicals and wellness programs that help them get ahead of potential illnesses.



Typically, the sickest 20% of members account for 70% of Medicare costs.⁵



Prioritize Health & Wellness to Promote Sustainable Behavior Change

As members age, it is more important than ever to promote an active lifestyle. Help enhance their quality of life with Health & Wellness programs from Humana that aim to promote healthy behavior changes for a long, happy life.

Improve Quality of Life with Health & Wellness

Help members stay healthy and make better choices with Humana's holistic wellness program. We assist members in managing their chronic conditions and promote healthy behaviors by giving them the individual attention they need to keep them engaged in their wellness.

Enable Your Members to Change Their Behavior

Our health & wellness program introduces a proactive approach to encouraging daily, preventive behaviors.

- **HEALTH & WELLNESS EDUCATION:** Our online tools and programs will help your members become experts in their own health and wellness.
- **LIFE-ENRICHMENT PROGRAMS:** We integrate fitness, nutrition, exercise, care-giving and overall healthy lifestyle into one holistic program no matter their age or health status.
- **HEALTHY LIVING INCENTIVES:** Our program, HumanaVitality, rewards members for making healthy life choices such as increased activity, preventive screenings or reaching their personal goals.



Medical costs can fall by \$3.27 for every \$1 spent on wellness programs.⁶



Learn more about
how Humana's
Group Medicare
can help you and
your members.

Humana

[Humana.com](https://www.humana.com)

Humana is a Medicare Advantage organization and stand-alone prescription drug plan with a Medicare contract. Enrollment in a Humana contract depends on contract renewal. The benefit information provided is a brief summary, not a complete description. For more information, contact the plan. Limitations and restrictions may apply. Benefits, premium and member cost share may change on January 1 of each year. Medicare evaluates plans based on a 5-Star rating system. Star Ratings are calculated each year and may change from one year to the next. You must continue to pay your Medicare Part B premium.