



Humana Medicare Advantage Members Now Have In-Network Access at Eight Additional McLaren Health Care Hospitals in Michigan

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FLINT, Mich.--(<u>BUSINESS WIRE</u>)--Grand Blanc-based <u>McLaren Physician Partners</u> (MPP) and leading health and well-being company <u>Humana Inc.</u> (NYSE: HUM) have signed an agreement that expands in-network options for Humana Medicare Advantage members in Michigan seeking care at <u>McLaren Health Care</u> hospitals and outpatient facilities.

The contract also provides additional in-network access for Humana Medicare Advantage members to physicians and clinicians employed by, and affiliated with, McLaren Health Care in Michigan.

MPP is a physician hospital organization dedicated to the creation of a clinically integrated network to drive health care delivery and includes 14 Michigan hospitals.

The agreement, now in effect, adds in-network access for Humana Medicare Advantage Health Maintenance Organization (HMO), Preferred Provider Organization (PPO), and Private Fee-for-Service (PFFS) health plan members at all McLaren Health Care outpatient facilities, as well as at eight McLaren Health Care hospitals in Central and Eastern Michigan:

• Bad Axe: McLaren Thumb Region

• Bay City: McLaren Bay Region and McLaren Bay Special Care

• Caro: McLaren Caro Region

• Detroit: Karmanos Cancer Institute

• Flint: McLaren Flint

Lapeer: McLaren Lapeer Region
Mount Clemens: McLaren Macomb

These options complement six other McLaren Health Care system hospitals and ambulatory facilities in Michigan previously contracted as in-network for Humana Medicare Advantage members: McLaren Clarkston (Clarkston); McLaren Greater Lansing (Lansing); McLaren Central Michigan (Mt. Pleasant); McLaren Northern Michigan (Petoskey); McLaren Oakland (Pontiac); McLaren Port Huron (Port Huron).

Furthermore, this agreement expands in-network access for Humana Medicare Advantage HMO, PPO, and PFFS members seeking care from primary and specialty care physicians and other clinicians employed by, and affiliated with, McLaren Health Care in Michigan. It adds more than 1,200 providers, for a total now of more than 2,400 McLaren Health Care employed and affiliated providers participating in Humana's Medicare networks. The contract also includes a value-based care agreement with the providers in order to improve patient outcomes and the patient experience for local Humana HMO and PPO members.

"We're very pleased to expand our relationship with McLaren and deepen our mutual commitment to the health and well-being of Michiganders," said Humana Regional Medicare President Kathie Mancini. "Humana values the opportunity to work with a locally-owned health system with more than a century of service, and a shared dedication to improving care quality and health outcomes."

The value-based agreement with MPP is in keeping with Humana's longstanding commitment to value-based care, which emphasizes:

- More personal time with health professionals and personalized care that is tailored to each person's unique health situation:
- Access to proactive health screenings and programs that are focused on preventing illness;
- Improved care for people living with chronic conditions with a focus on avoiding health complications;
- Leveraging technologies, such as data analytics, that connect physicians and help them work as a team to coordinate care around the patient; and
- Reimbursement to physicians linked to the health outcomes of their patients rather than based solely on the quantity of services they provide (fee-for-service).

Humana has an extensive and growing value-based care presence. As of June 30, 2019, Humana has approximately 2.3 million individual Medicare Advantage members and approximately 115,000 commercial members who are cared for by more than 58,000 primary care physicians in more than 1,000 value-based relationships across 43 states and Puerto Rico. Humana's total Medicare Advantage membership is more than four million members, which includes members affiliated with providers in value-based and standard Medicare Advantage settings. For more information, visit https://doi.org/10.1001/june-based members affiliated with providers in value-based and standard Medicare Advantage settings. For more information, visit https://doi.org/10.1001/june-based members affiliated with providers in value-based and standard Medicare Advantage settings. For more information, visit https://doi.org/10.1001/june-based members affiliated with providers in value-based and standard Medicare Advantage settings.

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 web site at www.humana.com, 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
- Corporate Governance information

Additional Information

Humana is a Medicare Advantage HMO and PPO organization with a Medicare contract. Enrollment in any Humana plan depends on contract renewal. Other providers are available in our network. The provider may contract with other Plans.

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Contact:

Alissa Krinsky Humana Corporate Communications 312-441-5576 akrinsky@humana.com

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