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January 21, 2025

William N. Parham, III
Director, Paperwork Reduction Staff
Office of Strategic Operations and Regulatory Affairs
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244

RE: Dual Eligible Special Needs Plan Contract with the State Medicaid Agency (CMS 10796)

Dear Mr. Parham:

This letter is in response to the Centers for Medicare and Medicaid Services (CMS) agency information collection notice "Dual Eligible Special Needs Plan Contract with the State Medicaid Agency (CMS-10796)" as issued on November 22, 2024.

Humana Inc., headquartered in Louisville, Kentucky, is a leading health care company that offers a wide range of insurance products and health and wellness services that incorporate an integrated approach to lifelong well-being. Humana currently serves approximately 5.9 million beneficiaries enrolled in our Medicare Advantage (MA) plans and 2.9 million beneficiaries enrolled in our Medicare Part D Prescription Drug Plans (PDPs). As one of the nation's top contractors for MA, we are distinguished by our long-standing, comprehensive commitment to Medicare beneficiaries across the United States. These beneficiaries – a large proportion of whom depend upon the MA program as their safety net – receive integrated, coordinated, quality, and affordable care through our plans. Our perspective is further shaped by the comprehensive medical coverage we provide for Medicaid beneficiaries in nine states.

Appendix A

Humana appreciates CMS's review of these attestation and matrices required for SMAC submission. Specifically, Humana supports revisions to reduce the number of attestations required for SMAC submission, the updated matrix names to mitigate confusion, and the inclusion of H Contract number within each matrix. We feel these updates will help ensure the proper forms are being used appropriately and aid in the completion of these documents.

Upon review, it was noted Attestation 4 was modified to require the Basic D-SNP State Medicaid Agency Contract Matrix before the SMAC submission deadline. Previously, this attestation required the matrix to be submitted by the SMAC submission deadline. Since the matrix is submitted with the SMAC, and not before, we recommend continuing to use the requirement "by the SMAC submission deadline."

We hope that you consider our comments as constructive feedback aimed at ensuring that together we continue to advance our shared goals of improving the delivery of coverage and services in a sustainable, affordable manner to beneficiaries, focused on improving their total health care experience.

If you have any questions, please do not hesitate to reach out to me at mhoak@humana.com and 571- 466-6673.

Sincerely,

A handwritten signature in black ink, appearing to read 'mhoak', written in a cursive style.

Michael Hoak
Vice President, Public Policy