APPENDIX I

Financial Certification



FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: <u>H4007</u>

Company Plan Name: Humana Gold Plus SNP-DE H4007-016 (HMO D-SNP)

'MA Reg Rev' tab

Company Plan Number: 016



Part C BPT

	1,	AA Req Rev tab	11	
(1)	F67	Plan Cost Sharing	\$	-
(2)	G67	Actual Cost Sharing	\$	-
(3)	H98	Net Medical Expenses	\$	954.30
(4)	H106	Non Benefit Expenses	\$	249.25
(5)	H107	Gain/Loss Margin	\$	63.52
	"ו'	MA Bnchmk' tab		
(6)	F12	Non-DE# Member Months		-
(7)	G12	DE# Member Months		19,587
(8)	E14	MSP Adjustment		0.00%
(9)	F15	Non-DE# Risk Score		1.94
(10)	G15	DE# Risk Score		1.94

Part D RPT

Part D BP I			
	'Standar	d Coverage' tab	
(11)	H11	Risk Score	1.84
(12)	L11	LIS Member Months	-
(13)	L12	Non-LIS Member Months	21,435
(14)	I33	Cost Sharing	\$ 177.42
(15)	M33	Federal Reinsurance	\$ 209.22
(16)	N33	Plan Liability	\$ 120.45
(17)	D40	Non Benefit Expenses	\$ 20.07
(18)	D44	Gain/Loss Margin	\$ 2.50



	'Script Projection' tab		
(19)	sum(F11,F15,F23,F27)	Generic Scripts	50,209
(20)	sum(F12:F14,F16:F18,F24:F26,F28 :F30)	Brand Scripts	13,290
Gain Ma available	argin PMPM for Dual Eligibles (if	Part C BPT 'MA Req Rev' tab	\$ 63.52
Part C F	ВРТ		
	'MA Req Rev' tab		
(1)	R123	Medicaid Projected Revenue	\$ 32.71
(2)	R124	Medicaid Proj Cost not in bid	\$ 141.36

Jose Mercado
Chief Financial Officer

Luis A. Torres Olivera President & CEO Frank Torres Chief Compliance Officer

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FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: H4007

Company Plan Name: Humana Gold Plus SNP-DE H4007-018 (HMO D-SNP)

Company Plan Number: 018



Part C BPT

		'MA Req Rev' tab		
(1)	F67		Plan Cost Sharing	\$ -
(2)	G67		Actual Cost Sharing	\$ -
(3)	H98		Net Medical Expenses	\$ 838.07
(4)	H106		Non Benefit Expenses	\$ 201.93
(5)	H107		Gain/Loss Margin	\$ 30.84
		'MA Bnchmk' tab		
(6)	F12		Non-DE# Member Months	_
(7)	G12		DE# Member Months	34,928
(8)	E14		MSP Adjustment	0.00%
(9)	F15		Non-DE# Risk Score	1.77
(10)	G15		DE# Risk Score	1.77
Part D BPT				
		'Standard Coverage' tab		
(11)	H11		Risk Score	1.81
(12)	L11		LIS Member Months	_
(13)	L12		Non-LIS Member Months	35,827
(14)	I33		Cost Sharing	\$ 181.87
(15)	M33		Federal Reinsurance	\$ 225.50
(16)	N33		Plan Liability	\$ 124.60
(17)	D40		Non Benefit Expenses	\$ 17.21
(18)	D44		Gain/Loss Margin	\$ 2.53





	'Script Projection' tab			
(19)	sum(F11,F15,F23,F27)	Generic Scripts		78,923
(20)	sum(F12:F14,F16:F18,F24:F26,F28:F30)	Brand Scripts		21,808
Gain Ma	argin PMPM for Dual Eligibles (if available)	Part C BPT 'MA Req Rev' tab	\$	30.84
Part C l	ВРТ			
	'MA Req Rev' tab		_	
(1)	R123	Medicaid Projected Revenue	\$	32.71
(2)	R124	Medicaid Proj Cost not in bid	\$	143.28

Jose Mercado
Chief Financial Officer

Luis A. Torres Olivera President & CEO Frank Torres
Chief Compliance Officer

Frank Torres

Contrato Número

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FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: H4007

Company Plan Name: Humana Gold Plus SNP-DE H4007-026 (HMO D-SNP)

Company Plan Number: 026



Part C BPT

		'MA Req Rev' tab	
(1)	F67	Plan Cost Sharing	\$ 1.33
(2)	G67	Actual Cost Sharing	\$ -
(3)	H98	Net Medical Expenses	\$ 714.94
(4)	H106	Non Benefit Expenses	\$ 208.28
(5)	H107	Gain/Loss Margin	\$ (71.28)
		'MA Bnchmk' tab	
(6)	F12	Non-DE# Member Month	s
(7)	G12	DE# Member Months	49,597
(8)	E14	MSP Adjustment	0.07%
(9)	F15	Non-DE# Risk Score	1.65
(10)	G15	DE# Risk Score	1.65

Part D BPT

'Standard Coverage' tab

(11)	H11	Risk Score	1.80
(12)	L11	LIS Member Months	-
(13)	L12	Non-LIS Member Months	52,444
(14)	I33	Cost Sharing	\$ 172.93
(15)	M33	Federal Reinsurance	\$ 200.88
(16)	N33	Plan Liability	\$ 110.98
(17)	D40	Non Benefit Expenses	\$ 17.38
(18)	D44	Gain/Loss Margin	\$ 2.29





	'Script Projection' tab		
(19)	sum(F11,F15,F23,F27)	Generic Scripts	114,661
(20)	sum(F12:F14,F16:F18,F24:F26,F28:F30)	Brand Scripts	30,557
Gain Margin P	MPM for Dual Eligibles (if available)	Part C BPT 'MA Req Rev' tab	\$ (71.28)
Part C BPT			
	'MA Req Rev' tab		
(1)	R123	Medicaid Projected Revenue	\$ 32.71
(2)		Medicaid Proj Cost not in	\$ 140.37

Jose Mercado Chief Financial Officer Luis A. Torres Olivera President & CEO Frank Torres
Chief Compliance Officer

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FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: H4007

Company Plan Name: Humana Gold Plus SNP-DE H4007-019 (HMO D-SNP)

Company Plan Number: 019

Part C BPT

		'MA Req Rev' tab		-	
(1)	F67		Plan Cost Sharing	\$	
(2)	G67		Actual Cost Sharing	\$	-
(3)	H98		Net Medical Expenses	\$	822.53
(4)	H106		Non Benefit Expenses	\$	193.53
(5)	H107		Gain/Loss Margin	\$	49.63
		'MA Bnchmk' tab	Non-DE# Member		
(6)	F12		Months		-
(7)	G12		DE# Member Months		5,955
(8)	E14		MSP Adjustment		0.00%
(9)	F15		Non-DE# Risk Score		1.80
(10)	G15		DE# Risk Score		1.80

Part D BPT

		'Standard Coverage' tab		
(11)	H11		Risk Score	1.78
(12)	L11		LIS Member Months	
(13)	L12	TRACICIA	Non-LIS Member Months	6,260
(14)	I33	SHINISTRACION OF	Cost Sharing	\$ 179.87
(15)	M33	Oran III	Federal Reinsurance	\$ 196.16
(16)	N33	Contrato Número	Plan Liability	\$ 113.43
(17)	D40	1 4 - 0	Non Benefit Expenses	\$ 16.66
(18)	D44	3	Gain/Loss Margin	\$ 2.32
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(19) (20)	'Script Projection' tab sum(F11,F15,F23,F27) sum(F12:F14,F16:F18,F24:F26,F28:F30)	Generic Scripts Brand Scripts	13,982 3,757
, ,	in PMPM for Dual Eligibles (if available)	Part C BPT 'MA Req Rev'	\$ 49.63
Part C BP	T 'MA Req Rev' tab		
(1)	R123	Medicaid Projected Revenue	\$ 32.71
(2)	R124	Medicaid Proj Cost not in bid	\$ 139.82

Jose Mercado Chief Financial Officer Luis A. Torres Olivera President & CEO Frank Torres Chief Compliance Officer

Contrato Número

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FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: <u>H4007</u>

Company Plan Name: Humana Gold Plus SNP-DE H4007-027 (HMO D-SNP)

Company Plan Number: 027

Part C BPT

		'MA Req Rev' tab	
(1)	F67	Plan Cost Sharing	\$ 1.97
(2)	G67	Actual Cost Sharing	\$ -
(3)	H98	Net Medical Expenses	\$ 919.11
(4)	H106	Non Benefit Expenses	\$ 208.28
(5)	H107	Gain/Loss Margin	\$ (114.25)
		'MA Bnchmk' tab	
		Non-DE# Member	
(6)	F12	Months	_
(7)	G12	DE# Member Months	14,402
(8)	E14	MSP Adjustment	0.14%
(9)	F15	Non-DE# Risk Score	1.67
(10)	G15	DE# Risk Score	1.67

Part D BPT

'Standard Coverage' tab

(11)	H11	Risk Score	1.88
(12)	L11	LIS Member Months	-
(13)	L12	Non-LIS Member Months	15,353
(14)	133 NISTRACION	Cost Sharing	\$ 189.37
(15)	M33 113	Federal Reinsurance	\$ 244.67
(16)	N36 Contrato Número	Plan Liability	\$ 131.68
(17)	D40 Contract 0 0 1	Non Benefit Expenses	\$ 17.91



(18)	D44	Gain/Loss Margin	\$ 2.66
	'Script Projection' tab		
(19)	sum(F11,F15,F23,F27)	Generic Scripts	36,520
(20)	sum(F12:F14,F16:F18,F24:F26,F28:F30)	Brand Scripts	9,956
Gain Margin PMPM for Dual Eligibles (if available) Part C BPT		Part C BPT 'MA Req Rev' tab	\$ (114.25)
	'MA Req Rev' tab		
(1)	R123	Medicaid Projected Revenue	\$ 32.71
(2)	R124	Medicaid Proj Cost not in bid	\$ 150.93

Jose Mercado Chief Financial Officer

Luis A. Torres Olivera President & CEO Frank Torres
Chief Compliance Officer

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FINANCIAL CERTIFICATION Appendix I

Contract Year Medicare Platino 2024

Date: June 8, 2023

Financial Information

Company Name: HUMANA HEALTH PLANS OF PUERTO RICO, INC.

Contract Plan Number: <u>H4007</u>

Company Plan Name: Humana Gold Plus SNP-DE H4007-030 (HMO D-SNP)

Company Plan Number: 030

Part C BPT

		'MA Req Rev' tab		
(1)	F67		Plan Cost Sharing	\$ 1.87
(2)	G67		Actual Cost Sharing	\$ -
(3)	H98		Net Medical Expenses	\$ 778.76
(4)	H106		Non Benefit Expenses	\$ 208.28
(5)	H107		Gain/Loss Margin	\$ (98.72)
		'MA Bnchmk' tab		
(6)	F12		Non-DE# Member Months	-
(7)	G12		DE# Member Months	58,367
(8)	E14		MSP Adjustment	0.14%
(9)	F15		Non-DE# Risk Score	1.71
(10)	G15		DE# Risk Score	1.71

Part D BPT

'Standard Coverage' tab

(11)	H11		Risk Score	1.86
(12)	L11		LIS Member Months	-
(13)	L12		Non-LIS Member Months	59,596
(14)	I33	TRAC	Cost Sharing	\$ 189.58
(15)	M33 (1)	STRACION O	Federal Reinsurance	\$ 244.35
(16)	N33 (M)	120	Plan Liability	\$ 130.73
(17)	D40 4 CM	ntrato Número	Non Benefit Expenses	\$ 17.92
(18)	D44		Gain/Loss Margin	\$ 2.65
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	'Script Projection' tab		
(19)	sum(F11,F15,F23,F27)	Generic Scripts	142,094
(20)	sum(F12:F14,F16:F18,F24:F26,F28:F30)	Brand Scripts	38,720
Gain Margi	n PMPM for Dual Eligibles (if available)	Part C BPT 'MA Req Rev' tab	\$ (98.72)
Part C BPT			
	'MA Req Rev' tab		y
(1)	R123	Medicaid Projected Revenue	\$ 32.71
(2)	R124	Medicaid Proj Cost not in bid	\$ 150.97

Jose Mercado Chief Financial Officer Luis A. Torres Olivera President & CEO Frank Torres Chief Compliance Officer