

Humana®



IMPACT

REPORT

2025

Volunteers paint a city mural in Louisville, Kentucky, on Humana Community Day.

Humana's impact

As Humana approaches its 65th anniversary in 2026, we're not just celebrating our legacy, we're shaping the future of healthcare. Today, Humana is a healthcare services company focused on helping people achieve their best health by making healthcare simple and affordable.

We focus on building meaningful connections between patients, providers and communities; fostering shared accountability and driving measurable improvements in health outcomes for the people we serve.



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Introduction

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Letter from Humana's CEO

Humana exists to help people achieve their best health. That starts with trust, connection, and creating a simpler, consumer-centric healthcare experience. It means a deep focus on outcomes, prevention, and allowing clinicians the time to truly listen so they can respond to patients' needs.

This year's Humana Impact Report shares how we're delivering on that promise: asking the people we serve what matters most, simplifying their path to care, and creating a more personalized healthcare experience each step of the way.

At the heart of our progress is value-based care. This proven approach is central to CenterWell and across Humana, where we're removing barriers and prioritizing coordinated, whole-person support. By focusing on patient health outcomes, we're helping more people experience what's possible when healthcare is built around their needs.

Health is also more than the sum of medical care and treatments; it's also about the social and environmental factors that allow people to thrive. Our strong community partnerships keep that fuller picture in view, empowering many of our patients to find the connection and community that keep them healthy.

But this isn't the only way we advance community. This year, more than 12,000 employees gave back through Humana Community Day, our company-wide day of service. We also introduced our first-ever community impact trip to the Dominican Republic, where a team of employees provided care to more than 500 patients — an inspiring example of our purpose in action.

When you put it all together, I'm proud of what we've accomplished. Thank you to our employees, partners, and communities for your trust and collaboration. Every year, we're doing more to create a healthcare experience that puts consumers first. I can't wait to see where our mission takes us next.



Jim Rechten, President & CEO
Humana Inc.



About this report

How this report was prepared

The Humana Impact Report covers our economic, social and environmental endeavors in 2025 and highlights our efforts to help people achieve their best health. Structured around our impact platform and five measure categories, it reflects our environmental, social and governance (ESG) strategy in areas where we can drive meaningful change. The pages that follow discuss our ESG approach, commitments and progress against certain priorities.

Published April 3, 2026, this Humana Impact Report is our 14th reporting publication. Estimated quantitative disclosures are identified, and we will update the report to clearly indicate changes when confirmed data is available.

Content and topic boundaries

The terms “we,” “us,” “our,” the “Company” and “Humana” collectively refer to Humana Inc. and its subsidiaries. Boundaries for this Humana Impact Report extend to our facilities located in the United States (and certain U.S. territories) and include our insurance and CenterWell® business segments. Refer to our most recent [Form 10-K](#) for additional information about our corporate service functions, operations, business segments, consolidated financial reporting and subsidiary listing.

Reporting is consolidated at the Humana Inc. level consistent with our management of corporate policies, processes, systems, practices and functions that are integrated and implemented across our enterprise.

This Humana Impact Report covers the period from January 1, 2025 through December 31, 2025, unless otherwise noted. Along with our [SEC filings](#), these pages report all ESG issues we determine are material to our business, as described in “Our approach to ESG materiality” that follows.

Humana welcomes your feedback on this information. Please send your questions or comments to ESG@humana.com.



Disclosures and assurance

Humana’s 2025 Impact Report features activities, progress, measures and performance data for how Humana is simplifying care, advancing health equity, addressing needs in our communities and driving sustainable change with shared value.

Qualitative and quantitative disclosures within this Humana Impact Report were developed through a rigorous internal review process involving senior leadership and cross-functional business partners, which were then validated internally using established verification standards. The Humana Impact Report was submitted to the Nominating, Governance & Sustainability Committee of our Board of Directors for review and approved for publication by our ESG Steering Committee.

Some of our environmental data for the year ending December 31, 2025, was in process of third-party assurance at the time of publication. When Limited Assurance is received from Schneider Electric (“Schneider”), an independent third-party contracted by us to conduct verification in accordance with International Organization for Standardization (ISO) 14064-3, we will publish the supporting Statement of Assurance. Please refer to the Appendix to this report for the Statement of Assurance by Schneider.

We have also mapped our ESG disclosures to frameworks established by the Sustainability Accounting Standards Board (SASB): Managed Care Standard; the Task Force on Climate-Related Financial Disclosures (TCFD); the Global Reporting Initiative (GRI): Universal Standards and Topic Standards; and the United Nations Sustainable Development Goals. See the tables within the Appendix to this report for these disclosures.

Measuring **our impact**

Our impact platform

For each person

We make it simpler for people to reach their best health



For the health-care system

We help build more sustainable business, governance and healthcare practices



For each community

We work to advance health equity and population health



For the environment

We invest in the health and sustainability of our world



Humana's ESG measures

We've established five key measure categories that support and shape our environmental, social and governance (ESG) platform. Within each category, qualitative and quantitative factors track, measure and report our performance in achieving strategic business goals, supporting sustainable practices and improving health outcomes.



Access to healthcare



Data privacy and protection



Environmental impact



Product quality and safety



Talent and diversity

ESG materiality

We understand our stakeholders consider many topics important. Our approach to prioritizing material topics considers how strongly topics are connected to our business strategy, the overall effect on our performance, and the significance of our impact to stakeholders. We then invest our resources where it makes sense for our business and yields the greatest collective impact.

Stakeholders and engagement

At Humana, we value our stakeholders’ opinions and recognize intersections between our interests and those of our stakeholders. We deploy proactive outreach to our stakeholders through a variety of mechanisms—including surveys, interviews and open-forum discussions—to solicit their insight on a variety of topics and issues relevant to our business. We use stakeholder feedback to help inform and advance our business strategies, operations, services and products. We continued this practice in 2025, which helped to inform the content provided in this report. Please refer to our Proxy Statement for a discussion of meetings held in 2025 with some of our investors/stockholders.



Our approach to ESG materiality

We approach ESG materiality through the lens of material topics with a direct connection to our industry, the geographies where we operate, the impacts within our value chain and our strategic business endeavors.

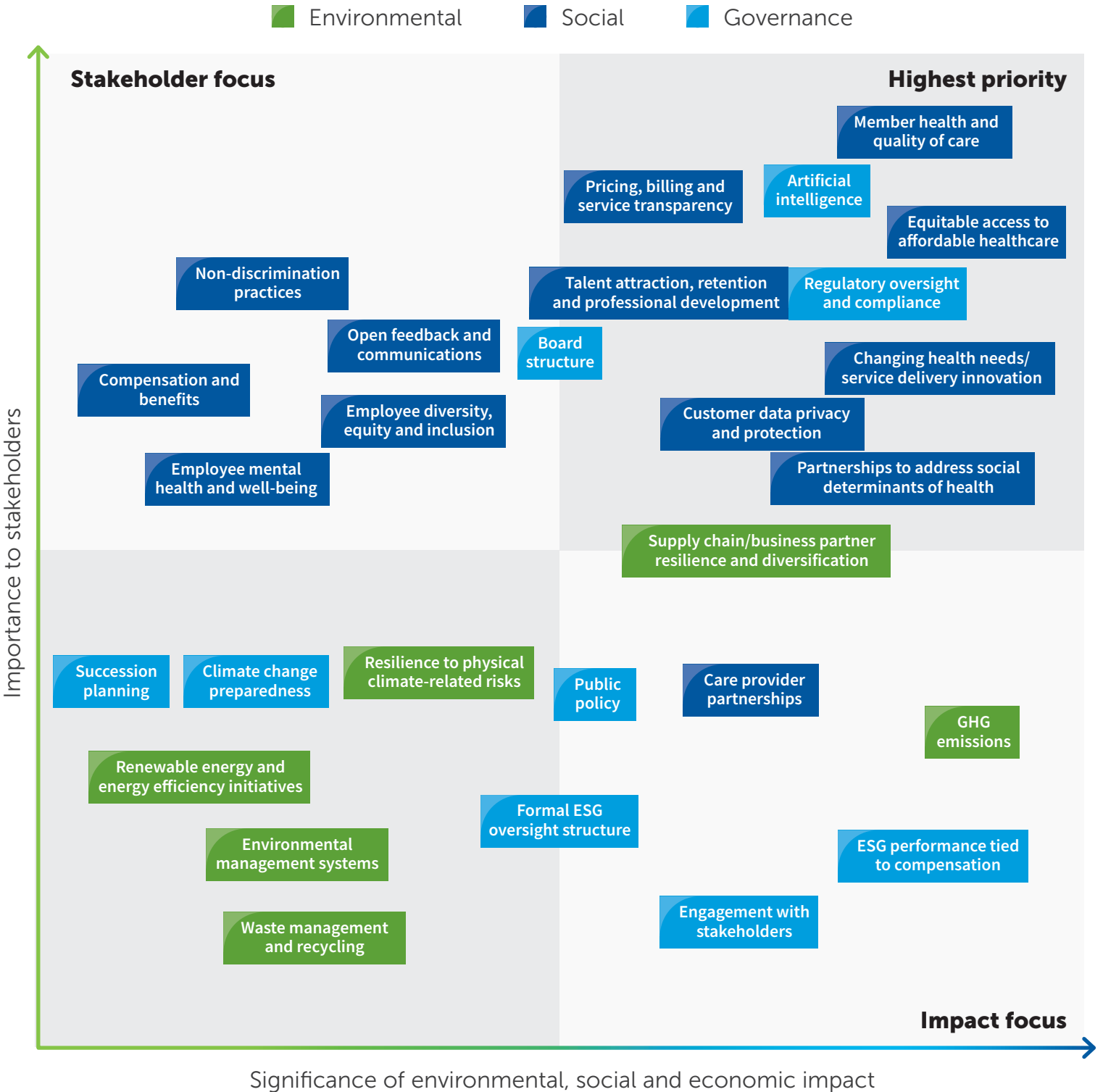
Every 3-5 years, we engage a third party to perform a comprehensive material topic assessment to ensure our ESG priorities remain aligned with our business strategy and stakeholder interests. During this rigorous process, stakeholder groups are interviewed and surveyed for their input and perspective on a wide range of topics and issues related to our business. Topics are then compiled, aggregated, standardized and further refined to ultimately reflect only those topics deemed most impactful to our stakeholders and significant to our business as illustrated in our ESG materiality matrix. The process may culminate in either a partial or full refresh of material topics or reaffirm existing ESG priorities. Additionally, we have an established process for annual evaluation of material topics and corresponding ESG materiality matrix by our ESG Steering Committee. This review considers our existing enterprise risk management framework as well as ESG data factors commonly analyzed by proxy advisory firms; prominent disclosure frameworks like SASB, GRI and TCFD; third-party rating and ranking organizations along with market research agencies.

In 2022, we completed the comprehensive ESG material topic assessment resulting in a refreshed materiality matrix identifying ESG topics that we and our stakeholders consider most important to our business. In subsequent years, we followed the annual review process with our ESG Steering Committee and presented their recommendations to our Nominating, Governance & Sustainability Committee.

For 2025, the ESG Steering Committee determined no revisions were necessary for this reporting period as material topics previously identified remained relevant.

ESG materiality matrix

The following matrix illustrates material topics we have determined have the most significant impact on our business and stakeholders. More information about our approach to ESG materiality is found on page 8 of this report.



2025 summary

Advancing whole-person health through simplified, integrated and affordable care

8M+

MA & PDP members supported through simplified coverage.

2.5M

members supported with affordable stand-alone PDP access.

854,200

LI NET enrollments enabled immediate access to medications.

100,600

additional patients served through CenterWell Senior Primary Care® in 2025.

Driving better health outcomes and community impact

196,949

distinct users accessed Humana Community Navigator® to find free or reduced-cost support services.

815,500

social determinants of health screenings completed among Medicaid members to identify barriers impacting care access.

1.6M

lives touched through service projects on Humana Community Day.

8,440

vaccines administered by CenterWell Pharmacy® across 367 community vaccination clinics.

Innovating for a sustainable future

90%

of Medicaid members attributed to value-based providers in 2025.

24%

fewer inpatient admissions for Medicare Advantage members in value-based care compared to Original Medicare.

80%

of CenterWell Home Health® providers earned 4.0+ Star Rating vs. the home health industry avg. of 35%.

14%

reduction in Scope 1 & 2 greenhouse gas emissions from the base year.

Empowering a future-ready workforce

67,060

employees power Humana's purpose every day.

7-year

average employee tenure reflects experience and continuity.

87%

of employees say they intend to stay with Humana for at least the next 12 months.

\$23M+

invested in education and upskilling.

For each person

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FOR EACH PERSON:

Top takeaways

67,060

employees power Humana's purpose every day.



Earned the **American Medical Association's Joy in Medicine®** recognition for advancing clinician well-being and reducing burnout—affirming our commitment to supporting the people who care for others.



Once again named a **Certified™ Great Place to Work®**, based on employee feedback.

8M+

seniors supported through Humana's MA and PDP offerings.



CenterWell Pharmacy vaccination clinics expanded access to preventive care, delivering

8,400+

vaccines via community-based clinics.

905,500+

Medicaid members were screened for social determinants of health, helping identify and address barriers that impact long-term health and well-being.



We exist to help people achieve their best health. That means simplifying their path to care.

To care for members, patients and employees, we work to understand their individual needs and support them as a whole person with empathy and compassion. Through strong value-based partnerships and a customer-first approach, we work with our patients, caregivers, providers and communities to ensure they have access to the right care, at the right time, at an affordable price. By removing barriers and making care easier, we work to deliver better health outcomes.

Simplifying the path to care

Our commitment is evident in our Medicare Advantage (MA) and prescription drug plans (PDPs), which deliver consistent coverage and peace of mind for more than **8 million seniors** nationwide. These plans are designed to make healthcare simpler, personalized and affordable. In 2026, more than 80% of Humana MA members will be in plans with consistent and reliable coverage that reflect this commitment. Our [2026 plans](#) are also designed to be clear and easy to understand, with standardized options and straightforward plan materials to help members feel confident about their decisions. Our plans reflect input from thousands of members to ensure the features they value most remain in place.



Highlights of Humana’s 2026 MA plans:



Robust coverage: All non-special needs MA plans include dental, vision and hearing coverage with \$0 copays for preventive dental services.



\$0 preventive care: \$0 copays for in-network preventive services, including screenings for breast cancer, colon cancer and bone density.



Primary care and pharmacy savings: Nearly all non-special needs MA plans include \$0 in-network copays for primary care provider (PCP) visits and Tier 1 prescriptions.



Seamless pharmacy access: All MA and PDP members have the option to use CenterWell Pharmacy® to support safe and on-time deliveries by mail.



Expanded access: MA plans are available in 46 states and Washington, D.C., covering 85% of U.S. counties.

Learn more about Humana’s 2026 MA and PDP offerings [here](#)

Improving access to prescription drug coverage

Prescription drug coverage is another essential component of Humana’s approach to whole-person care. Our PDPs are designed to ensure our MA members and our **2.46 million stand-alone PDP members** have uninterrupted, affordable access to the medications they need. Through our Medicare PDPs and Limited Income Newly Eligible Transition (LI NET) program, we help people manage their medications confidently and avoid gaps in treatment.

Highlights of Humana’s 2026 PDPs:



Lower costs for beneficiaries: Approximately 83% of PDPs feature a premium decrease.



Three distinct plan options to meet a variety of needs: Members can choose between budget-conscious coverage, plans with robust generic drug value or coverage for those seeking a broad formulary.



\$0 copays for many common generic medications, no deductibles on select tiers and access to an extensive national network of pharmacies.



Seamless access via the option to use CenterWell Pharmacy® to support safe and on-time home deliveries.

Learn more about Humana’s 2026 PDPs [here](#)



LI NET Program

Humana serves as the national administrator for LI NET, enabling real-time enrollment and point-of-sale coverage at pharmacies across the country.

What is it?

Temporary prescription drug coverage for people newly eligible for Medicare and the Low-Income Subsidy (LIS).

How does it benefit people?



Immediate access to prescribed medications



Open formulary covering all Part D drugs



Point-of-sale enrollment directly at the pharmacy counter



Retroactive coverage for up to 36 months of prior prescriptions

What the 2025 data shows

854,200

total member enrollments as of December 31, 2025

788,000

auto-enrollments completed through Centers for Medicare & Medicaid Services (CMS) systems

66,200

point-of-sale enrollments, demonstrating continued effectiveness of LI NET’s real-time access to coverage at the pharmacy counter and alignment with outreach efforts

Breaking down barriers to healthcare access

We are committed to helping people achieve their best health regardless of geography, background or circumstances. We believe health should be fair, supported and within reach for everyone. That’s why we work to remove obstacles that stand in the way of quality care. Through targeted programs, products and resources, including CenterWell®, our healthcare services business, with **62% of its primary care centers in underserved communities**, we expand access and support so every person can connect with the resources they need.

Supporting whole-person needs

Every person’s health journey is unique and can be impacted by a variety of environmental factors. Through our person-centered approach for our Medicaid and Medicare members’ programs, we identify and address social and structural factors that influence health outcomes, including food insecurity, housing, transportation and financial strain.



905,500+

Social determinants of health (SDOH) screenings nationally among our Medicaid members

Humana Healthy Options Allowance®

allows eligible members on select plans to use a single spending card for approved items that support well-being—from groceries to over-the-counter products, utilities, rent and transportation. This flexibility helps people make choices that fit their current lifestyle while staying healthy at home and in their communities.

Humana Community Navigator®

is an online tool that connects anyone, regardless of insurance carrier, to free or reduced-cost community resources. The platform, powered by findhelp, creates a seamless network of support across multiple access points. Humana employees can refer members and log referrals directly on their behalf; clinicians can connect members and patients to local community programs and members can self-refer to meet their health-related social needs. The platform offers access to community resources in the member’s preferred language with flexible communication options like text, email or print.

Together, these capabilities break down barriers, close health gaps and empower each person to achieve their best health.

Humana Community Navigator connections made:

196,900

Distinct community site users

162,100

Unique members referred

1.84M

Searches made, including staff site searches and community searches

10,200

Unique sessions from the HCN Reference Tags

9,000

Unique users from the HCN Reference Tags



Advancing Medicaid coverage through Humana Healthy Horizons

As we simplify access to care for millions of seniors with our Medicare Advantage plans, we are equally dedicated to supporting individuals and families with Medicaid through Humana Healthy Horizons®. Humana’s Medicaid plans are designed to break down barriers and connect members to vital resources to empower them to live healthier, more secure lives. Humana Healthy Horizons integrates physical health, behavioral health, drug coverage, long-term care and social services to improve outcomes and close gaps for people who need it most.

With over two decades of Medicaid experience, Humana partners with states and providers to strengthen behavioral health access, promote preventive care and address social needs. In 2025, our contract renewals and new state implementations continued to reinforce our role as a trusted Medicaid partner.

Learn more about Humana Healthy Horizons [here](#)

Humana Healthy Horizons year in review

- 10** Humana Medicaid states (FL, IL, IN, KY, LA, OH, OK, SC, VA, and WI)
- 1.48M** Humana Medicaid members
- 1** New state implementation

Providing plans for military families





Caring for those who serve is a privilege that guides Humana’s partnership with the Department of Defense. Through Humana Military, a wholly-owned subsidiary of Humana dedicated to serving the military, we administer the TRICARE contract for the East Region, which connects service members, retirees and their families to high-quality, coordinated care that supports their readiness, resiliency and overall well-being.

24 states and Washington D.C.

4.5M military beneficiaries served

Humana is also committed to meeting the unique needs of veterans. Our [USAA Honor Giveback](#) plans, co-created with USAA, provide flexible benefits, strong mental health support and access to non-VA providers.

Highlights of the 2026 Humana USAA Honor Giveback plans:

-  **\$0 Copays** for in-network mental health services, virtually and in person
-  **\$0 Copays** for in-network primary care visits
-  **Benefits** Dental, vision and hearing coverage
-  **Availability** in 2,541 counties in 46 states and Washington, D.C.

Humana also supports veterans through initiatives like Face the Fight, which addresses veteran suicide, and Uniting for Veterans, a national partnership with the Veterans of Foreign Wars (VFW) that addresses food insecurity and other social needs that impact veterans.

Learn more about the Humana USAA Honor Giveback plans [here](#)

Delivering innovative, whole-person care

Humana’s commitment to whole-person care is exemplified through CenterWell®, our healthcare services business. As the nation’s largest provider of senior-focused primary care, a leading provider of home health care and a trusted pharmacy partner, CenterWell delivers integrated, proactive and personalized care that addresses the physical, emotional and social needs of seniors through coordinated teams of clinicians, pharmacists and caregivers.

Transforming primary care for older adults

CenterWell Senior Primary Care® and Conviva Senior Primary Care centers provide proactive, whole-person care for older adults with complex needs that result in 50% more time spent with their care teams compared to traditional models, a 30% decrease in avoidable hospital admissions and higher patient satisfaction scores.

Expanding access to care

In 2025, CenterWell opened six new centers and acquired The Villages Health, adding eight primary care centers, two specialty centers, and **55,000 patients** to the CenterWell network. With nearly **350 clinics** across **15 states**—including Walmart co-locations—our centers make care more accessible and culturally responsive.

Advancing quality and accessibility

CenterWell is also redefining quality care by expanding how and where it’s delivered. In 2025, we strengthened our ability to close care gaps, improve outcomes and reach more patients through initiatives that advance clinical excellence and access. This includes adding in-center cameras to conduct diabetic retinopathy screenings, enabling early identification and management of eye disease without requiring a separate specialist visit.



10,200 new IPA patients served

Our Independent Physician Association (IPA) helps independent physicians and practice groups adopt CenterWell’s value-based care platform to simplify business operations and spend more time with patients. These partnerships extend high-quality care to more communities.

We also launched CenterWell Medical Group™ a new virtual-first offering designed to deliver primary-care-like services for patients who do not have a primary care physician—or who need support between visits—helping ensure timely, connected care whenever and wherever it’s needed.

In Florida, Nevada and Houston, Texas, embedded specialty care brings high-quality specialists directly into our centers, which reduces outside referrals, making treatment faster and more connected for older adults with complex needs. We also expanded access to e-consults and high-value specialty partners in areas such as oncology to further support timely, coordinated specialty care.

Driving AI innovation

In 2025, CenterWell® piloted AI-powered ambient listening in select CenterWell Senior Primary Care® centers to help increase the time physicians spend with their patients. This technology securely listens, transcribes and drafts medical notes, which improves documentation accuracy and strengthens clinician-patient interactions.

68.6%

of clinicians spent less time on the computer during a patient visit

Source: Clinician Experience with Ambient Documentation in Senior Focused Primary Care Setting—Descriptive Analysis

Learn more about the results of the pilot and the impact on clinicians [here](#)



Enhancing care through home health and specialty services

CenterWell meets patients where they are—at home or in outpatient settings. Through CenterWell Home Health®, OneHome® and our new Outpatient Rehabilitation service line, patients receive skilled nursing, therapy and rehabilitation services to help them recover safely and maintain their independence. Our integrated model connects primary care, home health, pharmacy and post-acute services for seamless, personalized care. In 2025, CenterWell expanded outpatient rehabilitation services to increase access to lower-cost therapy options for non-homebound Medicare Part B patients—helping more individuals receive the care they need in the setting that works best for them.

“

When we take the time to really get to know and understand our patients and surround them with a multi-faceted care team in facilities designed specifically for seniors, we can provide more consistent, personalized and effective care to help those we serve achieve their best health.

-Reneé Buckingham, President of Humana’s Primary Care Organization

”



Addressing complex needs with specialized programs

CenterWell Home Health advances the quality of home-based care through clinical programs that help patients recover safely, manage chronic conditions and maintain independence. Our specialized programs—PRIME Wound Care®, Daily Difference with Diabetes™, Safe Strides® and CenterWell Keeping Hearts at Home® address some of home health patients' most common and complex needs.



PRIME Wound Care®

Delivers wound care, treatment and management to promote healing and prevent complications.

Daily Difference with Diabetes™

Helps patients manage diabetes through personalized care plans and education accredited by the American Diabetes Association (ADA).

CenterWell Keeping Hearts at Home®

Supports patients with heart failure by managing their health at home to reduce hospital readmission and improve heart health.

Safe Strides®

Enhances mobility and works to prevent falls to keep patients safe at home while promoting safety and independence in daily activities.



Simplifying medication management with integrated pharmacy solutions

CenterWell Pharmacy® ensures reliable, convenient access to medications through home delivery, over-the-counter fulfillment and retail locations. Pharmacy teams coordinate closely with physicians and care teams to simplify treatment and improve outcomes and make medication management easier, safer and more personal. Patients using CenterWell Pharmacy have **2.7%** higher medication adherence and **\$543** lower total medical costs compared to other pharmacies.¹ By having pharmacists as part of the care team, CenterWell® ensures that treatment is coordinated, personalized and focused on achieving the best possible health outcomes.

¹ Based on 2024 year-end data.

Highlights of CenterWell Pharmacy services

147,700 direct-to-consumer patients served

2.16M mail-order customers served

42.45M mail-order prescriptions filled

37 retail locations co-located with provider groups to dispense prescriptions

Expanding preventive care and community support

CenterWell Pharmacy extends access to essential medications and preventive care through community vaccine clinics and prescription donation programs. In 2025, CenterWell administered **8,440** total vaccines at **367** vaccination clinics, which helped remove barriers to care and support healthier communities.



Elevating specialty care with Centers of Excellence

CenterWell Specialty Pharmacy® delivers expert care for patients with chronic or complex conditions like cancer, multiple sclerosis and rheumatoid arthritis. At the heart of this approach are our four disease-specific Clinical Centers of Excellence (COEs) — dedicated teams of pharmacists, nurses and technicians with specialized expertise. The COEs provide personalized, 24/7 guidance and access to more than **240** specialty limited distribution drugs (LDDs) that help patients stay on therapy, manage side effects and feel more confident about their care.

Highlights of CenterWell Specialty Pharmacy services

191,100 customers served, an increase of 61% year-over-year

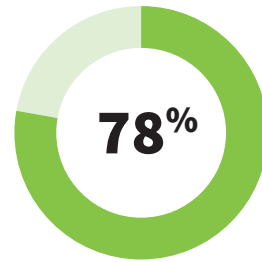
1.18M specialty prescriptions dispensed

Elevating the employee experience

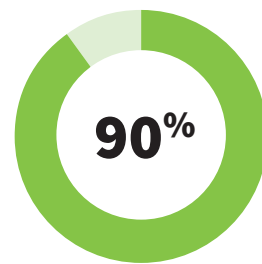
Our commitment to better health—across our insurance offerings and CenterWell services—relies on the dedication of our people. Every day, our nearly **67,060 employees** bring Humana’s purpose to life—empowered by a culture that values growth, well-being and connection. This strong sense of purpose is reflected in the depth of experience and continuity our employees bring, with an **average tenure of seven years**. Because our employees feel inspired and part of something bigger, their impact on those we serve is amplified.

This commitment goes beyond the workplace with programs that foster inclusion, well-being and community engagement—such as paid Volunteer Time Off (VTO), which enables employees to give back to causes they care about. In 2025, employees dedicated approximately **321,300 hours** to nonprofit and local service organizations. **17,940 employees** used their VTO hours, contributing over **129,300 hours** of paid time off to causes they care about—reflecting our shared values of service and compassion.

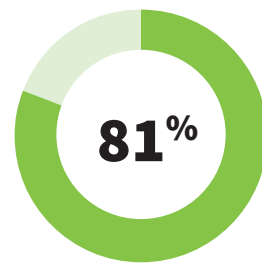
Our integrated focus on culture, engagement and well-being empowers every employee, regardless of role or location, to grow, thrive and realize their full potential.



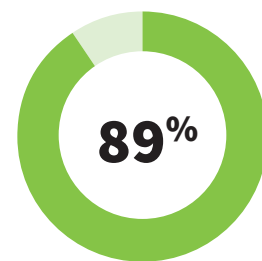
of employees say they feel they belong at Humana



believe the work they do here is meaningful to them



of employees believe everyone has an equal chance to succeed regardless of individual differences like age, gender, ethnicity/race, religion, etc.



say their teams demonstrate cultural awareness and respect for individual differences

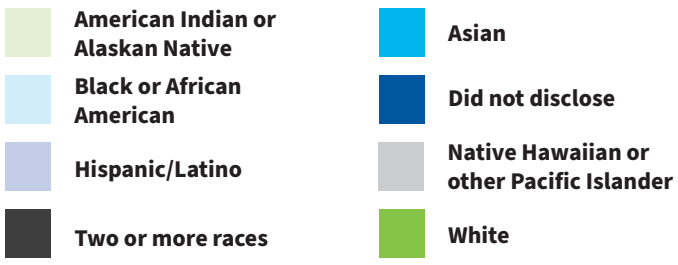
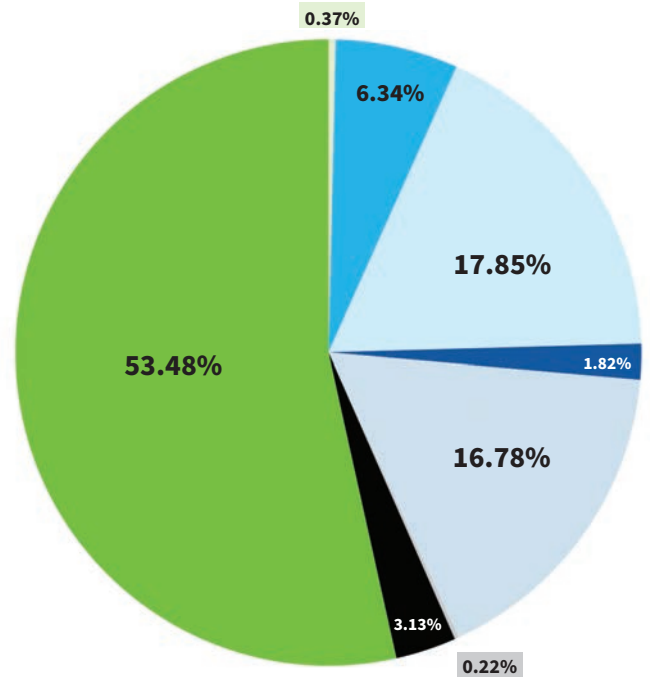
Fostering inclusion through representation, learning and leadership

Humana fosters a culture of inclusion and belonging, which creates a workplace where every employee feels seen, valued and empowered to contribute while supporting our fair and inclusive hiring approach.

Building a diverse and inclusive workforce

Understanding who we are is the first step toward building a workforce that reflects the communities we serve. Through Humana’s voluntary self-identification process, employees can share information about their backgrounds and experiences. This foundational understanding also guides how we fairly attract and hire talent, ensuring our workforce reflects the communities we serve. In 2025, we continued our transparency by publishing workforce representation data, which included our annual EEO-1 report.

 Our continued focus on equitable pathways helps us develop and attract talent that reflects and strengthens our culture and business.



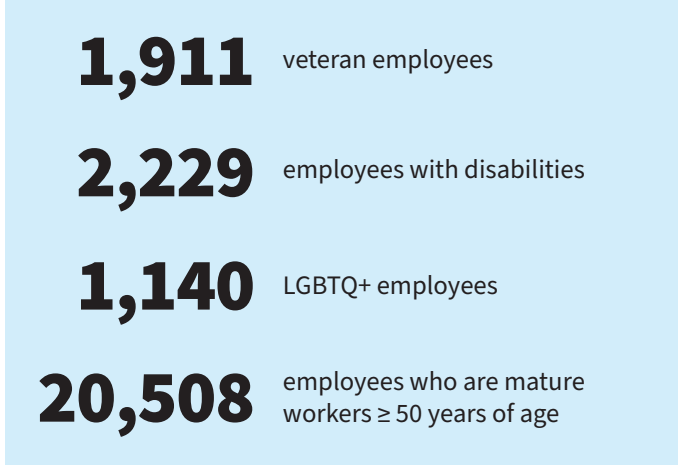
BIPOC comprise:

- 45%** of employees
- 33%** of management
- 25%** of senior leaders

Women comprise:

- 76%** of employees
- 76%** of management
- 51%** of senior leaders

Management includes: Supervisor, Manager and Associate Director. Senior leaders includes: Principal, Fellow, Director, Vice President, Associate/Market Vice President, Senior Vice President, Segment President, Chief and CEO. (Note: BIPOC collectively includes employees who identify as Black, Indigenous and/or a person of color.)



Hiring and retaining veteran employees

444

military-connected employees hired

22%

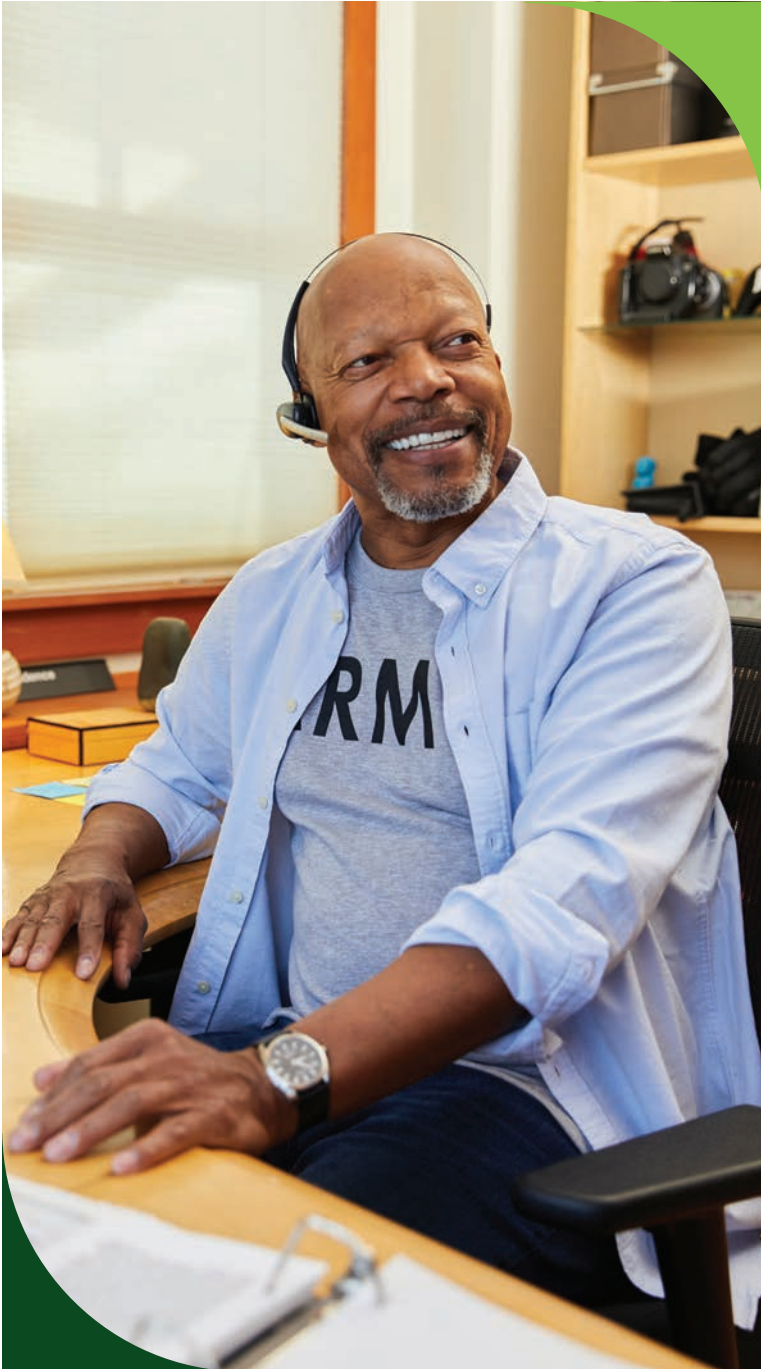
of our hiring commitment in a year

39%

YOY toward our commitment of 2,000 by 2032

2%

average turnover rate for military-connected employees to successfully maintain our retention commitment



Connecting through Network Resource Groups

Humana’s Network Resource Groups (NRGs) connect employees with shared identities and interests in leadership development, community service and cross-functional learning. In 2025, our NRGs also deepened their cultural impact by creating spaces for employees to share lived experiences, build supportive communities, and develop skills aligned with Humana’s business priorities.

Our NRGs continued to transform and grow:

- **ACCESS NRG** connected with Neurodiversity Works, an existing initiative focused on expanding support for neurodiverse employees.
- **GenUs NRG** partnered with Humana Young Professionals, fostering intergenerational development and connection.
- **Women’s NRG** expanded its impact through its support of the Women in Tech chapter, providing networking and training opportunities open to all.
- Our first **NRG Leadership Summit** since 2018 brought together NRG leaders and executive sponsors across the enterprise for two days of strategic engagement, learning and collaboration.
- Longstanding groups including **Caregivers, Pride, GenUs and HAPI** celebrated milestones in membership growth, mentorship and engagement—reinforcing their ongoing impact across the organization.










20,750

of employees participated in at least one of our 10 employee-led NRGs as of December 31, 2025, 5% increase from prior year

12,100+ members as of December 31, 2025, Women’s NRG is the largest

25% growth of employees participating in multiple NRGs with greater intersectional engagement

Humana NRGs

 ACCESS, disability	 Native American & Indigenous
 Caregivers	 Pride, LGBTQ+
 GenUs, multi-generational	 Salute, veterans
 HAPI, Asian and Pacific Islander	 Unidos, Hispanic
 IMPACT, African-American/Black	 Women’s

Elevating inclusive learning and cultural celebrations

Humana encourages inclusive learning and cultural events to build understanding and relationships across the organization. In 2025, employees dedicated over **5,100** hours to optional inclusive learning and celebration events like Martin Luther King Jr. Day, International Women’s Day and Juneteenth. **96%** reported a positive experience, **94%** learned something new and **93%** improved their cultural competency.

Advancing leadership support

Support from senior leaders ensures diversity and inclusion are woven into the fabric of our organization. This support strengthens our culture, fosters inclusion and delivers measurable business outcomes.

In 2025, we restructured our enterprise-level leadership council and introduced a new committee to strengthen alignment between diversity and inclusion efforts and our broader business strategy. The refreshed council is driving initiatives focused on culture, belonging, early talent strategy and sustainability—ensuring these priorities influence decisions across the enterprise.

Listening and responding to employee feedback

Humana is committed to continuous listening, staying closely connected to our employees—through surveys, focus groups and regular leader check-ins—to ensure our initiatives meet our employees’ needs. This ongoing dialogue informs our initiatives, builds trust and strengthens a culture where employees feel heard and valued. Every voice plays a role in shaping our shared success.

What our employees are saying

84%

of employees were highly engaged, the 74th percentile, up from 83% percent favorable in 2024, according to 2025 Annual Engagement Survey results.

82%

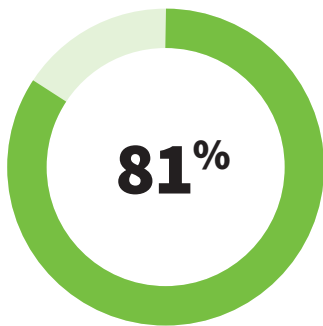
of employees believe Humana is committed to creating a healthy work environment.

83%

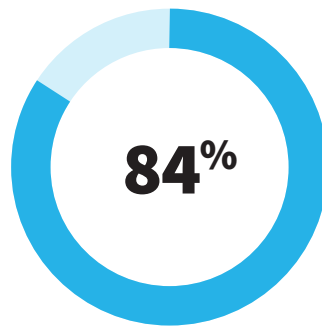
of employees engaged in continuous listening surveys.

79%

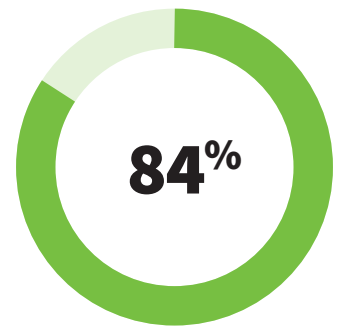
of Humana employees completed the 2025 Annual Engagement Survey



of Humana employees would recommend Humana as a great place to work.

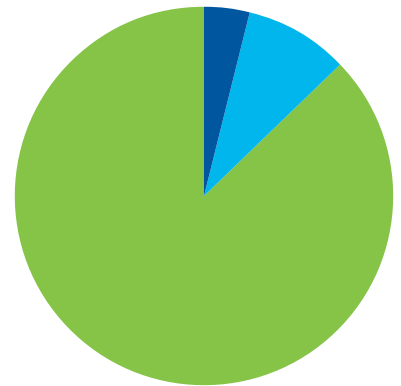
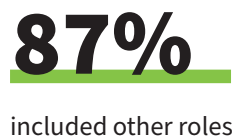
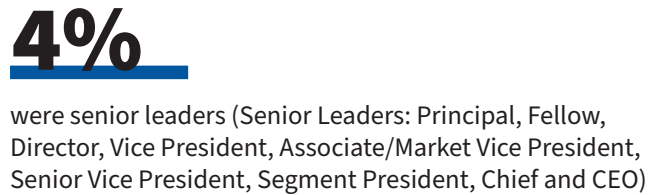
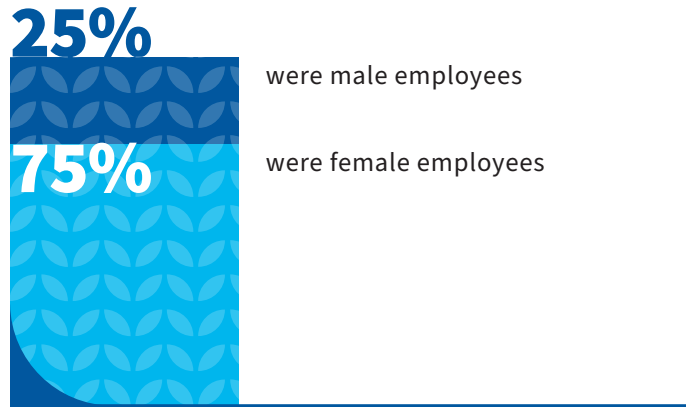
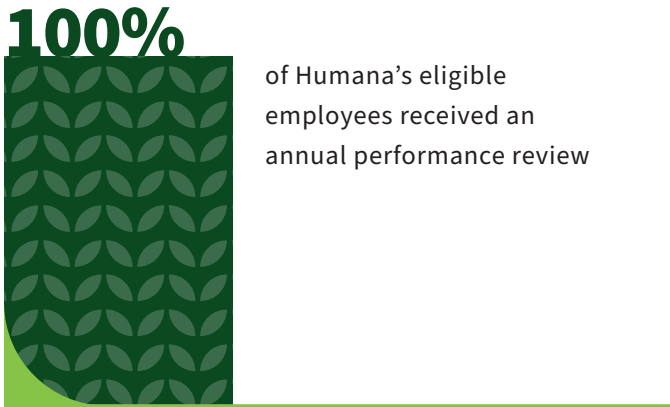


of Humana employees are proud to work for Humana.



of Humana employees believe their job makes good use of their talents, skills and abilities.

Humana also reinforces accountability through annual performance reviews to ensure clarity on expectations and opportunities for growth. In 2025:



For retaining employees, Humana's voluntary turnover rate was 13.8% in 2025, a decrease from 14.4% in 2024.



Recognizing contributions and achievements

Building on a foundation of feedback and accountability, Humana prioritizes recognition as a key driver of engagement. In 2025, we launched a new enterprise-wide recognition platform to celebrate achievements, service anniversaries and life events. Early engagement results show—**58%** of employees have actively engaged with the platform, reflecting a workplace where care inspires recognition and curiosity sparks new connections.



Prioritizing employee health, financial security and support

Supporting employee growth goes hand-in-hand with prioritizing well-being. Our programs and resources empower employees to thrive at work and beyond, fostering a culture where health, balance and financial security are integral to employee experience.

Food as Medicine program

Within the first 90 days of the program:

-4% = average weight change of employee participants in our virtual, nutrition therapy clinic program for type 2 diabetes, prediabetes and weight management

19% reversed their prediabetes diagnosis by lowering their A1c below 5.7%

22% of diabetes medications eliminated

Emergency Savings program

77% of eligible employees have enrolled in the Emergency Savings program through the end of 2025.

99% of those enrolled remain enrolled and continue to put away savings from each paycheck.

99% of those enrolled receive matching funds from Humana on each paycheck



Well-being highlights

84% of employees engaged with our Well-being Rewards platform

Our 100 Day Dash celebrated its 14th year with strong participation:

Nearly 22,900 employees—including a record 4,000 first-time participants—took 16.50 billion steps and walked over 8.28 million miles that earned them seeded donations to nonprofits of their choice, an additional \$16,000 contributed to Meals on Wheels by the Humana Foundation.





Parental leave

49,046

employees were entitled to paid parental leave:
36,328 females | 12,718 males

1,407

employees took parental leave:
855 females | 552 males

1,260

employees returned to work during the reporting period after parental leave ended
757 females | 503 males

1,167

employees returned to work after parental leave ended that were still employed 12 months after their return to work
781 females | 386 males



Return to work rate and retention rate of employees who took parental leave, by gender:

100% females | **100%** males



Delivering competitive compensation, benefits and pay equity

A fair and transparent workplace is essential for employee trust and engagement. Humana advances pay transparency and equity to ensure compensation decisions are unbiased, competitive and aligned with our commitment to support every employee’s success. Since 2024, all job postings have included pay ranges.

We conduct annual pay equity/gap analyses and reviews to confirm that pay decisions are based on performance and contributions—not race, gender or other non-relevant factors. We also regularly benchmark our pay to the external market where we compete for talent to ensure our compensation remains competitive. In addition, we adhere to established salary ranges, thereby minimizing the risk of potential pay gaps. Leaders receive training to make unbiased pay decisions. Salary history questions have been eliminated to reduce bias.

Humana’s Total Rewards program complements these efforts by providing competitive compensation, robust benefits and resources that support health, financial security and work-life balance. This allows employees to care for themselves and their families while supporting long-term growth and stability.

While our compensation and benefits programs vary by location, employee type and business, they generally include:

Financial

- Competitive base pay, with additional incentive, supplemental, and/or recognition pay
- 401(k) retirement savings plan with company match program
- Health savings account (HSA) and flexible spending account (FSA) contributions
- Life insurance
- Short- and long-term disability insurance
- Tuition assistance program
- Comprehensive financial well-being programs and support, including an employer-sponsored personal emergency savings account with matching funds from Humana
- Charitable gift matching program

Life

- Paid time off, paid holidays, paid volunteer time off, and jury duty pay
- Adoption assistance
- Paid parental leave program (6 weeks)
- Paid caregiver time off program (2 weeks)
- Nursing moms program with on-site lactation rooms
- Mental health support, including our robust Employee Assistance Program and Work Life Services
- Employee discount programs and services
- Helping Hands program
- Transit services

Health

- Medical, dental and vision benefits
- Supplemental health benefits
- Long-term care insurance
- Whole-person well-being rewards programs and platform
- Incentives for engaging in well-being programs
- On-site health and fitness centers
- On-site health screenings and vaccinations
- On-demand fitness classes, nutritional education through teaching kitchens, and digital coaching apps

Learning and Development

- Internal and external learning events
- Access to degree and certification programs with tuition assistance





Investing in learning, development and career growth

Helping employees thrive means creating opportunities for continuous learning and development. Through training, mentoring and leadership development, we help individuals develop new skills, pursue meaningful career paths and adapt to evolving business needs. **76% of employees** believe Humana provides them with opportunities for growth and development.

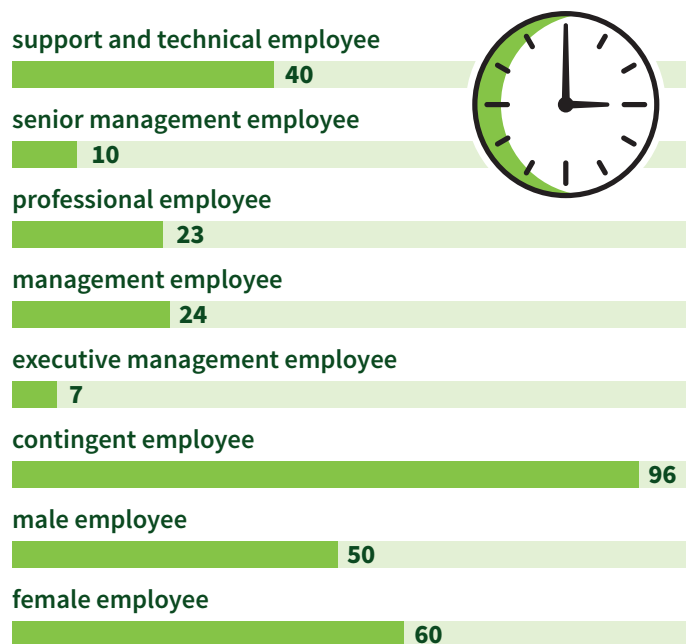
To support employee growth, we modernized performance management with a 5-point rating scale shaped by employee input and best practices. The new rating scale ensures clearer expectations, consistent feedback and transparent conversations that empower employees to identify their strengths and pursue advancement opportunities.


In 2025, we also launched Lead the Way, a program for leaders at every level—from managers to senior executives—focused on building mindsets and behaviors that drive growth, individual development and accountability. Leaders also engage in targeted learning experiences on skills such as talent management, business acumen, feedback and transitioning from individual contributor to people leader.

Investments in learning and development



Hours on average per active full-time employees



 Humana leaders participated in over **2,700 hours** of learning content

Mentoring

4,400 employees engaged in active mentoring relationships at year-end

Upskilling and education

\$23.03 million invested in education support, including tuition assistance, tuition reimbursement, and certifications

6,300 or 10.5% of eligible employees enrolled in a Guild Education Program

333 enrolled in a no-cost RN-BSN program, 79 have graduated

Top 3 fields of study

by Guild programming: Data, Analytics and Statistics, Healthcare and Business Administration

Top 3 Guild courses:

MIT Artificial Intelligence: Implications for Business Strategy Certificate, Project Management Certificate and Professional Coder Certificate



Empowering workforce growth and adaptability

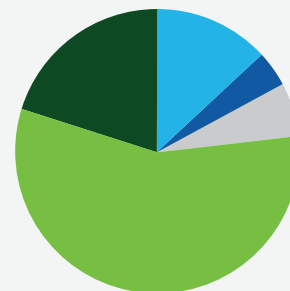
Humana’s ability to help people achieve their best health depends on a workforce that is agile, skilled and supported. As the healthcare landscape evolves, we are investing in strategies that prepare our people—and our organization—for what is next. From flexible workstyles that promote balance and collaboration, to programs that build critical skills and modernize workforce practices, we are creating the conditions for growth, adaptability and long-term success. These efforts ensure every employee has the tools, opportunities and support to thrive today while simultaneously shaping the future of care.



85%

of Humana employees believe they have the flexibility they need to manage their work and personal needs

Employee work styles that work for everyone



- Office: 8,435 or 13%
- Hybrid office: 2,795 or 4%
- Hybrid home: 3,753 or 6%
- Home: 36,101 or 56%
- Field: 13,048 or 20%

Developing workforce capabilities for the future

Our workforce spans clinicians delivering hands-on care, to technologists shaping the future of healthcare, to early career-talent building meaningful paths across the enterprise. By investing in skills, training and career mobility, Humana strengthens its ability to deliver high-quality, person-centered care.

Building clinical talent

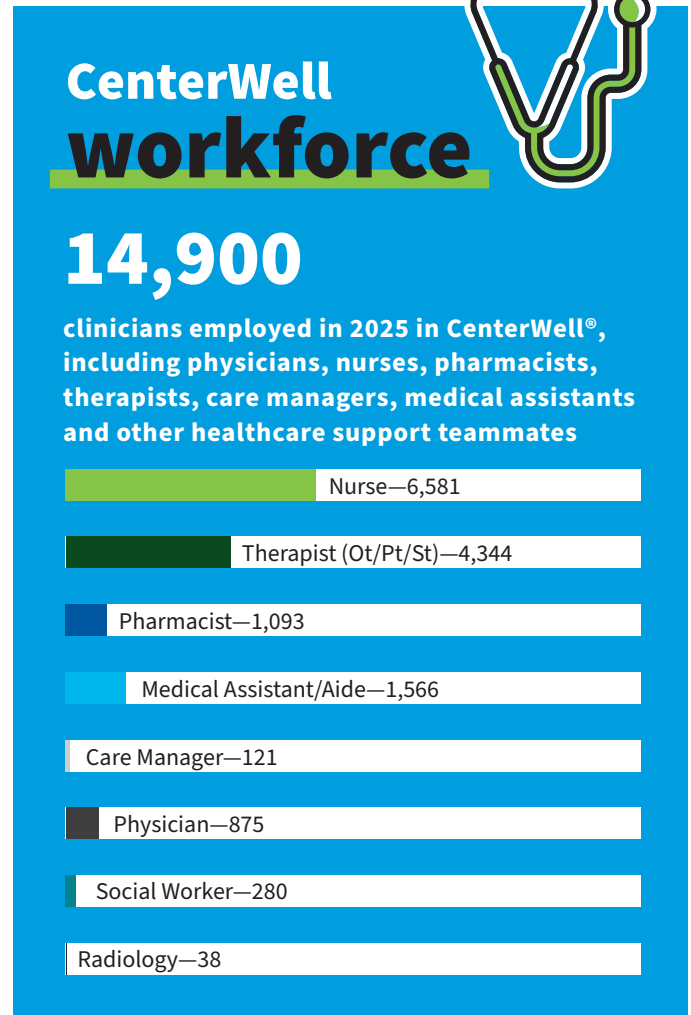
In 2025, Humana and CenterWell® employed thousands of clinicians across primary care, home health, pharmacy, behavioral health and care management—forming the backbone of our integrated care model. Clinical training programs, partnerships with nursing and health sciences schools and initiatives that reduce administrative burdens create sustainable pathways for clinicians to thrive and meet growing care needs. As part of these partnerships, CenterWell Home Health® offers clinical rotations and externships to students, creating hands-on learning opportunities that strengthen our talent pathways.

CenterWell Home Health talent:

- 37** new graduate nurses onboarded
- 375** students completed clinical rotations at 40 schools
- 11** externs hosted in our branches during the summer
- 76** seats in its Pharmacy Technician (PTU) training program, offered by CenterWell Pharmacy®

We also strengthened our physician experience by expanding AI-powered ambient listing tools, advancing electronic medical record (EMR) transition work

and enhancing continuing medical education (CME) programming in partnership with our physician population—all aligned with our enterprise Clinician Recruitment and Retention plan to reduce administrative burden and improve clinician well-being.



Advancing technology talent and innovation

Humana’s technology teams power the systems that enable integrated, person-centered care from simplifying clinical workflows to advancing analytics and cybersecurity. Career paths in software engineering, data science and cloud modernization are supported by enterprise-wide learning programs that help employees grow their technical skills and drive innovation. In 2025, Humana was recognized as one of Forbes Best Employers for Tech Workers, reflecting strong development pathways and a culture of continuous learning.

Growing early career and emerging talent

We attract and develop early-career talent through internships, rotational programs and partnerships with national and community organizations. Humana’s internship program, recognized as a [Top 150 Internship Program by Vault](#), offers hands-on experience, mentorship and leadership access in areas such as data analytics, IT, finance and software engineering. Collaborations with

organizations like The Consortium, Reaching Out MBA and the Society for Women Engineers help connect emerging professionals to purpose-driven careers and build a workforce ready to meet the future of care.

These early-career initiatives strengthen Humana’s broader talent ecosystem, working alongside [enterprise programs](#) that support development at every career stage.



For each community

- 36 Supporting communities through volunteerism and civic engagement
- 38 Advancing health and well-being through strategic philanthropic investments and in-kind donations
- 40 Providing programs for veterans and military that promote health and resilience
- 43 Advancing health equity



FOR EACH COMMUNITY:

Top takeaways

1.6M

lives touched through service projects nationwide on Humana Community Day



Through its inaugural Community Impact Trip, Humana sent more than **30** employee ambassadors to the Dominican Republic, where they served **564** patients and led community health education, including a health fair for **60** community members, expanding access to care and preventive services



Humana Healthy Horizons contributed **\$10.2M** in community partnerships and investments



Humana invested **\$4.45M** with Volunteers of America and opened two new Family Focused Recovery Centers to support pregnant and parenting moms with substance use disorder

In Northeast Florida, mobile pantry distributions delivered **21,650** pounds of healthy food to over **500** military households.

The Humana Foundation invested **\$3 million** to launch a Caregiver Mental Wellness Workshop with the Elizabeth Dole Foundation, expanding mental and emotional health support for military and veteran caregivers.

Partnerships with PsychArmor provide culturally competent **training for care teams** serving high-risk veteran populations, including Native American, Alaska Native and LGBTQIA+ veterans.

In Louisiana, the DUOS Veteran Support program connected **948** veteran Medicare Advantage members to benefits and resources, resulting in **4,900+** resource connections and **488** Annual Wellness Visits following enrollment.

Health is shaped by more than clinical care—it's influenced by the strength of the communities where we live, work and connect.

At Humana, we partner with local organizations, nonprofits and civic leaders to address and remove social and economic barriers and build stronger, more equitable communities. Through volunteerism, philanthropy and strategic investments, we advocate for environments that support whole-person health. When communities thrive, people are one step closer to achieving their best health.

Supporting communities through volunteerism and civic engagement

Humana's employees drive meaningful change nationwide, engaging in volunteerism and workplace giving programs, amplifying our mission.

This spirit of service was especially evident during **Humana Community Day**, which harnessed the collective energy of **12,000** employees for a single, powerful purpose. In its second year, we:

- Expanded to over 220 events in 27 states and Puerto Rico
- Introduced virtual volunteer opportunities
- Supported 600 nonprofit organizations
- Reached 1.60 million lives through hands-on service
- Packed 1.10 million meals, created 3,660 military care kits and wrote 6,500 letters of encouragement

More than

20,000

volunteer hours logged on
Humana Community Day



Building on this momentum, the inaugural Community Impact Trip gave our employees the opportunity to serve communities in need abroad. More than **30** ambassadors traveled to the Dominican Republic to deliver primary care and lead health education initiatives. Ambassadors served **564** patients, hosted a health fair for **40** children and **20** adults. Participants overwhelmingly agreed that the Community Impact Trip positively contributed to their experience as an employee of Humana or CenterWell, giving the experience an average rating of **4.9** out of **5** (**98%** of the maximum satisfaction score).



Delivering care in the Dominican Republic gave me a new perspective on innovation.

We arrived with a goal of caring for communities in need, and while this goal was accomplished, we came away with so much more. We came home with a deepened sense of purpose and new tools to improve access to care and eliminate health disparities."

-Alex Ding, Deputy Chief Medical Officer

Our team members show up for their communities through generous giving all year long. In 2025, the Humana Foundation expanded opportunities for impact by introducing Network Resource Group (NRG) Giving Circles, connecting NRGs to nonprofits and providing **\$50,000** in grant funding to address food insecurity, mental health and caregiver support. Together, employees donated nearly **\$15,500** through NRG giving opportunities.

The Humana Foundation also doubled the annual match bank from \$500 to \$1,000 for each employee, amplifying employee contributions through the Humana Foundation's Matching Gift program and Double Match Day.

Matching Gift program:

25,680 employees participated

\$6.63M donated by employees

10,465 causes supported

\$36.06M donated since 2020

\$1.52M was donated to about 2,000 causes through the collective effort of almost 2,900 employees on Double Match Day.

\$45,000 in grants from the Humana Foundation were distributed on Double Match Day to eligible nonprofits

Advancing health and well-being through strategic philanthropic investments and in-kind donations

The [Humana Foundation](#) advances health equity and strengthens communities by supporting programs focused on nutrition, mental health and social connection. In 2025, the Humana Foundation deepened its commitment by funding programs that remove barriers to care and foster resilience across Kentucky, Louisiana, Florida and Texas. In total, **\$25.93 million** was donated to nonprofits, supporting **98** organizations throughout the year.



Community Partnerships: Collaborations with the [National Mall of Pickleball](#) and the [Emeril Lagasse Foundation](#) highlighted the link between physical activity, healthy eating and community health.



Face the Fight Coalition: As a founding member, the Humana Foundation supported efforts to prevent veteran suicide through expanded partnerships and evidence-based programs. The coalition's [2024 Progress Report](#), published in July 2025, highlighted measurable impact including: more than **355,000** lives impacted through funded programs, **\$25 million** in grants distributed and more than **245,000** veterans' screened with over **40,000** receiving care.



Scholarship Program: Awarded **80** [new scholarships](#), renewed **169** scholarships for dependents of Humana employees and expanded eligibility to vocational and technical schools.



Delivering relief when communities need it most

When communities faced crisis, the Humana Foundation responded immediately and with compassion. In 2025, it provided support for flooding and tornadoes in Kentucky and Texas, along with emergency food assistance across multiple states. Investments included **\$500,000** for [Central Texas flooding](#), **\$250,000** for [Eastern Kentucky flooding recovery](#) and **\$50,000** for [Kentucky tornado relief](#).

Our employees also rallied together to help with additional disaster relief with approximately:

\$40,500

to support Texas flood relief

\$29,200

to support Eastern KY flood relief

\$9,700

to support recovery after the Midwest tornadoes

\$6,000

to support recovery after the California wildfires

In addition to disaster relief aid, the Humana Foundation made a **\$500,000** investment to help meet the surging demand for [food assistance](#) across Kentucky, Texas, Florida and Louisiana so that food banks and community organizations could continue to serve families facing economic strain.

Innovating through grants and research

Beyond supporting disaster recovery, the Humana Foundation invests in research, learning and innovation to strengthen the health of our communities. In 2025, with more than **\$12 million in grants**, the Humana Foundation supported programs that address isolation, depression and chronic illness—which disproportionately affect vulnerable communities.

- National grants supported mental health screening, social engagement and caregiver support through the National Council on Aging, Volunteers of America and the Elizabeth Dole Foundation.
- Regional grants strengthened nutrition education and food access in Kentucky, Texas, Florida and Louisiana.
- Research partnerships were established to test innovative solutions, such as behavioral economics tools and AI-driven bias reduction in medical training. Four research grants totaling **\$1.1 million** were awarded to the University of North Carolina at Chapel Hill, University of Kentucky, among other transformative academic institutions.



To advance insights and share best practices, in 2025 the Humana Foundation launched a coordinated publication strategy with six key reports:

Social and Emotional Health Evaluation Best Practice Guide—Adventurous Minds Produce Extraordinary Dreams (AMPED)

Strengthening Science and Community Impact Through Equitable Research Practices - the Humana Foundation

Less sugar, more life: Jobs to Be Done Theory reveals why some parents reduce their kids’ sugar-sweetened beverage consumption - commissioned report by Clayton Christensen Institute

Food is Medicine: Best Practices Guide for Practitioners—Community Farm Alliance

Senior Food Insecurity in Kentucky: A Growing Public Health Concern—the Humana Foundation

Strengthening Belonging for Underserved Boys—the Humana Foundation Clayton Christensen Institute



Providing resources through in-kind donations



In addition to **\$11.18 million** in-kind value of volunteer time, we provided in-kind donations to give back to the neighborhoods where we live and serve. Together, these acts of kindness represent an estimated value of **\$22.87 million**.

Furniture and office supplies: **216 tons** donated to community organizations for reuse, an in-kind value of approximately \$3.64 million.

Pharmacy donations: **1.04 million** units (e.g., tablets, capsules, test strips, etc.) of medications and supplies donated by CenterWell Pharmacy® to charitable healthcare clinics.

Food contributions: More than **81,900** pounds of food donated to the 2025 Uniting to Combat Hunger campaign.

Meal support: Over **287,000** meals were provided, along with a \$15,000 contribution from the Humana Foundation, during the 20th annual CenterWell Home Health® Food Fundraising Drive, which supplied meals to 70 communities in need across the country.

Event access: **2,144** event tickets donated to community organizations for local sporting events and related activities.

Senior engagement: **1,137** redeemed senior admissions at the Louisville Zoo and Dallas Zoo for Humana and CenterWell® sponsored Senior Sundays.

Employee recognition: **180** ticket vouchers leveraged for Humana employees through our recognition program and Humana Works team for Louisville Bats baseball games.

(Independent Sector lists the value of volunteer time at \$34.79/hour as of 1/16/26)



Providing programs for veterans and military that promote health and resilience

Humana is dedicated to advancing the health, resiliency and well-being of veterans, military families and service members. Through strategic partnerships, innovative programs and a focus on health equity, we address the unique challenges veterans face.

Meeting veterans' needs and fostering connections

Our “Uniting for Veterans” initiative in collaboration with the Veterans of Foreign Wars (VFW) helps address social challenges, like food and housing insecurity. Since 2018, this campaign—formerly Uniting to Combat Hunger & Homelessness— has delivered millions of meals, essential resources and housing aid to veterans in need.

Giving back to those who gave so much



1.3 million
meals provided



81,900
pounds of food donated



123,900
dollars donated



9,000
seeds packed for victory gardens yielding 40 servings of fresh produce for local communities



158
posts and auxiliaries participated across 40 states



325
nights of housing for a homeless veteran



1,000
hygiene bags created for homeless veterans on VFW Day of Service



We also invest in Veterans Service Officers (VSOs) through training, scholarships and health literacy programs to ensure veterans receive trusted guidance and no-cost claims assistance.

487

VSOs trained at VFW National Veterans Service Training

\$25,000

invested in scholarships for VSOs

Empowering veterans through specialized care and opportunities

CenterWell® and Conviva Care Centers have earned a Veteran Ready Healthcare Organizations certification—a distinction achieved by **17** centers including providers and staff who completed **330** hours of specialized training. This ensures veterans receive care from teams who understand their unique needs.

The DUOS Veteran Support program in Louisiana connects veterans with chronic conditions to resources and benefits that close gaps in care and increase Annual Wellness Visits. In 2025, the program engaged **948** eligible Louisiana veteran Medicare Advantage members, made over **4,900** resource connections and supported **488** Annual Wellness Visits post-enrollment.

Partnerships like our collaboration between USAA and CenterWell in San Antonio, Texas, engages older adults through in-person and virtual programming providing education about health, retirement and integrate healthcare, financial wellness to strengthen community engagement partnerships and address unmet needs.

Advancing suicide prevention for veterans

Through Face the Fight Coalition, Humana supports evidence-based programs that impact more than **355,000** lives and distributes **\$25 million** in grants to prevent veteran suicide.

Underscoring our dedication to the well-being of military families, the Humana Foundation invested \$3 million to launch a new Caregiver Mental Wellness Workshop with the Elizabeth Dole Foundation—an initiative designed to expand mental and emotional health support for the nation’s military and veteran caregivers.

Collaborations with PsychArmor provide culturally competent training for care teams, that focus on high-risk populations such as Native American, Alaska Native and LGBTQIA+ veterans.



Strengthening military families and readiness

As the Managed Care Support contractor for the TRICARE East Region, Humana Military improves access to care and supports resilience for service members, military retirees and their families. Humana Military employees receive specialized training to address challenges like frequent moves, deployment and food insecurity.

In 2025, Humana Military provided support to over **50** nonprofits that advocate for TRICARE beneficiaries, veterans and their families.

Humana Military collaborates with Military and Veterans Service Organizations (MSOs and VSOs) to ensure advocacy, resources and support for military members and their families, including but not limited to:

- Paralyzed Veterans of America
- National Military Family Association
- Military Officers Association of America
- Elizabeth Dole Foundation
- Henry M. Jackson Foundation
- Easterseals
- Armed Services YMCA
- Maternal Mental Health Leadership Alliance



Supporting military communities

Humana works at the local level to reduce disparities and improve health for service members and their families.

In Louisville and San Antonio, employees created military kits during Community Day activities, which provided essential supplies.

In Northeast Florida, our partnership with the Fleet Reserve Association enabled four mobile pantry distributions at Naval Air Station (NAS) Mayport and NAS Jacksonville, which delivered **21,650** pounds of healthy food to **541** military households.

We also support housing stability through the Military Warriors Support Foundation’s Special Operations Transition Home in Virginia Beach, which offers both short and extended stays to ensure stability during critical times.



Expanding access and innovating care

Humana Military advances readiness and delivers patient-centered care with a large network of providers. In 2025, we provided integrated care management programs through a large network of more than **650,000** credentialed providers, achieving full Utilization Review Accreditation Commission (URAC) accreditation and significant taxpayer savings. Our expanding virtual care options ensure quick access to urgent care, speech therapy, mental health, dermatology and baby-feeding support.

Advancing health equity

Humana is committed to addressing social and structural factors that impact well-being. In 2025, we expanded data-driven strategies, strengthened community partnerships and equipped teams to support underserved populations.

Our efforts focus on reducing barriers like food, housing, transportation and health literacy through tools, local investments and resource connections. Health literacy remains a priority. We use the Patient Education Materials Assessment Tool (PEMAT) and conduct employee training to ensure materials are clear, accessible and culturally relevant.

Investing in partnerships to advance community health

In 2025, Humana advanced health equity through targeted, community-based investments that expanded access and responded to local priorities.

Partnering with Volunteers of America

Together with the Volunteers of America (VOA) and their affiliates, we increase access to integrated healthcare for historically underserved communities that focus on maternal and behavioral health and housing stability. In 2025, we:

- Opened two new Family Focused Recovery centers in Columbus, OH, and New Orleans, LA, which provide residential addiction recovery programs for pregnant and parenting moms with substance use disorder.
- Expanded Aging with Options program at Terraces on Tulane in New Orleans, LA which offers supportive housing for low-income adults 55+, promoting better condition management and resources to address health-related social needs.

\$4.45 million invested with VOA

Humana also supported the launch of two new programs with VOA—a workforce development program in Tulsa, OK, and a transitional and respite housing program in Detroit, MI. These programs help reduce barriers to health and employment.

Advancing market-focused community-driven solutions

Humana partners with local organizations to address specific barriers and improve access to care. In 2025, Humana invested over **\$502,000** for community-driven solutions, including:

Chicago, IL: Sponsored community care navigation events and partnered with Equal Hope to host preventive screening care navigation events for women in underserved neighborhoods.

South Florida: Hosted mobile cancer screening events with the Promise Fund, which offered breast cancer screenings and other preventive services.

Atlanta, GA: Launched the Community Health Hub with the Atlanta Regional Collaborative for Health Improvement (ARCHI), to provide resource navigation and health education. Early results show improved blood pressure control for members who enrolled.

San Antonio, TX and Cleveland, OH: Worked with Bexar County Health Collaborative and Better Health Partnership Collaborative to launch the Pathways Community Health Hubs to align social and clinical resources for members with multiple gaps in care.



Expanding access through Medicaid partnerships

Humana Healthy Horizons® addresses the underlying social needs impacting member health to drive improvement across priority areas, such as maternal, infant and behavioral health in our Medicaid states. In 2025, Humana Healthy Horizons committed more than **\$10 million** across community partnerships, programs and investments, including in:

Kentucky partnerships with ProgenyHealth and Volunteers of America Mid-States Freedom House strengthens maternity and NICU care management, keeps mothers and babies together during treatment, and expands doula access.

Virginia Partnership with the Virginia Health Care Foundation (VHCF) through its Nurture Now: Helping Children Shine program, which deliver school-based behavioral health services and promote workforce development.

Oklahoma \$295,500 awarded to six nonprofits to address the top health-related social needs identified by members: food, housing and jobs.

Pediatric Dental Health Partnership with Team Smile, in collaboration with professional athletic organizations, to break down barriers to oral health access, volunteered over hours and served nearly 800 children with three events that provided free dental screenings, preventive care and education.

For the healthcare system

- 47 Innovating the care model
- 53 Governing with transparency and accountability
- 60 Protecting data and advancing responsible AI

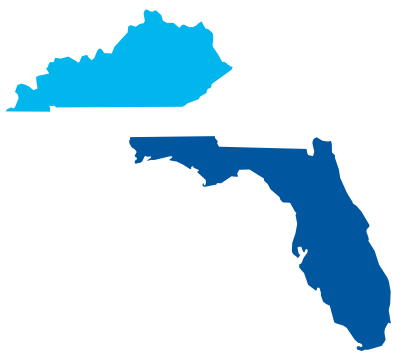


FOR THE HEALTHCARE SYSTEM:

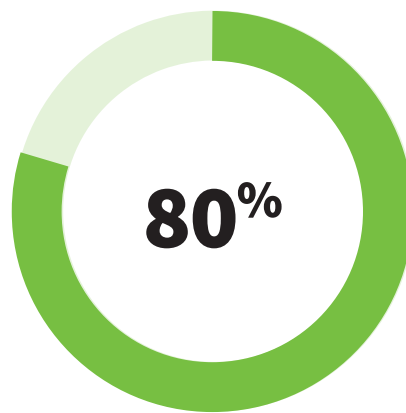
Top takeaways

90%

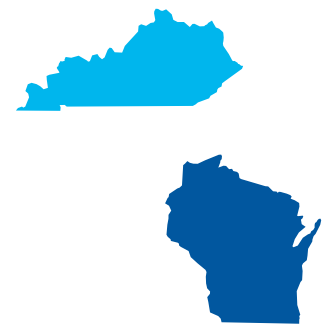
of Medicaid members attributed to value-based providers in 2025



Kentucky and Florida Medicaid value-based care providers outperformed non-VBC peers across multiple HEDIS measures (screenings, BP control, well-child visits, etc.)



CenterWell Home Health outperformed the industry on quality and patient experience, with nearly 80% of providers earning 4-star or higher ratings—more than double the industry average.



Our Medicaid plans in Kentucky and Wisconsin earned a 4 out of 5 Stars Rating in NCQA's Medicaid Health Plan Ratings in 2025.



Humana integrated with Epic MyChart, activated Epic's Coverage Finder and Digital Insurance Card Exchange, and partnered with Providence on a scalable data exchange to improve secure, standardized sharing and reduce administrative complexity.



CenterWell Home Health achieved 4.19 average Quality of Patient Care Star Rating vs 3.25 CMS industry average.

Healthcare is most effective when payers and providers collaborate to deliver integrated, coordinated care.

Humana unites care delivery and coverage—insurance, primary care, home health, pharmacy and digital solutions—to create a seamless, consumer-centered experience. By leveraging research and technology, we anticipate needs and deliver proactive, reliable care.

What older adults value informs our care models

Our 2025 national CenterWell Survey shows older adults overwhelmingly value their independence. This underscores the importance of seamless access to integrated care and guides our commitment to innovate care models that prioritize simplicity, coordination and the whole-person experience.

Innovating the care model

We believe care should be proactive, accessible and designed around the full-patient experience. That’s why we advance models that deliver care when and where people need it, strengthen primary care relationships and support clinicians with coordinated data. By advancing care models this way, we help build a healthcare system that is simpler, more reliable and equitable.



We’re proud to be among the first to bring these capabilities to life. This is more than a technology launch—it’s a step toward a more connected, efficient healthcare system that puts people first.”

-George Renaudin, President of Insurance



Advancing integrated and interoperable care

We continuously modernize the healthcare system by improving how information flows between payers and providers. Our interoperability reduces manual processes, improves data accuracy and ensures clinicians receive timely insights that create a stronger, more connected system for all.

Key collaborations:

- [Integration with Epic MyChart](#) gives millions of Medicare Advantage members access to benefits, coverage details and plan resources on the same platform they use for their clinical care.
- [Epic’s Coverage Finder and Digital Insurance Card Exchange](#) allow members’ insurance information to be shared automatically and securely with participating healthcare providers.
- [Partnership with Providence](#) provides a scalable, secure ecosystem for standardized data sharing to help clinicians access timely, actionable insights, reducing administrative complexity and protecting patient privacy.

Expanding value-based care to improve outcomes

Value-based care (VBC) shapes how we drive better health and strengthen affordability for our Medicare Advantage (MA) and Medicaid populations. Our models emphasize prevention, earlier intervention and integrated support for people with complex conditions.

In 2025, Humana expanded VBC across primary, specialty and home-based settings that deepened partnerships and reinforced a holistic, patient-centered system of care.

2025 partnerships and program expansions:

- Advanced musculoskeletal care quality and optimized health outcomes for individuals with musculoskeletal conditions.
- Expanded oncology value-based care that offers 24/7 care navigation, patient support and community resource coordination for seamless care across oncology and primary care teams.
- Extended access to value-based, in-home treatment for eligible MA members with chronic kidney disease and end-stage kidney disease in multiple states.



Elevating home-based, value-based care

We extend VBC into the home by integrating CenterWell Home Health®(CWHH), OneHome® and our Primary Care Organization into a unified model. Our system strengthens clinical oversight, accelerates referrals and ensures members receive timely, consistent and appropriate care across the post-acute continuum.

We measure and report our progress, demonstrating CenterWell Home Health providers consistently meet or exceed industry standards. As of October 2025:

Home Health Care Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

77%

of CWHH providers were rated at 4 or 5 Stars vs. the home health industry at 65%

Quality of Patient Care (QoPC) Star Ratings

4.19

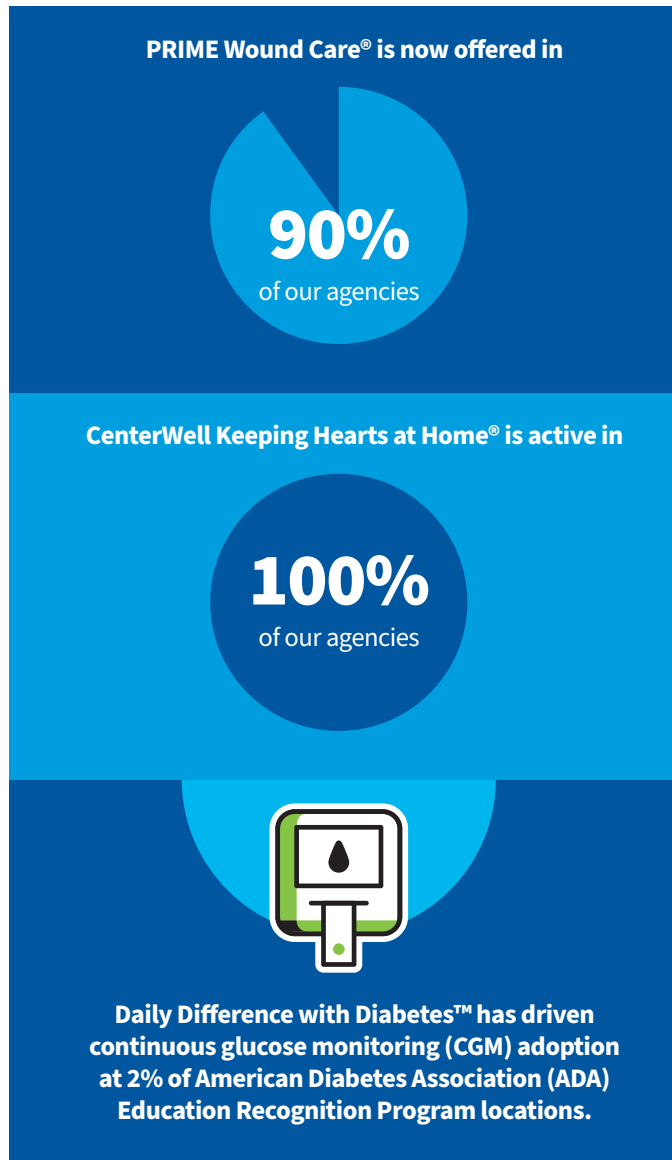
avg. QoPC Star Rating achieved vs. CMS industry avg. of 3.25

4.0+ Star Ratings:

80%

of our CWHH providers earned a 4.0 or above Star Rating vs. the home health industry avg. of 35% based on CMS public reporting

CenterWell®’s specialized programs continue to deliver measurable improvements in safety, mobility and chronic condition management for patients nationwide:




PRIME Wound Care® is now offered in

90%
of our agencies

CenterWell Keeping Hearts at Home® is active in

100%
of our agencies



Daily Difference with Diabetes™ has driven continuous glucose monitoring (CGM) adoption at 2% of American Diabetes Association (ADA) Education Recognition Program locations.

OneHome® operates as a centralized hub for post-acute care, integrating referrals, accelerating patient placement and coordinating home health, durable medical equipment (DME) and skilled nursing facility (SNF) services through a value-based model. In 2025, OneHome launched SNF utilization management to improve placement suitability and streamline clinical reviews, with plans to expand to additional states in 2026.

Reporting progress in value-based care

Humana’s annual Value-Based Care by the Numbers Report highlights progress, key achievements and goals in advancing value-based models across our organization—showcasing improvements in patient outcomes, cost efficiency and provider engagement. Key results from the 12th Value-Based Care By the Numbers Report:

- **24.3% fewer inpatient admissions** for value-based care (VBC) Medicare Advantage (MA) patients compared with Original Medicare.
- **13.4% fewer emergency department visits** and **7.6% fewer hospital admissions** for MA members treated by value-based clinicians.
- **Improved chronic disease management**, including more eye exam screenings, kidney health evaluations and higher medication adherence for diabetes, hypertension and cardiovascular disease.
- **Higher preventive care rates**, including breast cancer, colorectal cancer and osteoporosis management for Humana MA VBC members.
- **Higher patient satisfaction** of health plans, health care, care coordination, customer service and more for Humana MA members receiving VBC per Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey data.
- **More consistent primary care for seniors**, including 20% more primary care visits per year, 6% more regularly scheduled visits and higher continuity of care (75% of senior-focused primary care patients vs. 55% of FFS patients).
- **Benefits for clinicians**, including more time with patients, improved practice sustainability and lower burnout—supported by proactive, team-based care models that shift clinicians away from reactive fee-for-service pressures.
- **Improved specialty care outcomes**, including higher quality of care and better medication adherence for MA members diagnosed with heart failure under value-based models.

Improving Medicaid quality and performance

Humana Healthy Horizons® enhances the quality of our Medicaid plans using targeted interventions, value-based care and coordinated strategies that improve primary and preventive care delivery, maternal and pediatric services, behavioral health and chronic disease management. These efforts help ensure members receive timely appropriate care, improve access to care and equip providers with insights and incentives to meet state-specific needs.

Strengthening Medicaid quality and outcomes

By closing gaps in primary and preventive care, maternal and behavioral health and supporting chronic condition management, we deliver timely, person-centered care tailored to individual needs.

In 2025, Humana assigned **90%** of our Medicaid members to value-based care providers, which expanded coordinated care models in all Humana Medicaid markets.



In Kentucky

In measurement year 2024, our Kentucky Medicaid value-based care providers outperformed their non-value-based care counterparts across key HEDIS measures with notable achievements including (reflected as a percentage point difference in performance):

- 9pts** ↑ higher performance in **Breast Cancer Screening**
- 10pts** ↑ higher performance in **Cervical Cancer Screening**
- 13pts** ↑ higher performance in **Child and Adolescent Well-Care Visits**
- 9pts** ↑ higher performance in **Childhood Immunization Status—Combo 10**
- 2pts** ↑ higher performance in **Glycemic Status Assessment** for Patients with Diabetes < 8%



In Florida

In measurement year 2024, our Florida Medicaid value-based care providers outperformed their non-value-based care counterparts across key HEDIS measures with notable achievements including (reflected as a percentage point difference in performance):

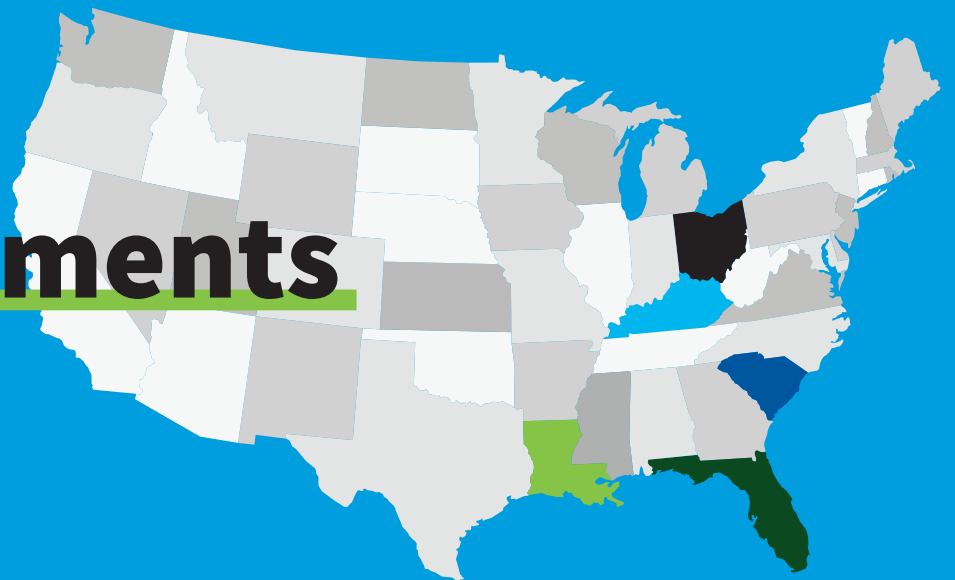
- 2pts** ↑ higher performance in **Adults' Access to Preventive/Ambulatory Health Services (Total)**
- 7pts** ↑ higher performance in **Blood Pressure Control for Patients With Diabetes**
- 4pts** ↑ higher performance in **Controlling High Blood Pressure**
- 4pts** ↑ higher performance in **Follow-Up After Hospitalization For Mental Illness—30 days (Total)**
- 8pts** ↑ higher performance in **Well-Child Visits** in the First 30 Months of Life (First 15 Months)

Across Florida, Kentucky, Louisiana, Ohio and South Carolina, we achieved improvements in priority HEDIS measures, which underscore the effectiveness of our targeted quality improvement (QI) initiatives and the

impact of proactive member outreach, engagement, education, community partnerships and enhanced coordination activities.

HEDIS[®] Improvements

in our Medicaid plan by state



FL

Improved in

35+

priority measures including:

- Blood Pressure Control for Patients With Diabetes
- Follow-Up After Emergency Department Visit for Substance Use—7 days (Total)
- Well-Child Visits in the First 30 Months of Life (15 Months-30 Months)

KY

Improved in

30+

priority measures including:

- Follow-Up After Emergency Department Visit for Substance Use—7 days (Total)
- Glycemic Status Assessment for Patients With Diabetes—Glycemic Status <8.0%
- Well-Child Visits in the First 30 Months of Life (First 15 Months)

LA

Improved in

40+

priority measures including:

- Follow-Up After Emergency Department Visit for Mental Illness—7 days (Total)
- Prenatal and Postpartum Care—Postpartum Care
- Statin Therapy for Patients With Cardiovascular Disease—Statin Adherence 80% (Total)

OH

Improved in

25+

priority measures including:

- Adults' Access to Preventive/ Ambulatory Health Services (Total)
- Child and Adolescent Well-Care Visits (Total)
- Glycemic Status Assessment for Patients With Diabetes—Glycemic Status >9.0%

SC

Improved in

25+

priority measures including:

- Antidepressant Medication Management—Effective Continuation Phase Treatment
- Controlling High Blood Pressure
- Prenatal and Postpartum Care—Timeliness of Prenatal Care

Accelerating research and innovation

Humana advances care through rigorous research and innovation that informs program design and evidence-based practice and accelerates breakthroughs in health delivery.

Key 2025 initiatives:



Supplemental Benefits Survey of nearly **6,000** Medicare Advantage (MA) beneficiaries revealed **94%** agree that supplemental benefits can improve health, highlighting the opportunities to enhance communication and usability.



Clinician Ambient AI pilots showed reduced documentation burden and improved note completeness. **83%** of clinicians reported less time spent documenting and **69%** spent less time on computers during patient visits.



Value-Based Care Analysis of more than **3.2 million** MA beneficiaries showed seniors in value-based primary care experience more continuous, frequent visits.



Heart Failure Issue Brief demonstrated that value-based care improves quality and medication adherence for MA patients diagnosed with heart failure.



Explore additional studies at research.humana.com



Enhancing pharmacy performance through strategic partnerships

Pharmacy services play a central role in our integrated care model by improving affordability, access and coordination. In 2025, CenterWell Pharmacy® expanded choice, simplified the prescription experience and strengthened alignment in broader care delivery goals.

Key 2025 initiatives, partnerships and achievements:



Collaborated with Cost Plus Drugs to expand affordable medication options.



Became the dispensing partner for NovoCare® Pharmacy, providing home delivery of all strengths of Wegovy® for self-pay patients and improving access to anti-obesity medications.



Earned the MMIT Specialty Pharmacy Patient Choice Award, that recognizes outstanding patient satisfaction, clinical support and communication for the seventh time in the past eight years.

Governing with transparency and accountability

Humana builds trust through strong governance that aligns board oversight, risk management and ethical conduct at every level of our organization.

Our Nominating, Governance & Sustainability Committee oversees our environmental, social and governance (ESG) strategy, practices and reporting. Our internal ESG Steering Committee, led by our Chief Human Resources Officer and Chief Legal Officer, functions pursuant to its Charter by guiding the integration of ESG efforts into our long-term business strategy. This ESG governance structure complements the longstanding responsibility of our Board and each of our Board committees in managing various aspects of the company’s ESG-related risks and practices.

More information about Humana’s Board structure, policies and practices are illustrated in our [Proxy Statement](#), [Annual Report](#) and on our [Corporate Governance site](#).



Managing enterprise risk responsibly

Strong governance and accountability are foundational to simplify healthcare and deliver better health outcomes. Humana’s enterprise risk management (ERM) framework embeds risk oversight across the organization, ensuring effective implementation and continuous improvement.

We follow a three-lines-of-defense model delegating responsibility for critical risk management processes across all business functions and operational areas, including dedicated teams for risk management, compliance and internal audit:

First line

Business and operational teams identify, assess, mitigate, monitor and manage risks within their areas, ensuring proactive management at the point of impact.

Second line

Our ERM and Regulatory Compliance departments provide oversight and guidance. The ERM department, including the Chief Audit and Risk Officer (CARO), is led by Humana’s Chief Financial Officer, while the Regulatory Compliance department, including the Chief Compliance Officer (CCO), is led by Humana’s Chief Legal Officer (CLO).

Third line

Internal Audit (IA) provides independent and objective assurance to senior management and the Board regarding first and second line risk management functions, internal control systems and governance processes.

Our governance structure consists of the Board of Directors, in coordination with relevant committees including Humana’s Enterprise Risk Management Committee and the Audit Committee that receives updates from the CARO and CCO regarding any significant matters regarding our risk management and compliance operations. This structure reflects our commitment to ethical practices and operational integrity—critical elements in building trust across the healthcare system.

Visualizing Our Risk Framework

A Board and Management Oversight						
Strategic Risk	Financial Risk	Actuarial Risk	Operational Risk	Legal Risk	Compliance Risk	Reputational Risk
B Risk Identification						
C Risk Reporting						
D Risk Mitigation						
E Risk Data & Enterprise Solution Point (ESP) System						
F Culture						

Strengthening resilience and disaster response

Humana’s governance framework includes robust resilience and disaster response capabilities. The Humana Safety and Security Fusion Center, which functions as a central point of outreach, coordination and facilitation, conducts 24/7/365 risk and event monitoring to help mitigate, respond to and support employees and members during natural disasters and disruptive events.

Key response elements:

- Rapid identification and outreach to impacted employees using the Humana Notification System (HNS), which contacted close to **11,900** employees in 2025 for events ranging from severe weather to security incidents, along with support from our Fusion Center triaging nearly **7,400** cases.
- Distribution of disaster declarations and compliance with Centers for Medicare & Medicaid Services (CMS) guidelines, ensuring members can access prescriptions during emergencies.
- Technology platforms for event identification and asset exposure.
- Cross-functional collaboration with Human Resources, Crisis Management, Communications, Legal and Workplace Solutions teams.
- Regional Go-Teams for preparedness and response.

Investing in infrastructure resilience



Deployable Flood Barriers: The Waterside building in Louisville is equipped with a deployable flood barrier to mitigate floodwater intrusion, meeting updated local floodplain requirements.



Resilient Facility Design: Facility design standards now prioritize resilient materials and finishes, reducing the risk of damage from hurricanes, floods, tornadoes, ice storms and wildfires.



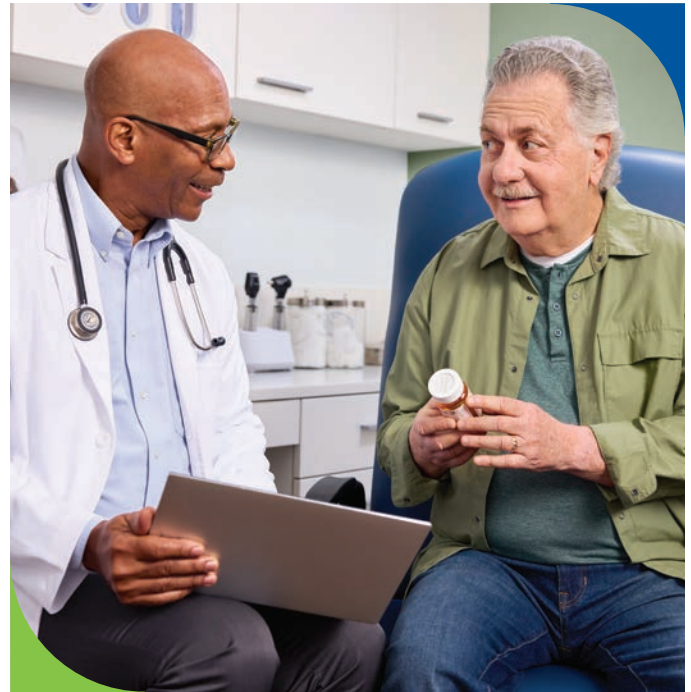
Proactive Assessments: The Safety and Security Fusion Center provides risk-based facility assessments to facility stakeholders to inform site selection and security technology upgrades. In 2025, over **900** site risk assessments were conducted for new or existing facilities.

Advocating for effective public policy

Humana partners with federal and state governments to provide affordable, high-quality care while delivering better health outcomes for our members, patients and communities. Our advocacy and public policy teams work with policymakers and other healthcare stakeholders on solutions to:

- Strengthen and modernize Medicare Advantage
- Accelerate value-based care
- Expand access to primary and home-based care
- Integrate clinical solutions
- Create affordability for prescription drugs
- Reduce barriers to care by addressing social determinants of health
- Support active-duty service members, military retirees and their families through the TRICARE health program
- Deliver the highest-quality care through Medicaid

These important programs and initiatives play an important role in providing affordable, high-quality care to millions of Americans, bringing greater innovation to the marketplace, and delivering value to taxpayers. Humana remains committed to advocating for solutions that leverage consumer choice and competition to strengthen these programs and ensure Americans can achieve their best health.



Participating in industry and membership associations

Humana actively participates in numerous health sector and business trade associations to address issues that impact our members, patients and businesses. Our memberships include:

- [AHIP](#)
- [Business Roundtable](#)
- [America's Physician Groups](#)
- [National Alliance for Care at Home](#)
- [Pharmaceutical Care Management Association](#)
- [American Medical Association](#)
- [Primary Care Collaborative](#)

In addition to paying membership dues, we participate in governance by serving on operating committees and providing additional funding for industry-specific lobbying efforts when needed.

Upholding ethics, compliance and program integrity

Humana sets clear expectations for ethical conduct and human rights with our Standards of Excellence. Our suppliers, vendors, contractors, consultants, agents and other providers of goods and services who do, or seek to do, business with us must agree to follow all legal business practices and are expected to follow our standards of excellence or similar.



Humana's Standards of Excellence



For each person and community

At Humana, we focus on making it easy for each person to achieve whole-person health and well-being. We're proud of the work we do day in and day out in caring for people. When we say we want to make living a healthy life easier for everyone, we truly mean it for our members, for our employees and for you. We also recognize that we are part of a bigger community and are dedicated to the well-being of all people. That is why we invest in communities across the country to advance health equity, which is about making sure we all have a fair and just opportunity to be as healthy as possible. Helping communities and the people in them grow stronger benefits all of us because where people live, work and play are inextricable from their health outcomes. Our standards include:

Encouraging a **diverse workforce** and providing a workplace free from discrimination, harassment or any other form of abuse

Treating employees **fairly and honestly**, including with respect to wages, working hours and benefits

Respecting **human rights** and prohibiting all forms of forced or compulsory labor

Ensuring that **child labor is not used** in any operations

Respecting associate's **right to freedom of association**, consistent with local laws

Establishing an **appropriate management process** and cooperating with reasonable assessment processes requested by Humana

Providing **safe and humane working conditions** for all employees

Encouraging **healthy lifestyles** and offering health-improvement programs for all employees and promoting health-related events and activities in the local community

For our business and the collective healthcare system

At Humana, we realize that the future of our business is interconnected with the well-being of our members and patients, our associates, the communities we serve, the healthcare system and the environment. That’s why we established policies and programs illustrating our commitment to responsible business practices that lead to a more efficient, equitable and sustainable healthcare system. Our standards include:

Complying with all applicable laws and regulations of the countries of operation

Competing fairly for our business, without paying bribes, kickbacks or giving anything of value to secure an improper advantage

Observing Humana’s policies regarding gifts and entertainment and conflicts of interest when working with Humana associates

Keeping financial books and records in accordance with all applicable legal, regulatory and fiscal requirements and accepted accounting practices



Promoting, utilizing and measuring engagement of **small and diverse suppliers**

For the environment

Humana’s commitment to the health of our planet is stronger than ever. We recognize there is an undeniable link between our physical and emotional well-being and the health of the environment. To that end, we are continuing to invest our time and resources where it matters most not just because it’s good business practice, but because we believe in a bright future. Our standards include:

Carrying out operations with **care for the environment** and complying with all applicable environmental laws and regulations

Delivering products and services meeting applicable **quality and safety standards**

Actively participating in **sustainability, carbon footprint reduction** and other environmentally oriented programs



Our Board of Directors, leaders, employees, suppliers and contractors are required to complete ethics and compliance training within the first 30 days of joining Humana and annually thereafter.

Key elements of Humana’s ethics and compliance training program include the following enterprise-wide and role-specific programs:

- Harassment, discrimination, retaliation and cultural competencies policies
- Anti-corruption and whistleblowers
- Cybersecurity and enterprise information security
- Enterprise Risk Management and Corporate Compliance Program
- Conflicts of interest disclosures, completed upon hire, annually and whenever new situations arise, or previously disclosed situations change
- Fraud, waste and abuse prevention training covered through our annual ethics and compliance training for employees
- Ethics Every Day, Humana’s code of conduct that guides decision-making across the enterprise
- The Ethics Help Line, hosted by a third party, allows employees and contractors to report concerns or make inquiries anonymously, confidentially and without fear of retaliation
- Compliance with applicable laws, regulations and internal policies governing marketing practices, privacy policy and privacy practices claims processing and business conduct, as well as requirements prescribed by Centers for Medicare & Medicaid (CMS) and state Medicaid agencies where Humana holds a Medicaid contract



Expanding supplier diversity

We support an inclusive supply chain by partnering with minority-, women-, veteran-, disability-, LGBTQ+-owned businesses, HUBZone and small businesses. Advancing supplier diversity is critical to driving innovation, strengthening competition and creating economic opportunities in the communities we serve.



**\$405 million
Total Diverse Spend**

6.96% of total supplier spend,
a **1.7%** increase since 2024


To increase organizational capability, we provide targeted e-learning on inclusive sourcing for employees and leaders. In 2025, **969** total employees, including **476** senior leaders, completed this training.



Maintaining occupational health and safety

Humana maintains a safe, healthy workplace to foster well-being and belonging through our Environmental, Health, Safety and Security (EHSS) program that protects people, assets, properties and information. Our approach consists of:

- **Occupational Health and Safety Management System:** Reduces risks from fire, disasters, workplace accidents, work-related illnesses and other hazards, as outlined in our Enterprise Safety and Security Policy.
- **Enterprise Safety and Security Policy:** Applies to all employees, facilities (owned or leased) and anyone requesting facility admittance.
- **Associate Incident Reporting System (AIRS):** Work-related injuries or illnesses are reported through AIRS, which provides a secure mechanism for reporting, satisfies the Occupational Safety and Health Administration (OSHA) needlestick reporting requirement and simultaneously notifies our workers' compensation provider of new claims.
- **Oversight:** Provided by the Humana Safety and Security team, led by the Vice President of Human Resources (HR) Service Delivery and the Chief HR Officer.
- **Threat Management and Investigations:** The Safety and Security team conducts threat management activities and incident investigations, referring cases to Associate Relations or Cyber-Threat Management and Response as appropriate.
- **Executive Protection:** Our program provides security support to the CEO, the Enterprise Leadership Team and the broader leadership population across the enterprise and leverages a risk-based approach for a safe and secure environment.
- **Security Officers:** Front-line protection for our personnel and facilities, providing ongoing vigilance, emergency response coordination and access control enforcement.



Leaders are encouraged to regularly discuss safety with their teams and a virtual library of “safety moments” offers practical tips for everyday life.

- **Lone Worker Safety:** Employees who work independently or in remote settings are supported through real-time safety technology and annual workplace violence prevention. In 2025, over **1,100** new employees designated as “Lone Workers” activated their safety accounts.
- **Shared responsibility:** All employees, contractors and vendors are expected to help maintain safe and secure facilities.
- **Training and education:** Annual training for all employees—including those in clinics, pharmacies and home health—delivered via our Learning Management System (LMS). Topics include hazardous and biomedical waste handling, emergency response, infection control plans, bloodborne pathogen safety and driver safety.

79% of employees completed assigned EHS training

18,500+ employees completed workplace violence prevention trainings

6 supply chain security assessments conducted which resulted in **11** procedural enhancements in key enterprise supply nodes

2,600+ incident investigations conducted

110 partnered with Human Resources (HR), and **11** handled jointly with Cyber Threat Management and Response

0.81 OSHA Total Recordable Incident Rate

for all lines of business, per 200,000 hours worked by employees, which reflects our commitment to maintain a safe and healthy workplace



Protecting data and advancing responsible AI

As innovation accelerates across the healthcare system, Humana remains focused on using emerging technologies responsibly. Our approach to artificial and augmented intelligence is grounded in strong governance, transparency and a commitment to safeguarding the data entrusted to us.

Reinforcing enterprise information security

As technology plays an increasingly vital role in care delivery and operations, maintaining information security is important to protecting our members, partners and organizations. Humana reinforces enterprise-wide safeguards that uphold privacy, strengthen resilience and promote trust in every interaction.

To stay ahead of emerging threats, we continually evolve our approach to cybersecurity and privacy. Humana regularly updates policies, invests in emerging technologies and engages with regulators, industry organizations and stakeholders to stay ahead of new requirements and best practices. We are committed to continuous improvement and to maintaining a culture in which information security—including cybersecurity and data privacy—is prioritized at every level of the organization.

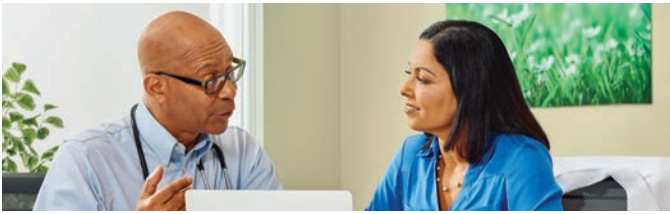
Upholding governance, risk management and oversight

We integrate cybersecurity and privacy into our enterprise-wide risk management practices, ensuring strong governance, effective controls and enhanced transparency, providing a solid foundation for long-term organizational success. Our Board of Directors maintains primary oversight responsibility of these programs through the [Audit](#) and [Technology](#) Committees. This includes:

- Reviewing the adequacy and effectiveness of our information technology (IT) general controls
- Overall assessment and plan to address IT specific risks, scope and funding related to cybersecurity
- Business continuity and disaster recovery initiatives
- Emerging technologies such as artificial and augmented intelligence (AI)

Senior leaders are accountable for establishing and maintaining policies and procedures, implementing controls and day-to-day oversight related to Humana’s data privacy and cybersecurity risk management activities. This includes ongoing monitoring, implementation, execution of risk management programs, conducting annual cybersecurity and privacy risk assessments, with results reported to the Board of Directors to ensure transparency and accountability.





Driving enterprise information protection

Our enterprise information protection (EIP) program governs the confidentiality, integrity and availability of information across Humana. Led by the Chief Information Security Officer (CISO), reporting to the Chief Information Officer (CIO), this program ensures compliance with industry standards and prioritizes threat management to protect the organization.

The CIO is responsible for driving security practices and ensuring successful deployment of requirements across the enterprise. The CISO ensures that appropriate technology and cybersecurity policies and standards are established and that security controls and mechanisms are also established, implemented and governed throughout the organization. At least twice a year, the CIO and CISO update the Audit and Technology committees on risk exposure, security regulatory compliance and the overall state of our information security program.

Affirming our internal oversight structure

The Technology Leadership Team (TLT) serves as a senior governance body within Humana, bringing together key leaders from the Information Technology organization. Its responsibilities include:

- Overseeing technology strategy, operations and risk management.
- Reviewing and making decisions on significant IT and cybersecurity risks.
- Receiving regular updates and escalations from groups such as the Information Technology and Cyber Risk Governance (ITCRG) committee, ensuring that major risk issues and technology initiatives align with enterprise objectives and receive appropriate executive attention.

Building on this oversight structure, the ITCRG committee provides dedicated governance for technology and cybersecurity risk. Its responsibilities include:

Being authorized by the CIO to identify, assess and manage technology and cybersecurity risks to Humana’s critical assets.

Operating within the First Line of Defense of Humana’s Enterprise Risk Management framework.

Establishing processes and oversight for risk identification, assessment, mitigation and escalation.

Reviewing key risk matters through monthly meetings, ensuring risks are appropriately documented and reported.

Collaborating with leadership and stakeholders—including regulatory, privacy, legal and audit teams—to safeguard Humana’s technology objectives.

Supporting Sarbanes-Oxley (SOX) and Committee of Sponsoring Organizations (COSO) control principles by maintaining strong governance and transparency in risk management decisions.





Building awareness through training

Employees complete annual Ethics & Compliance training that includes information security content and guidance for protecting and handling members’ and patients’ personal information. We also provide certain role-specific training—like new hires, developers and those with privileged access—to ensure appropriate safety measures are consistently applied across the organization and aligned with employees’ responsibilities. Examples of our practices include:

- Engaging our Board of Directors in cybersecurity and crisis response exercises as part of their ongoing oversight of our systems
- Testing employees’ knowledge through internal phishing campaigns
- Conducting targeted cybersecurity assessments
- Hosting a multi-day learning event annually during National Cyber Security Awareness Month
- Offering learning activities within Humana’s Well-being Rewards platform that promote cybersecurity and data protection strategies

Strengthening cybersecurity

Humana processes, stores and transmits large amounts of data—including sensitive personal information and proprietary business data—and relies on third-party service providers to do the same. Protecting this information is a key component of our enterprise risk management program and supports compliance with applicable laws, regulatory expectations and our internal ethics and security standards. We maintain a comprehensive set of controls and defensive measures designed to address the evolving cyber threat landscape and strengthen our resiliency.

Guided by industry best practices, Humana is committed to safeguarding information and ensuring the protection of our customers’ data. Examples of our practices include:

- Conducting regular vulnerability assessments and penetration testing
- Maintaining tools to identify, prevent and mitigate malicious activity, threats and bad actors
- Enforcing identity and access management protocols, encryption and secure email functionality
- Monitoring risks posed by threat actors, including through partnerships with industry groups and government agencies
- Maintaining a 24/7 Cybersecurity Operations Center to monitor, detect and respond to cyber events and incidents
- Reporting data breaches, as required by law, to the U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR), and various state agencies; our reports are publicly available, free of charge and can be obtained through the [OCR Portal](#)



Protecting data privacy

Humana’s privacy and security program is designed to meet applicable federal and state regulations and other regulatory requirements—including the Health Insurance Portability and Accountability Act (HIPAA)—and to integrate responsible data-handling practices across the organization. Our policies and procedures promote transparency, data minimization and responsible information use, supported by ongoing monitoring of compliance and emerging requirements. Senior leadership and the Board of Directors receive regular updates on privacy risks, emerging threats and program performance. Cross-functional risk, compliance, data governance and security teams collaborate to ensure privacy requirements are embedded throughout business processes and technologies.

Key Elements of the Privacy Program:

- **Proactive Privacy Impact Assessments and Data Protection Impact Assessments (DPIA)** for business activities involving the collection, use, dissemination and maintenance of PHI, demonstrating integration of privacy safeguards and providing insights into privacy risk exposure and compliance.
- **Breach Notification Process** includes reporting obligations through a risk assessment and application of a harm threshold framework compliant with data breach notification laws of each US state as well as applicable federal laws.
- **Annual Training** guided by our [Ethics Every Day](#) policy and internal Enterprise Privacy Policy. All employees receive mandatory annual training with respect to protected information, with additional role-based modules for employees handling sensitive data.
- **Policies Governing Data Access and Sharing** are maintained and updated regularly to reflect evolving privacy risks and expectations.

- **Data Governance Office** was established to provide oversight, processes and controls to ensure data usage, transparency and nonrepudiation.
- **Data Privacy and Security Policies** are evaluated at least annually.

How Humana communicates and upholds member

privacy



We strive to clearly and transparently communicate how personal information and protected health information (PHI) are collected, used, retained and disclosed. Key elements of our member-facing privacy practices include:

Accessible privacy resources that explain the types of data we collect, how we use it and the choices available to individuals consistent with regulatory requirements, including our:

- [Notice of Privacy Practices](#)
- [Privacy Policy](#)
- [Privacy Forms](#)

Privacy choices and controls that allow individuals to opt-out of certain features when engaging with us online.

Timely updates to our Privacy Policy, including a clearly displayed “last updated” date, so stakeholders remain aware of changes.

Member rights—such as the ability to access, amend or exercise other rights provided under HIPAA, state consumer laws and financial privacy regulations—which we support through established processes and support resources.

Managing supplier data security

We safeguard data used by third-party suppliers engaged in work on our behalf. Our third-party risk management program requires technology suppliers and vendors to sign an Information Security Agreement formalizing their compliance with our Enterprise Information Protection (EIP) standards while accessing, hosting or transmitting Humana’s data. We also maintain a program to identify potential cybersecurity risks associated with third-party vendors and conduct comprehensive data security diligence prior to suppliers’ onboarding. Then, as part of our ongoing third-party cybersecurity risk assessment and security audit processes, suppliers may be asked to participate in related activities to verify compliance with our requirements. Remediation actions are tracked and completed as needed to maintain compliance and protect sensitive information.



Demonstrating compliance through certifications and audits

To further reinforce our accountability and verify compliance with state laws and regulations, we engage independent third-party firms to perform annual audits of the Service Organizational Controls 2 (SOC 2) of enterprise claims platforms within the following Trust Services Criteria: availability, confidentiality, security and processing integrity.

Our information protection policies, standards and enterprise procedures are based on industry frameworks, security industry best practices and regulatory requirements that address several Humana compliance objectives and substantiate the efficacy of our world-class security program. Humana’s security foundation includes, but is not limited to, the following:

- Security controls aligned with the National Institute of Standards and Technology (NIST) SP 800-53 Security Controls and the NIST Cybersecurity Framework
- Health Information Trust Alliance (HITRUST) Common Security Framework
- Health Information Technology for Economics and Clinical Health Act (HITECH)
- Payment Card Industry Data Security Standard (PCI DSS)
- ISO / IEC 27002:2005



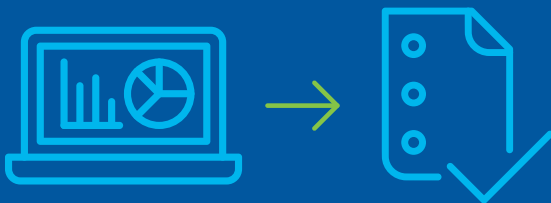
Ethical and responsible use of artificial and augmented intelligence

At Humana, we’re leveraging advanced technologies in artificial and/or augmented intelligence (AI) as we continue to transform the healthcare experience for our members and patients. As part of our whole-person approach to health and care, we utilize data-driven analytics with AI to form a health journey that delivers care, ease and personalization to improve health outcomes.



Getting A’s in intelligence

Artificial intelligence: Uses statistical equations to quickly analyze complex data.



Augmented intelligence: Shares artificial intelligence findings with a human user, such as an employee or member, so they can decide what action to take next.



Humana is committed to using AI to help distill and translate data into actionable information which can lead to better quality of care, enhanced customer interactions and operational efficiencies. To that end, we are advancing three main uses of AI in our business:

- **Improving Engagement with AI as a Concierge:** Deliver easier, intuitive experiences for customers and providers, which simplify interactions with Humana across ordinary business touchpoints.
- **Automating Tasks with AI Agents:** Enable automation of repetitive tasks to improve the employee experience and increase our “back office” efficiency.
- **Equipping Employees for Personal Productivity:** Equip employees with tools that help employees increase their efficiency and enable diverse and interactive tasks, such as summarizing content and knowledge management.

The modern healthcare ethic—first, do no harm—informs Humana’s use of AI and advanced analytics. We hold ourselves to high ethical standards and believe our engagement with AI and advanced analytics should follow suit by aligning with Humana’s core principles, promoting member health and well-being and being thoughtful and selective on use cases.

We work under responsible AI standards to ensure our AI tools do not incorporate unintentional bias, require all AI models to be reviewed to detect inadvertent bias and ask our vendors who utilize AI tools to take action throughout the design and production lifecycles to eliminate or reduce identified risks, including bias risks. We also deploy appropriate due diligence and oversight mechanisms to identify, prevent, mitigate and account for the impact of AI on access to healthcare, respecting human rights and the rule of law. Finally, we conduct routine, responsible AI impact assessments and model testing to identify and assess benefits, concerns, potential effects and risks of the use of AI.

Humana defines a Responsible AI technology as one that exemplifies the following seven core principles of Responsible AI.

Responsible AI principles



Responsible use

Thoughtful selection technology that aligns with Humana’s core principles and enhances our ability to provide effective and accessible healthcare services

Equity, fairness and inclusivity

Commit to (i) ensuring members with similar symptoms and conditions are treated similarly, (ii) detecting and reducing unintended bias and (iii) updating algorithms regularly for inclusion of evolving clinical practices, treatments and emerging member care needs

Quality, safety, reliability and trust

Technology is tested before and after deployment, using end-to-end quality controls to ensure data quality and integrity and is continuously available so members experience uninterrupted healthcare and benefits

Transparency and explainability

Open communication with users, stakeholders and appropriate audiences to provide education and information as advanced analytics become more sophisticated

Privacy, security and compliance

Secure customers’ personal information and records by incorporating privacy principles and security controls into the development and use of AI and advanced analytics

Ethical and patient-centered

AI and advanced analytics require a human and clinical approach so that AI is appropriately used to inform, supplement or augment human clinical decision-making

Accountability and governance

Clinicians retain decision-making authority to exercise appropriate levels of informed judgment in clinical matters, and the use of technology is transparent and auditable

Structuring AI governance roles and responsibilities

Humana’s AI governance structure includes oversight from the Board of Directors—primarily through the Audit Committee and Technology Committee—and the Enterprise Leadership Team (ELT). Our AI enablement program and Responsible AI Team provide specialized

expertise and oversight, ensuring all AI projects adhere to ethical guidelines and best practices.

We deploy our Three Lines of Defense risk management model to delegate key responsibilities to appropriate stakeholders for critical AI governance and control processes dividing Responsible AI oversight responsibilities across three groups:

First line

The First Line is comprised of the business segment and support functions that are responsible for the day-to-day management of business operations and related risks, including:

- Development, implementation, use and ongoing monitoring of AI applications
- Developing process for timely and appropriate peer review and fairness analysis of AI applications
- Incorporating appropriate controls within AI process models and timely remediation of identified gaps or issues
- Establishing regular review, certification and attestation to the completeness and accuracy of inventory records for AI models

Second line

The Second Line provides oversight over First Line activities and is comprised of Humana’s Law Department, Enterprise Risk Management and Enterprise Compliance teams and the Office of the Chief Insurance Actuary, responsible for:

- Partnering with first line teams to develop and maintain appropriate AI guidelines
- Monitoring adherence to AI guidelines through a variety of peer reviews, assessments and related metrics
- Developing procedures for enterprise model inventory (including models classified as AI)
- Reporting and/or escalating relevant updates to the ELT and/or Board as appropriate
- Providing independent peer reviews of actuarial models and documentation of any identified gaps or issues
- Providing guidance and oversight for actuarial AI models

Third line

The Third Line is comprised of Humana’s Internal Audit Consulting Group, responsible for:

- Independent and objective assurance to senior management and the Board Audit Committee that the company’s AI governance and control processes are appropriately designed and operating effectively



Ultimately, we’ll measure success by how well we can use these technologies to improve health outcomes and enhance the experience for our members, patients and provider partners, while bringing simplicity and efficiency to our healthcare system. We’ll continue to listen to our seniors and healthcare professionals to ensure that we’re adding value and enabling high-quality, safe and effective care—always our top priority.

Board & ELT Oversight

The company’s Board of Directors (through shared responsibility of the Audit Committee and Technology Committee as set forth in the respective charters for those committees) and ELT provide ongoing oversight of Humana’s AI Governance, including regular reviews of AI metrics, initiatives and related reporting, as well as periodic review and/or approval of the company’s Responsible AI standards. The Board receives regular updates from the company’s Chief Information Officer and other members of the ELT regarding the progress of AI deployment initiatives, the development of trends in the regulation of AI and alignment with responsible AI principles.

AI Enablement Program and Responsible AI

The AI enablement program oversees a playbook to establish a framework for Humana’s AI initiatives, emphasizing strategic alignment with business objectives, compliance with regulatory standards and the Enterprise Risk Management Framework. Accountability, transparency and structured oversight are foundational to our use of AI and data analytics. The Responsible AI team, comprised of subject matter experts from across the enterprise, provides specialized expertise and oversight to ensure that all AI projects adhere to ethical guidelines and data science best practices, further mitigating risk and supporting long-term shareholder value.



Listening to clinicians

Burnout in the healthcare industry has been well-documented in recent years. A primary contributing factor is increasing administrative burden that competes for valuable hours in a day and has an impact on patient care and work-life balance. We are deploying emerging technology to reduce administrative burden by automating manual tasks, allowing our providers to focus on patient care. Examples are:



AI can sift through volumes of medical records to provide a concise health summary, which empowers our clinicians to better understand our patients’ needs.



Simplifying pre-visit preparation allows healthcare practitioners to spend more time with patients in appointments addressing health needs.



Clinicians can also leverage AI to capture relevant medical information and construct a comprehensive document for the medical record. This ambient listening, with the consent of the patient, allows for greater focus on the provider-patient interaction.

Clinicians who use these technologies retain decision-making authority in order to exercise appropriate levels of informed judgment in clinical matters, the necessary “human in the loop.”

Listening to our customers

Seniors want quality, comprehensive care that better addresses their unique health needs in a simpler, more easily understood manner. And while our work with AI won't eliminate all of the fragmentation impacting the healthcare system, we are looking at specific processes that can be burdensome and working to address them for our seniors.

One of the goals is to improve medication adherence—which is crucial to disease prevention and management—and we already know using home delivery pharmacy services does that.

80% of seniors live with two or more chronic conditions

1 out of 3 seniors regularly take at least five prescriptions

Using AI, we can optimize the delivery of medications to our seniors. From identification of potential adherence gaps to ensuring our patients have the right medication at the right time, AI can transform how our patients receive their medications. For example, enhancing our mail-order shipping algorithms can consolidate shipment of medications, so seniors receive fewer deliveries.





Improving our member experience

Prior authorization is an important tool that ensures the healthcare services providers administer are necessary and appropriate for a patient’s care. We use standards based on medical guidelines, cost and other factors, to limit overutilization or the use of services that lead to waste in the healthcare system and do not result in any measurable quality improvement. But we believe that prior authorization should be speedy and transparent, so it is rarely, if ever, felt by our members.

To that end, we’ve made certain public commitments for 2026, including:



Eliminating one-third of prior authorizations for outpatient services and all authorization requirements for certain types of diagnostic services by January 1.



Launching a national gold card program that waives prior authorization requirements for certain items and services for providers who have a proven record of submitting coverage requests that meet medical criteria and delivering high-quality healthcare.



Reporting publicly on our prior authorization metrics, including approvals, denials, and approvals after appeal, as well as average time between submission and decision.



Providing a decision within one business day on at least 95% of all complete electronic prior authorization requests by January 1.

To meet these commitments, we are using technology like artificial intelligence to transform how we perform prior authorization in support of our human clinical reviews and physician Medical Directors. For example, in the past, clinicians had to manually search fragmented

and lengthy clinical documentation to make authorization determinations and document evidence, increasing risk of error, duplicative work and contributing to longer turnaround times, ultimately impacting our members’ experience.

Today, we deploy artificial intelligence-supported tools like optical character recognition (OCR) and natural language processing (NLP) to:



Image and process the medical records we receive from providers into a searchable and readable format.



Create lists of potential relevant sections of medical documentation to allow clinical reviewers to navigate to useful content more efficiently.



Assist human clinical reviewers in creating clinical summaries by enabling them to apply their own annotations to the medical record documentation using highlighting and text annotation.

To the extent we use AI in internal utilization management processes more broadly, our approach focuses on keeping a “human in the loop” whenever such AI is utilized; this is commonly referred to as “Augmented Intelligence.” Various tools are used to expedite, and sometimes automate, approvals of UM requests where information submitted by providers satisfies coverage requirements. For all other utilization management (UM) requests, coverage determinations are made by human clinical reviewers and physician Medical Directors based on the healthcare needs of the patient, the medical judgment of those physicians and clinicians and applicable guidelines—such as those put in place by CMS. Importantly, adverse medical necessity decisions (denied authorization requests) are only made by physician Medical Directors.



For the environment

- 74 Reducing greenhouse gas emissions
- 77 Improving energy efficiency

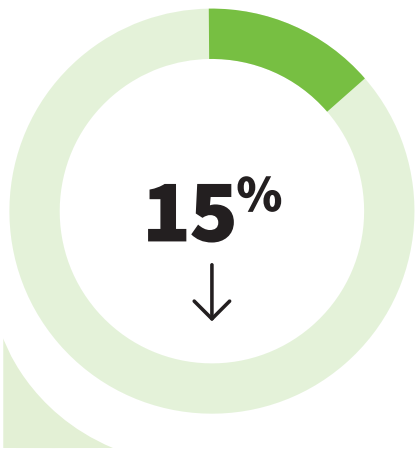


FOR THE ENVIRONMENT:

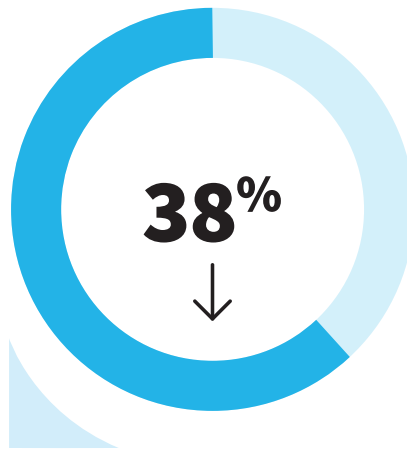
Top takeaways

14%

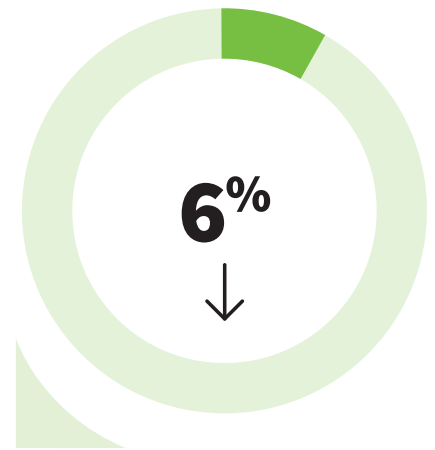
reduction in Scope 1 & 2 greenhouse gas emissions from the base year.



reduction in aviation emissions since 2019



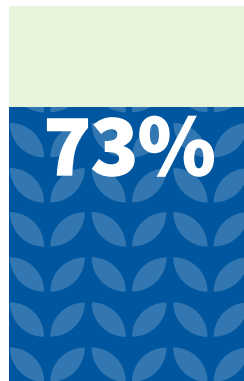
reduction in vehicle fleet footprint



reduction in energy use intensity vs 2024 base year



diversion rate across administrative locations



diversion rate across CenterWell Senior Primary Care® sites



216

tons of furniture and supplies donated for reuse (~\$3.64M in-kind value)

Fostering a healthier planet is essential to helping people achieve their best health.

Guided by science-based targets and a commitment to sustainable operations and digital innovation, we are taking meaningful steps to protect our planet and the communities we serve.

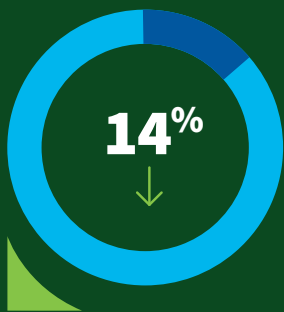
Reducing greenhouse gas emissions

Helping people achieve their best health includes taking accountability for our environmental impact. In 2025, we expanded our validated Science Based Targets initiative

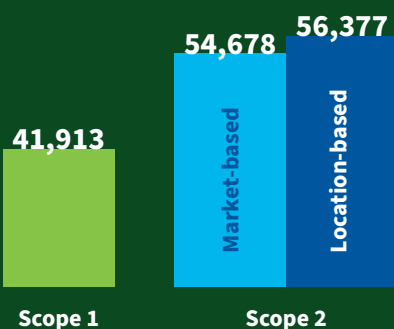
(SBTi) commitment with the approval of a new financial institution target. This important milestone highlights Humana’s dedication to sustainability and reinforces our commitment to improving health and well-being, while aiming for meaningful emissions reductions across the company’s value chain. We’re focused on reducing our greenhouse gas emissions, both within our organization (Scopes 1 and 2) and through the vendors we partner with and our investment portfolio (Scope 3). Through this commitment, we are driving progress today and building a foundation for long-term decarbonization.

Science-based targets

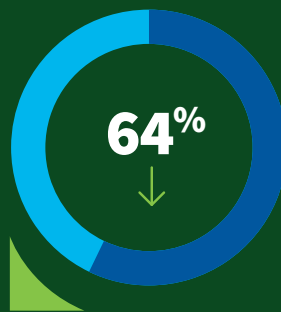
Scopes 1 and 2—GHG emissions measured in mtCO2e



Scope 1 and 2 total reduction from base year



Scopes 3—Supply chain¹ measured in mtCO2e

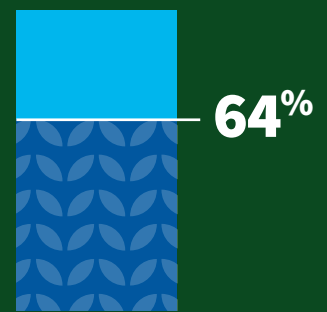


Scope 3 total decrease during 2025²



¹ During 2025, our Scope 3 target (categories 1 and 4) was re-baselined from a 2021 base year to a 2022 base year, with validation received from SBTi.
² Refer to the Environmental Year-Over-Year Inventory table in the Appendix to this report for additional YOY details.

Scopes 3—Financed emissions



SBTi validated target achievement



of our listed equity and corporate bond portfolio (by invested value) have set SBTi validated targets as of Dec. 31, 2025, representing a 5% increase since 2024YE and approx. 64% target achievement.

Advancing emissions reductions across our operations (Scopes 1 and 2)

We have improved efficiency in the areas we directly control—aviation, vehicle fleets and facilities. By rightsizing infrastructure, optimizing utilization and reducing emissions intensity, we delivered reliable care and minimized our environmental footprint. Our approach is proactive and focused on quality outcomes for our members and the planet.



Aviation

- Enhanced flight-data analytics and optimized scheduling to reduce flight hours
- Modernized fleet operations, divesting less fuel-efficient aircraft
- Enabled same-day, point-to-point missions to avoid higher-emission travel
- Improved emissions efficiency by increasing productivity per passenger hour, estimated in-flight productivity enabled: **\$504,000**
- Identified future decarbonization opportunities which include an electric aircraft tug, energy-efficient lighting, sustainable catering materials and other low-impact practices



Vehicle fleet

- Aligned inventory to business needs with increased adoption of lower-emitting vehicles
- Reduced overall fleet footprint by **38%** year over year through rightsizing initiative
- Increased avg. fuel efficiency by **17%** year over year
- Decreased CenterWell Home Health® fleet emissions by **4%** compared to the same period last year
- Increased hybrid vehicle count by **56%** year over year



Facilities

- Implemented targeted energy-efficiency upgrades
- Expanded building automation and monitoring
- Continued to pursue opportunities to increase renewable electricity coverage through renewable energy credits (RECs), offsetting a portion of our operational electricity

Reducing emissions across our value chain (Scope 3)

Most emissions occur beyond our direct operations. Humana partners with suppliers and stakeholders to drive meaningful change across our value chain. In 2025, we established a Supplier Code of Conduct that embeds environmental sustainability expectations and advanced accountability for financed emissions through validation of our Scope 3 financial institution target—reflecting our broader role in the health ecosystem.

By strengthening environmental expectations, improving data quality and aligning investments with climate-responsible outcomes, we help close health gaps and support the whole-person—inside and outside our organization.



Strengthening supplier engagement

We consistently engage suppliers to improve emissions data quality, increase visibility into supply-chain impacts and support future emissions-reduction planning. Environmental considerations are integrated into procurement strategies and contracting, and supplier sustainability assessments to provide insights into supplier practices and aid in our supplier development initiatives.

Supplier participation in our 2025 Supplier Sustainability Survey exceeded expectations, achieving:

32% response rate, representing

\$818.8M in spend, across

80 prime suppliers

Coverage and progress of the company’s supplier assessment program

2,659 total Tier 1 suppliers

281 total significant suppliers in Tier 1

54% of total spend on significant suppliers in Tier 1

\$4.4B of total spend on significant suppliers in Tier 1

0 significant suppliers in non-Tier 1

281 significant suppliers (Tier 1 and non-Tier 1)

Improving energy efficiency

We are committed to smarter energy management across our facilities and data centers. Through building automation systems (BAS), real-time analytics and targeted retrofits, we are reducing our carbon footprint while ensuring reliable and sustainable care for our members and communities.

Key actions include:

- Identified and prioritized efficiency opportunities across clinical and administrative sites
 - Conducted energy-efficiency surveys at **285** clinics
 - Achieved a **6%** reduction in energy use intensity compared to 2024
- Replaced **14** heat pumps at our Louisville campus with new units that are averaging approximately **8%** more efficient heating and **18%** more efficient cooling
- Deployed a fault detection and diagnostics platform to continuously monitor building performance that detects real-time inefficiencies and alerts our operations team to correct energy waste, which resulted in an **8%** decrease in energy consumption for sites where the platform is operational
- Implemented computer room air conditioning (CRAC) units and hot/cold aisle containment systems in data centers to improve cooling efficiency and reduce total energy consumption
- Connected all above-ground floors of our Waterside building in Louisville to a lighting control system
- Pursued ENERGY STAR® certification at our Waterside building in Louisville, Kentucky
- Reduced emissions through real estate optimization of owned and leased office space by **9%** from a 2024 baseline which resulted in an estimated emissions reduction of **2%**
- Reducing waste and advancing circular operation



We're advancing circularity by prioritizing reuse, recycling and landfill diversion. During major transitions, such as campus consolidations, we redeploy and donate materials to reduce landfill waste and support local organizations. By strengthening the coordination of waste management and expanding recycling efforts, we help build healthier communities.

Key actions include:

- Reduced landfill waste and avoided unnecessary procurement during Louisville campus consolidation
 - Redeployed nearly 5,500 items internally from the Humana Tower decommissioning, generating approximately **\$2.17 million** in cost savings and achieving a **99%** diversion rate for furniture and fixtures during this effort
 - Donated over **3,500** items to **55** local organizations
- Achieved significant waste diversion across facilities and operations to support our commitment to circularity and landfill reduction
 - **93%** waste diversion rate for furniture and fixtures
 - **97%** diversion rate across administrative locations
 - **73%** diversion rate across CenterWell Senior Primary Care® sites
- Strengthened waste tracking to support future reduction efforts, including baseline waste services data for **282** buildings

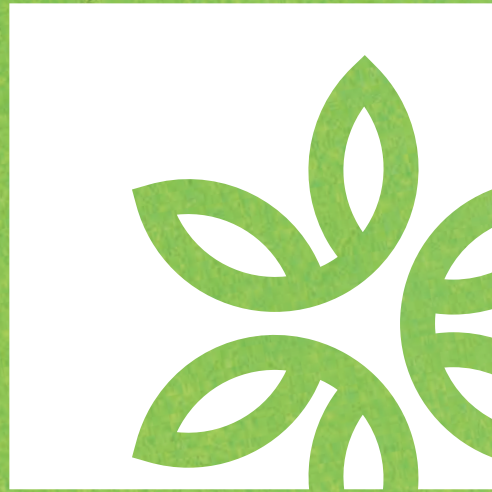


Humana exists to help people achieve their best health.

We fulfill that purpose by simplifying the path to care and creating a more connected, affordable healthcare system. Across individuals, communities and the broader environment, Humana and CenterWell are advancing better

outcomes through high-quality care, strong partnerships and a workforce committed to our mission. With people at the center, we're building what comes next in better health.





Humana®

 CenterWell™