



HFS
Illinois Department of
Healthcare and Family Services

JB Pritzker, Governor
Elizabeth M. Whitehorn, Director

201 South Grand Avenue East, Springfield, Illinois 62763
Telephone: +1 217-782-1200, TTY: +1 800-526-5812



March 2, 2026

Samantha Olds Frey
Humana MMAI Health Plan

RE: Humana DSNP Untimely January 2026 Community Outreach Events Sanction

Dear Ms. Olds Frey:

This letter serves as written notification to Humana DSNP Health Plan (“Humana”) of sanction pursuant to Section 1.2.38.H of the Contract for the Dual-Eligible Special Needs Plan (DSNP) between the Department of Healthcare and Family Services (“Department”) and Humana.

Humana failed to submit their January 2026 Community Outreach Events Report into the DSNP SharePoint library, on or before January 31, 2026. The report was uploaded to the SharePoint library on January 26, 2026 but was not “Checked In” until February 2, 2026. In addition, Humana did not request an extension to the report due date. MCO Policy 049 states the Contractor’s designated SharePoint users (staff) must regularly upload/submit timely and correctly, the required deliverables in compliance with the Administrative Deliverables Site Library. This includes the Contractor’s designated SharePoint users shall ensure that reports are “Checked In” after uploading or viewing. If a report is not “Checked In”, the report has not been fully and completely submitted and is considered pending with the Contractor. Timely submission of SharePoint materials is based on the date and time of the “Checked In” action performed by the Contractor SharePoint user. Failure of the MCO to correctly submit deliverables in compliance with the requirements of the SharePoint Administrative Deliverables Site, including but not limited to the requirements of the Managed Care Program Contract(s), may result in the Department issuing sanctions to the MCO, including monetary penalties as provided in each Managed Care Program Contract. As such, the Department is sanctioning Humana \$5,000. Humana is to issue an electronic payment to the Department, by either ACH or Wire Transfer, no later than Friday, March 27, 2026. The electronic payment shall include the following fields for payment identification and tracking purposes by the Department:

ORIG CO NAME: Humana Health Benefits Plan
ORIG ID: XXXXXXXXX
ENTRY DESCR: this is to be left blank
ENTRY CLASS: CCD

TRACE NO: *Bank Information*
ENTRY DATE: *yymmdd*
IND ID NO: *Bank Information*
IND NAME: **Humana Health Benefits Plan**
REMARK: **Hum Jan 26 Community Outreach Sanction**
ORIG BANK: *Bank Name*

*The information highlighted in yellow is specific to the Department and payment detail requirements, and shall not be changed or modified by the MCO.

*The information in gray is the banking information.

If you have any questions regarding this notification, please contact your HFS Account Managers Jessica Pickens at Jessica.A.Pickens@illinois.gov or Veronica Trimble at Veronica.A.Trimble@illinois.gov.

Sincerely,

Helena Lefkow, Deputy Administrator, Managed Care Performance
Division of Medical Programs

cc: Amanda Harcus, Craig Stokan, Kevin Sebaski, Keshonna Lones, Rich Allen, Veronica Trimble, Amy Roberts, Adam Lewis, Jessica Pickens.