



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2019

1. Corporate ID No. 000157083

2. Name of Corporation HUMANA HEALTH PLAN, INC.

3. Street Address Principal Business Office:

No. and Street: 321 WEST MAIN STREET
12TH FLOOR

City or Town: LOUISVILLE State: KY Zip: 40202 Country: USA

4. Business Phone No.

5. State of Incorporation

State: KY

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

524114

6. Brief Description of the Character of Business Conducted in Rhode Island

HEALTH MAINTENANCE ORGANIZATION

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SVP, MEDICARE DIVISIONAL LEADER	DANIEL A TUFTO	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA

SVP, ASSOCIATE GENERAL COUNSEL & SECRETARY	JOSEPH C VENTURA	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, MEDICARE DIVISIONAL LEADER	RICHARD A VOLLMER JR	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, CHIEF ACCOUNTING OFFICER & CONTROLLER	CYNTHIA H ZIPPERLE	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
VICE PRESIDENT & TREASURER	ALAN J BAILEY	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
VICE PRESIDENT	DOUGLAS A EDWARDS	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
VICE PRESIDENT, CHIEF COMPLIANCE OFFICER	SEAN J OREILLY	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
VICE PRESIDENT, INVESTMENTS	WILLIAM MARK PRESTON	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
VICE PRESIDENT	RALPH M WILSON	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
DIRECTOR, SEGMENT PRESIDENT, RETAIL	TIMOTHY ALAN WHEATLEY	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
DIRECTOR, CFO	BRIAN A KANE	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
CHIEF INFORMATION OFFICER	BRIAN P LECLAIRE, PHD	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SEGMENT PRESIDENT, GOUP BUSINESS	CHRISTOPHER H HUNTER	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
REGIONAL PRESIDENT	CHARLES W DOW JR	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
REGIONAL PRESIDENT	BRUNO R PIGUIN	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SENIOR VICE PRESIDENT, MEDICAID PRES	JOHN E BARGER III	5 LOUISVILLE, KY 40202 USA
SVP, MEDICARE W AND MARKETPOINT,	JEFFREY C FERNANDEZ	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, EMPLOYER GROUP AND SPECIALITY	MARK M MATZKE	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SENIOR VICE PRESIDENT, MEDICARE	STEVEN E MCCULLEY	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, MEDICARE DIVISIONAL LEADER	TIMOTHY P OROURKE	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, CHIEF ACTUARY	VANESSA M OLSEN	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, EMPLOYER GROUP SALES	RICHARD D REMMERS	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, MEDICARE EAST & PROVIDER	GEORGE RENAUDIN II	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SENIOR VICE PRESIDENT	HANK ROBINSON	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
SVP, MEDICARE DIVISIONAL LEADER	GILBERT A STEWART	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
APPOINTED ACTUARY	SUSAN L MATEJA	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA
DIRECTOR, PRESIDENT & CEO	BRUCE D BROUSSARD	500 WEST MAIN STREET LOUISVILLE, KY 40202 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.0000	5,000,000.00	2248000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 16 Day of January, 2019 at 1:37:20 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By HANK ROBINSON
Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07

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