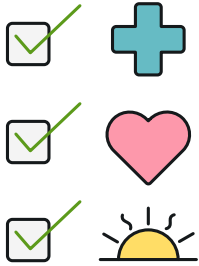




Group Medicare Insights: Plan quality, design, and performance

How Medicare HEDIS scores improve in a value-based care framework



In a value-based care (VBC) model, the quality of care and level of service provided by health plans improve across several measures.

Humana's 12th annual value-based care report illustrates how Medicare VBC providers garner higher HEDIS scores across all metrics when compared with their non-VBC counterparts. VBC providers' superior scores reflect the improved quality of care received by their patients.

What is HEDIS?

Healthcare Effectiveness Data and Information Set (HEDIS®) measures a range of issues related to performance and quality related to various dimensions of care and service.¹

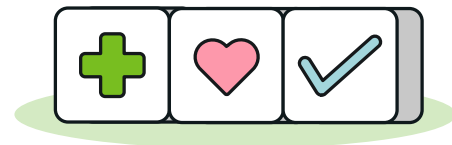
HEDIS scores are important because they:

- ✓ Encourage preventive care
- ✓ Improve accountability and transparency
- ✓ Allow comparisons between health plans

How does value-based care lead to HEDIS improvements?

As illustrated in [Humana's 12th annual VBC report](#), VBC providers outperformed non-VBC providers in the following areas:

- + Preventive screenings
 - Including breast cancer and colorectal cancer
- + Senior care
 - Including pain assessment and medication review
- + Condition management
 - Including diabetes eye exams and controlling blood pressure
- + Care coordination
 - Including transition of care and post-discharge medication reconciliation



1. [U.S. Department of Health and Human Services website](#), "Healthy People 2030," accessed March 16, 2026

To learn more, visit [Humana Group Medicare](#)