# Glossary of terms

#### Accepting new patients

Doctors indicate whether they're accepting new patients when they first join Humana's network. Thereafter, providers notify Humana of changes in their accepting new patients status as part of their obligation under Humana's network participation agreement. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to verify if they are accepting new Medicare members. Humana updates this information any time the doctor asks us to. However, it is a good idea to call the provider's office to be sure.

## Board Certification/Board Certified

According to the American Board of Medical Specialties (ABMS), certification by a medical specialty board provides assurance that a doctor has the appropriate knowledge, skills, and experience needed to deliver optimum care in a specific area of medicine. The ABMS represents 24 medical specialty boards, which establish and maintain standards for both doctor certification and delivery of safe, high-quality medical care. The American Osteopathic Association (AOA) also has specialty boards that certify doctors who practice osteopathic medicine. Humana verifies the board certification status of doctors at the beginning of their relationship with Humana and every three years thereafter. To check a doctor's board certification status with the American Board of Medical Specialties, visit their Website at www.abms.org

## Certifications, accreditations and recognitions:

Providers may achieve certifications, accreditations, or other forms of recognition in their field. When applicable, these will display in the directory. Following are some key examples for different provider types:

#### Hospital accreditation:

Humana verifies the accreditation status of hospitals at the beginning of their relationship with Humana and every three years thereafter. For example, hospitals may achieve accreditation from the The Joint Commission (TJC), which is an independent, not-for-profit, organization that accredits and certifies healthcare organizations who meet certain performance standards. For more information on TJC, or to verify a hospital or other healthcare facility's accreditation, visit their Website at <u>www.jointcommission.org</u>

#### Leapfrog Hospital Survey:

The Leapfrog Group logo is displayed in the directory listing for hospitals who participate in the Leapfrog Hospital Survey. This survey is voluntary and evaluates hospital quality, safety, and resource use. You can look up reports and data on specific hospitals by visiting The Leapfrog Group Website at <u>www.leapfroggroup.org</u>. Humana verifies which hospitals participate in the Leapfrog Hospital Survey on a monthly basis from July to February, and updates the directory listings accordingly (in the other months Leapfrog is updating the survey and does not release new data).

#### Physician recognition:

Primary care physicians may achieve recognition as a Patient Centered Medical Home (PCMH) from the National Committee for Quality Assurance (NCQA). NCQA recognizes primary care practices that meet rigorous standards for meeting patient needs, including access to care after hours, proactive coordination of care, and adherence to certain performance measures and quality improvement processes. Besides PCMH recognition, physicians may achieve recognition from NCQA for other types of care, including diabetes care, heart/stroke care, or recognition as a Patient-Centered Specialty Practice (PCSP). Humana obtains data on physician recognition status from NCQA on a monthly basis and updates directory listings accordingly.

#### Gender

Doctors state whether they're male or female when they first join Humana's network. Humana also updates this information any time the doctor asks us to.

## Hospital privileges

Hospital privileges grant authority to a health care provider to provide patient care in a hospital. In order to get privileges, health care providers have their credentials fully reviewed to determine if they are properly licensed and have the appropriate experience to perform the procedures they are planning to perform. Health care providers inform Humana of their hospital privileges when they first join Humana's network and go through Humana's credentialing process, and again at re-credentialing every three years. Humana also updates this information any time the doctor asks us to.

#### Languages spoken

Providers indicate the languages they or their office staff speak when they first join Humana's network and go through Humana's credentialing process, and again at re-credentialing every three years. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to verify languages spoken. Humana also updates this information any time the provider asks us to.

#### Name

Healthcare providers submit their name when they first join Humana's network and go through Humana's credentialing process, and verify it again at re-credentialing every three years. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to verify this information (for example, a doctor may change his/her name following a marriage or divorce). Humana also updates this information any time the provider asks us to.

# Office locations and phone numbers

Providers supply information about their office location or facility location when they first join Humana's network. Thereafter, providers notify Humana of changes to their office addresses and phone numbers as part of their obligation under Humana's network participation agreement. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to verify office addresses and phone numbers. Humana also updates this information any time the provider asks us to.

## Practice Focus

Practice Focus identifies providers who focus on particular types of care within their specialty. For example, a Psychologist may have a practice focus of "Mood disorders/Depression" or "Marital Therapy." Practice Focus displays in the directory only when it is applicable to a specific provider, so there are many directory entries where it does not appear. Behavioral health providers, such as Psychiatrists and Licensed Mental Health Counselors, often have a practice focus. When you search for behavioral health specialties, the initial search results page will display a list of choices for Practice Focus in the "Narrow Your Results" section of the screen. This will help you find the type of provider you are looking for. Providers submit their practice focus when they first join Humana's network and again at re-credentialing every three years. Humana updates the information any time the provider asks us to. Practice focus information is supplied by the provider and is not verified with any other source.

## Practice group/Affiliations

Selecting this option from the "Narrow Your Results" menu on the initial search results screen allows you to find doctors affiliated with a group of providers, such as "Midtown Cardiology" or "East Side Family Practice." Doctors tell us their group affiliations when they first join Humana's network and go through Humana's credentialing process, and again at recredentialing every three years. Providers are expected to notify Humana of changes to their group affiliation as part of their obligation under Humana's network participation agreement. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to verify group affiliations. Humana also updates this information any time the provider asks us to.

## Specialty

Doctors report their special field of practice or expertise when they first join Humana's network and go through Humana's credentialing process, and again at re-credentialing every three years. Humana verifies the provider's education and training with primary sources. Additionally, Humana contacts providers in our Medicare Advantage networks on a quarterly basis to confirm their specialty. Humana also updates this information any time the provider asks us to.