

Humana Member Summary overview

This document provides details on some of the key sections of the Humana Member Summary.

Patient quality

Star measures: Medicare members

- The reported time period varies based on the Star measure.
- The measures are predominantly based on the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®).
- A compliance indicator of “Y” (yes) indicates that the patient has received screenings at suggested patient-specific intervals, an “N” (no) indicates the patient has not. Please review the compliance date to verify if/when a Star measure requires action. Humana recognizes that physicians may have access to compliance-related data not available in Humana systems.
- Data is based on claims data and may lag up to 30 days.

Care alerts: Medicare members

- Rolling 12-month care alert information is shown for patient(s).
- “N” (no) indicates that Humana identified an opportunity to address a quality care opportunity.
- Only quality care opportunities are displayed.
- Information is refreshed every 24 hours.

Patient admission/readmission and emergency room (ER) visit summary – last 365 days

- This section reflects hospital admissions/readmissions and ER visits for a member in the last 12 months, as available.
- Re-admission is defined as an admission within 30 days of previous admission, regardless of the diagnosis code.
- Data is based on claims and may lag up to 30 days.

Health condition history

Hierarchical condition categories (HCC): Medicare members only

- Medicare risk adjustment diagnosis information for the current plan year and previous plan year is shown, if available.
- Data lag up to seven days. They are based on claims data, which is refreshed daily.

Pharmacy history – 365-day period reported

A rolling 12-month pharmacy history is shown based on claims and pharmacy and vendor data. This section includes medication, vaccination and allergy data.

- The “Drug Name and Information” indicator shows the prescribed drug name, prescribed dosage and the form of the drug.
- The “Times Filled” indicator represents the number of times a patient filled the prescribed medication.

- Other indicators include:
 - “Managing Prescriber”
 - “Source Identity”
- New prescriptions of the same drug are reflected as separate entries in the “Last Date Filled” indicator.
- Data lag time is minimal.

Lab results – 365-day period reported

- A rolling 12-month lab history is shown based on data available to Humana.
- Indicators include:
 - Logical Observation Identifiers Names and Codes (LOINC) and the representative codes
 - “Ordering Physician”
- Data is based on claims and direct lab feeds, e.g., LabCorp, and lag seven to 30 days.

Oral and ocular health history – last 365 days

- These sections reflect the member’s available dental and vision health history for the last 12 months.
- Data lag time is minimal.

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