



Humana Acquires Health Information Exchange Technology with Certify Data Systems

Dear Physicians and Office Staff:

I am very pleased to announce that Humana has acquired Certify Data Systems, a pioneer in health information exchange (HIE) technology.

Hospitals, physicians and laboratories across the nation use Certify's HealthLogix™ Enterprise HIE platform for two-way sharing of clinical information across different electronic health record systems (EHRs). The platform connects health care providers and allows real-time sharing of relevant patient health information. HealthLogix is designed to make sharing information between all parties involved in a patient's care easy and seamless.

At Humana, we are focused on using the power of technology to provide a more coordinated experience for our members and health care providers. The use of HIE technology can help us create a simpler consumer experience by connecting health care providers, members and Humana.

The implementation of Certify's HIE technology will also streamline the process of gathering and dispensing medical records data. Humana has more than 20 departments that request medical records from health care providers. Once a health care provider is connected to Certify's HIE technology, those Humana departments will be able to go to a single repository to access records, thus eliminating the need for multiple calls to a health care provider's office, possibly about the same record. Eventually, medical records requests should be eliminated as Humana will be able to access needed records in-house. This will save time for health care providers and their office staff members.

Certify Benefits for Health Care Providers

- Reduce duplicate testing by sharing information about patient lab and radiological tests (including results from previous lab tests)
- Reduce delays in complex claims processing by allowing for real-time access to the records that may be needed to complete adjudication of claims
- Help increase Healthcare Effectiveness Data and Information Set (HEDIS®) Star scores by providing actionable information at the point of care
- Help improve health outcomes by sharing patient quality measures
- Reduce gaps in care by facilitating the sharing of electronic health records among a member's various health care providers

Using HIE technology, health care providers can send Humana:

- Lab results
- Progress notes
- Patient history
- Vital signs

Using HIE technology, Humana can send health care providers:

- **Payer-based Health Record:** A longitudinal health history based on claims data and lab results that are available at the point of care.
- **Humana Health Alerts:** Opportunities for intervention by health care providers that are identified by Humana. These are based on claims data and lab results for each patient and are focused on HEDIS measures and best practice guidelines.

HIE technology may also help health care providers to maximize their Humana rewards bonus. The Humana Rewards Program is based on HEDIS criteria. Using payer-based health record data may increase HEDIS scores and, as a result, help to increase a physician's Humana Rewards bonus. The medical record extraction part of the process will help capture all the services provided to a member, which may also help increase reward amounts.

For more information about Certify, please contact your market representative.

Sincerely,



Bruce Perkins
President
Health and Well-being Services

Humana Appoints Roy A. Beveridge, M.D., as Senior Vice President and Chief Medical Officer

Effective June 17, Dr. Roy A. Beveridge will begin his new role at Humana as senior vice president and chief medical officer.

Dr. Beveridge will serve on the company's executive team and report to President and Chief Executive Officer Bruce Broussard. He will focus on creating a collaborative and engaging environment for Humana's providers, while leading efforts to drive better health outcomes for members.

“Given his strong leadership, clinical expertise and deep understanding of the health care consumer, Dr. Beveridge is well positioned for success,” Broussard said. He is a highly collaborative leader with a commitment to evidence-based medicine. He also brings a clinical focus from a practicing physician’s perspective and has an extensive background in research, population health and clinical pathway development. “As Humana looks to expand our care delivery capabilities, a key element of the company’s integrated care delivery model, Dr. Beveridge will be instrumental in enabling us to achieve this important objective.”

Dr. Beveridge has a history of actively engaging the physician community and is experienced in developing physician communities of practice. His physician-centric view will enable Humana to more effectively align with the physician community.

Dr. Beveridge is currently chief medical officer for McKesson Specialty Health, a subsidiary of McKesson Corporation based in Texas. Prior to McKesson’s acquisition of US Oncology in 2010, he served as the executive vice president and medical director of US Oncology. Dr. Beveridge was also the co-director of the Bone Marrow Transplant Program at INOVA Fairfax Hospital in Virginia.

“Humana’s dedication as a long-standing advocate for encouraging providers to move from pay-for-service to pay-for-value and better health outcomes is vital to addressing the health care challenges we face today,” Dr. Beveridge said. “I’m looking forward to ensuring our members receive quality, affordable health care through a consistent, best-in-class clinical experience.”

Board certified in medical oncology and internal medicine, Dr. Beveridge has authored numerous articles on quality/value-based medical practice, as well as hematology and stem cell transplantation. He has more than 25 years of experience in the medical community.

Dr. Beveridge earned a Bachelor of Arts degree in biology/cell biology from Johns Hopkins University and a medical degree from Cornell University Medical College. He completed his residency in internal medicine at University of Chicago Hospitals and his fellowship at Johns Hopkins University.

RightSource Specialty Stocks Limited Distribution Drugs

Limited distribution drugs (LDD) are medications that may have special dosing or monitoring requirements that need to be followed very closely. Because of this, the manufacturer sometimes chooses to limit the distribution of the drug to only a few pharmacies. This type of restricted distribution helps the manufacturer keep track of drug inventory, properly educate dispensing pharmacists about necessary monitoring and helps minimize risks that could be associated with the LDD.

Limited distribution drugs are only available through a specialty pharmacy. RightSource Specialty carries many limited distribution drugs and is a convenient and hassle-free way for Humana members to fill prescriptions for them.

Below is a list of some of the limited distribution drugs available from RightSource Specialty:

- Advate
- Aldurazyme
- Alphanate
- Alphanine SD
- Ampyra
- Aubagio
- BebulinVH
- Benefix
- Berinert
- Carimune
- Cerezyme
- Elaprase
- Erivedge
- Exjade
- Eylea
- Fabrazyme
- FeibaVH
- Firazyr
- Flebogamma
- Flebogamma DIF
- Gamastan
- Gammagard
- Gammaked
- Gammaplex
- Gamunex
- Helixate
- Hemofilm
- Hizentra
- Humate-P
- Koate
- Kogenate FS
- Letairis
- Lucentis
- Makena
- Monarc-M

- Monoclate-P
- Mononine
- Myozyme
- Novoseven RT
- Octagam
- Perjeta
- Pomalyst
- Privigen
- Profilnine SD
- Promacta
- Recombinate
- Revlimid
- Stivarga
- Synagis
- Tecfidera
- Thalomid
- Tracleer
- Vpriv
- Wilate
- Winrho
- Xyntha
- Zemaira

This list is subject to change without notice to accommodate the introduction, removal and availability of new drugs and clinical information.

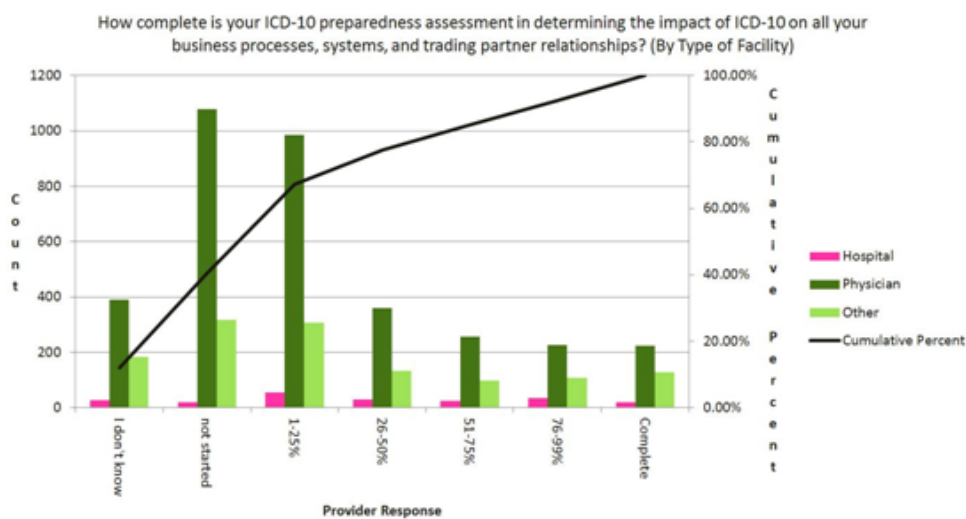
Specialty medications may require prior authorization. Coverage for these medications may vary with respect to the individual member's plan.

For information about limited distribution medications, health care providers can call RightSource Specialty Pharmacy at 1-800-486-2668. Prior authorization lists can be found at the following link: http://www.humana.com/providers/claims/pre_authorization.aspx.

Humana Shares Health Care Providers' ICD-10 Readiness Assessment

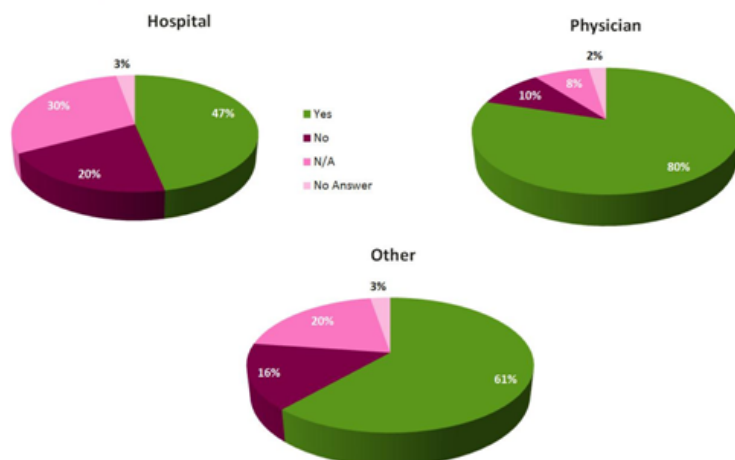
In order to assess how prepared health care providers are for the transition to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) code set on Oct. 1, 2014, Humana's ICD-10 team conducted a survey in the fourth quarter of 2012. The purpose of the survey was to determine how confident health care providers are about the migration to ICD-10, as well as to assess how prepared they are.

Of the 4,999 health care providers who completed the survey, approximately 85 percent have not yet begun to prepare for the transition to ICD-10.



Additionally, the survey showed that many physician practices appear to be relying on their practice management vendor (PMV) and software packages to handle the update to ICD-10 codes for them. By relying only on outside sources for ICD-10 remediation, practices may be overlooking the need for training and education for their coding staff.

Are you relying on your Practice Management Vendor to update your system for ICD-10?



According to the survey results, when preparing for the transition to ICD-10, hospitals and physician practices both highlighted training as their primary concern.

The key transition issues identified on the survey were:

1. Training
2. Impact on business practices
3. Impact on information technology departments
4. Budget

For more information on how to deal with those key issues, as well as staff training guides and helpful checklists, health care providers can visit <http://www.humana.com/providers/claims/icd-10>.

Get Ready for ICD-10

To learn more about how to prepare for ICD-10, plan to attend one of Humana's informational webinars. These free webinars will help educate health care providers about what steps they can take to help prepare for a smooth ICD-10 transition. Register for the webinars by emailing deployment@humana.com and put "ICD-10 Readiness" in the subject line of the email.

ICD-10 Readiness for Providers' Offices	ICD-10 Readiness for Facilities
Wednesday, June 19 2 p.m. EDT	Tuesday, June 25 11 a.m. EDT
Tuesday, July 23 11 a.m. EDT	Wednesday, July 17 2 p.m. EDT

Wednesday, Aug. 14 2p.m. EDT	Tuesday, Aug. 20 11 a.m. EDT
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For questions about training sessions, health care providers can send an email to deployment@humana.com. For general questions about ICD-10, health care providers can send an email to ICD10Inquiries@humana.com.

Explore the Benefits of Electronic Remittance Advice (ERA) and Electronic Funds Transfer (EFT)

Humana works to help health care providers find ways to save time and streamline administrative processes. Electronic remittances and payments can help make receiving payments and completing administrative transactions easier, faster and more efficient.

Humana currently offers electronic remittance advice (ERA) and electronic funds transfer (EFT) that are compliant with the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Following are some of the benefits of signing up for electronic remittance advice (ERA) and electronic funds transfer (EFT) from Humana:

Benefits of Electronic Remittance Advice (ERA):

- Receive Humana remittances electronically, saving time spent on manual processes, such as opening mail and calling customer service
- Reduce paper mail from Humana
- Take advantage of an automated process for health care providers (available to those who can accept autoposting transactions through a participating vendor, billing agency or clearinghouse)
- View remits on Humana.com
- Receive ERA transactions that are compliant with HIPAA

Benefits of Electronic Funds Transfer (EFT):

- Receive Humana payments via direct deposit into the health care provider's bank account
- Streamline administrative process by eliminating paper checks and mail
- Get paid up to seven days faster by eliminating mailing and wait times to receive checks
- Receive EFT payments for most Humana plans (a few may still send paper checks)

Registering for ERA and/or EFT is easy. Health care providers can access Humana's automatic form by logging into the secure provider website at Humana.com/providers (registration required). Choose the "ERA/EFT Setup-Change Request" link on the bottom right of the page and complete the form.

To register for secure access to Humana.com/providers, health care providers can use the following steps to access the form:

- Navigate to the ERA/EFT page (<http://www.humana.com/providers/education/hipaa/era.aspx>) on Humana.com/providers.
- Choose the "ERA/EFT Setup-Change Request" link.
- Provide two check numbers from claims paid by Humana for validation.

After the form has been completed, health care providers can use the "Status Inquiry" feature to follow the progress of the request.

To learn more about ERA/EFT, health care providers are encouraged to sign up for a free Web-based training session. The webinar schedule is available at the following URL: Humana.com/providers/education/explore/interactive.

For more information about these or other provider tools, health care providers can contact a Humana e-Business consultant by calling 1-877-260-7360 or emailing deployment@humana.com.

Humana Updates Claims Policies and Code Edits

Humana periodically updates its claims payment policies for both facility and other health care provider claims to support its continuing efforts to process claims fairly, accurately and appropriately. Now, health care providers can view select claims payment policies online at Humana.com/providers.

Humana also regularly updates its claim code-editing logic in accordance with American Medical Association (AMA) Current Procedural Terminology (CPT®), Healthcare Common Procedure Coding System (HCPCS) and International Classification of Diseases, 9th Edition/Revision (ICD-9) code sets.

Health care providers are able to view detailed lists of changes 90 days prior to each implementation, on the dates indicated in the grid below. These changes will occur via a phased approach, with implementations and Web postings on the following dates:

Implementation Dates	Dates available to view on Humana.com
June 22, 2013	March 22, 2013

September 14, 2013	June 14, 2013
November 9, 2013	August 9, 2013

View details regarding these and past changes at http://www.humana.com/providers/claims/processing_edits.aspx

If health care providers have questions about Humana's claims policies and code edits, they may call 1-800-4HUMANA (1-800-448-6262), Monday through Friday, 8 a.m. to 6 p.m. local time.

Members with Gaps in Care Encouraged to Address Care

In August, Humana will begin phone outreach to contact members who have been determined to have a gap in care. These targeted members will receive an automated call with educational messaging around the clinical measures for which they have a gap in care. Members will be able to speak to a live agent at any time during the call if they need more information about the gap in care, if they believe they have been reached when no gap in care exists or if they need help making an appointment with their doctor to address the care gap. Members who indicate that they have received screening for colorectal cancer will be transferred to a live agent who will initiate the process to document the screening. A follow-up letter will also be sent to members to reinforce the messaging received during the call, as well as to encourage them to close their gaps in care. Health care providers may soon begin hearing from Humana members asking about the needed services outlined in the calls and letters. Also, health care providers of members who indicate that they do not intend to receive needed screenings will receive a letter encouraging them to discuss the importance of addressing gaps in care.

Online Tools, Presentations, Webinars Provide Important Tips to Providers, Staff

Humana adopts clinical practice guidelines based on guidance from national organizations generally accepted as experts in their fields. In every issue, Humana's YourPractice features updates to these clinical practice guidelines and new guidelines adopted. Humana's intent is to provide timely information about evidence-based best practices for patient care as well as help improve quality measures and Star scores. While many guidelines are updated annually, others may not change for several years. Humana encourages health care providers to look for these clinical practice guideline notifications in each issue of Humana's YourPractice. Medical and behavioral health clinical practice guidelines are available at http://www.humana.com/providers/clinical/clinical_practice.aspx.

New and Revised Medication and Medical Coverage Policies

Humana's medical and medication coverage policies are based on evidence published in peer-reviewed medical literature, technology assessments obtained from independent medical research organizations, evidence-based consensus statements and evidence-based guidelines from nationally recognized professional health care organizations.

Information about medical and medication coverage policies can be found on Humana.com/providers by selecting "Medical Coverage Policies" under "Clinical Topics." Medical and medication coverage policies can be reviewed by name as well as revision date. Users may also search for a particular policy using the search box. More detailed information may be found by reviewing "*How to Read a Medical Coverage Policy*" and "*Understanding the Medical Coverage Policy Development Process*."

Below are the new and revised policies:

New Medication Policies

- omalyst (pomalidomide)
- Fulyzaq (crofelemer)
- Raviciti (glycerol phenylbutyrate)
- Varizig (varicella zoster immune globulin)
- Kynamro (mipomersen sodium)
- Juxtapid (lomitapide)
- Kadcyla (ado-trastuzumab emtansine)
- Abilify Maintena (aripiprazole extended-release injectable suspension lyophilized powder)
- Signifor (pasireotide)
- Invokana (canagliflozin)
- Tecfidera (dimethyl fumarate)

Medication Policies with Significant Revisions

- No medication policies with significant revisions

New Medical Policies:

- Electric Tumor Treatment Fields

Medical Policies with Significant Revisions:

- Blepharoplasty, Blepharoptosis Repair and Brow Lift
- Bone Density Measurement

- Breast Reconstruction
- Ear Reconstruction (Otoplasty)
- Fusion Imaging
- Genetic Testing and Genetic Counseling for Diagnosis and Monitoring-Non-Cancer Indications
- Growth Factors
- Implantable Infusion Pumps
- Orthognathic Surgery
- Panniculectomy, Abdominoplasty, Abdominal Suction-Assisted Lipectomy/Liposuction
- Reduction Mammoplasty
- Rhinoplasty/Septoplasty
- Skin Substitutes

Online Presentations Make It Easier to do Business with Humana

Humana's "Education on Demand" tool provides health care providers and their office staff members with quick, easy-to-understand presentations on topics that should make it easier for them to do business with Humana.

To access any of these presentations, health care providers may choose: http://www.humana.com/providers/tools/provider_tools/education_on_demand.asp. If a computer with a sound card is not available, or if the computer is not configured for streaming audio, the presentations are available over the telephone while viewing the slides on screen. To begin the telephone playback process, health care providers should follow these steps:

- Click on the question mark in the bottom right corner
- Select "Player Settings" from the pop-up box
- Check "Use telephone playback with standard player"
- Click the "Submit" button
- A window will open displaying the telephone number and access code that need to be dialed to receive the audio

Available presentations are as follows:

- How to do Business with Humana
- HumanaAccessSM Visa[®] Debit Card
- RadConsultTM Online

- SmartSummary^{SMRx}
- SmartSummary
- Texas Deficiency Tool
- Special Needs Plans (SNPs)
- Humana's Quality Initiatives

The presentations can be accessed around the clock.

Webinars Provide Interactive Learning

Humana offers interactive Web-based training sessions for health care providers and their office staff members each month.

To register, health care providers may send an email to deployment@humana.com.

Below is a listing of the upcoming Webinars. Please note that all times are Eastern.

Date	Time	Training Subject
Tuesday, June 11	2 p.m. EDT	Eligibility and Benefits
Wednesday, June 12	11 a.m. EDT	Referral/Authorization
Thursday, June 13	2 p.m. EDT	Benefit Estimator
Tuesday, June 18	11 a.m. EDT	Humana.com Overview
Wednesday, June 19	2 p.m. EDT	ICD-10 for Providers' Offices
Thursday, June 20	11 a.m. EDT	Claims Tools and Remit Inquiry
Tuesday, June 25	11 a.m. EDT	ICD-10 for Facilities
Thursday, June 27	2 p.m. EDT	ERA/EFT
Friday, June 28	11 a.m. EDT	Benefit Estimator
Tuesday, July 9	2 p.m. EDT	ERA/EFT
Wednesday, July 10	11 a.m. EDT	Eligibility and Benefits
Thursday, July 11	2 p.m. EDT	Humana.com Overview
Tuesday, July 16	11 a.m. EDT	Referral/Authorization
Wednesday, July 17	2 p.m. EDT	ICD-10 for Facilities

For more information, visit <http://www.humana.com/providers/education/explore/interactive.aspx>.