

Vaccinations Save Lives

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 months of age and older get an annual flu vaccine.

The 2016 – 2017 trivalent seasonal flu vaccine will cover the three flu strains that research suggests will be most common in the northern hemisphere:

- A/California/7/2009 (H1N1)pdm09-like virus
- A/Hong Kong/4801/2014 (H3N2)-like virus
- B/Brisbane/60/2008-like virus (B/Victoria lineage)

A quadrivalent vaccine also is available that will include the B/Phuket/3073/2013-like virus (B/Yamagata lineage).

Other vaccine details for the 2016 - 2017 flu season:

- Intramuscular (IM) vaccines will be available in both trivalent and quadrivalent formulations. All high-dose IM vaccines will be trivalent this season.
- A jet injector can be used for delivery of AFLURIA® for people 18 to 64 years old.
- All intradermal vaccines will be quadrivalent.

Based on data showing poor or relatively lower effectiveness of the live attenuated influenza vaccine (LAIV), the CDC's Advisory Committee on Immunization Practices (ACIP) determined that (LAIV), also known as the "nasal spray" flu vaccine, should not be used during the 2016-2017 flu season.

More information about the flu vaccine, including coding guidelines, is available here (here (here (here (here (here (here (https://www.humana.com/providers/education/whats-new/flu-vaccinations).

What Physicians Were Thinking About at AAFP

Attending the American Academy of Family Physicians' conference in Orlando last month, I jotted down some of my thoughts about conversations I had with PCPs about the transition to value-based care models.

The top three things I heard:

1. How can I make money and sustain my practice with value-based care? In value-based payment models, quality metrics (made up of HEDIS and Stars measures) determine how PCPs are paid. Payers can help in a

couple of important ways – by simplifying how you identify the metrics (so you can maximize your pay) and by simplifying how you track metrics (so you get credit for all the good work you do and the results you achieve). Also, payers can share data and analytics with you so you can more effectively provide proactive and preventive care.

- 2. How can I be responsible for my patients' health outcomes when some patients don't follow my recommendations? We all know that not all patients do what we say, but there are resources outside the traditional clinical care setting that physicians can use to increase the likelihood of patient engagement. That's where the payer you chose to enter into a value-based care relationship becomes so important because of the extended resources it can provide you. For example, Humana has introduced physicians to new partners that address a multitude of barriers to their patients' health, from access to food and medicine to transportation and home care needs.
- 3. How can a payer help me improve population health, given the massive pressure to reduce costs? Cost reduction will never be achieved at the expense of high-quality care and improved population health. When people are healthy, they spend less time in the hospital. So, the PCP-payer relationship is moving away from dare I say being adversarial, to a model that's more like this: Physicians help patients get healthier; the healthier their patients, the more physicians are financially reimbursed. Healthier patients mean lower costs for payers. More and more, PCPs are relying on the data payers give them about their patients, and payers are relying on PCPs to use the data to improve their patient's health.

Feel free to share what's on your mind. Email my office at ocmo@humana.com.

Sincerely,

Roy Beveridge, M.D.

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Senior Vice President and Chief Medical Officer

Start the Conversation: How Physicians Can Help Improve Colorectal Cancer Screening Rates

While most patients know that cancer can come in many forms, many may not consider colorectal cancer (CRC) as something that could affect them. As physicians, we know that this isn't true. In fact, CRC risk increases dramatically for our patients between the ages of 50 and 75. That's why Humana recommends that these patients receive periodic CRC screening using fecal occult blood testing, sigmoidoscopy or colonoscopy.

I recently recorded a <u>podcast</u> (http://apps.humana.com/marketing/documents.asp?file=2984826) with Dr. Lakshmi Kartha, one of the physician interns in the office of the chief medical officer, about the results of a new approach Humana has tried in an effort to bring more patients up to date on colorectal cancer screening. I hope you'll take a few moments to listen and learn more.

To learn more about <u>this study (http://apps.humana.com/marketing/documents.asp?file=2857348</u>), and other Humana research, please visit our website at Humana.com/research.

Sincerely,

Bryan Loy, M.D., MBA

Market Vice President, Oncology and Lab Strategies

Pneumonia Vaccines Protect Young and Old

The CDC now recommends two pneumococcal vaccines for adults 65 years or older: pneumococcal conjugate vaccine (PCV13) and pneumococcal polysaccharide vaccine (PPSV23).

PCV13 is recommended for:

- All children younger than 5 years old
- All adults 65 years or older
- Individuals 6 years or older with certain long-term health problems or a weakened immune system, including people with sickle cell disease, congenital or acquired asplenia, cerebrospinal fluid leaks and cochlear implants

PPSV23 is recommended for:

- · All adults 65 years or older
- People 2 through 64 years old with certain long-term health problems or a weakened immune system, including:
 - Chronic diseases (i.e., cardiovascular, pulmonary, diabetes, alcoholism, liver disease, etc.)
 - Cerebrospinal fluid leaks or cochlear implants
 - · Functional or anatomic asplenia, including sickle cell disease and congenital or acquired asplenia
 - Immunocompromising conditions, such as HIV infection, leukemia, lymphoma, Hodgkin's disease, kidney failure or organ transplant
 - Individuals currently taking a drug or treatment that lowers the body's resistance to infection, such as long-term steroids, certain cancer drugs or radiation therapy
 - Adults 19 through 64 years of age who smoke cigarettes or have asthma

More information about the pneumonia vaccine, including coding guidelines, is available here (here (here (here (here (here (here (here (<

Important Itemized Bill Review Policy Information Available

Humana recently published a claims payment policy regarding itemized bill review for inpatient routine services. This policy is found on the Humana claims payment policies page here (here (here (https://www.humana.com/provider/medical-providers/education/claims/payment-policies/); search for "Itemized Bill Review."

Humana sometimes reviews an itemized bill for an inpatient admission to determine whether supplies, items and services specified on the itemized bill are separately billable. If an itemized bill is not provided when requested or if improper billing is identified during the review of an itemized bill, one or more of the following outcomes may result: reimbursement reduction, payment recoupment or denial of specific charges.

For more information, please see the previous claim processing edits and other notifications related to the Itemized Bill Review for Inpatient Routine Services policy here (https://www.humana.com/provider/medical-providers/ education/claims/itemized-billing).

Find Important Pharmacy Information Quickly on Humana.com

Physicians, other health care professionals and office staff may find the following pharmacy-specific links helpful:

- Humana.com/DUR (https://www.humana.com/provider/support/clinical/drug-utilization-review/) for drug utilization review materials
- Humana.com/PAL (https://www.humana.com/provider/medical-providers/education/claims/preauthorization) for preauthorization and notification lists, including medication preauthorization lists
- Humana.com/druglists (https://www.humana.com/provider/medical-providers/pharmacy/tools/druglist)
- Humana.com/druglistsearch (http://apps.humana.com/UnsecuredDrugListSearch/Search.aspx)
- Humana.com/PA (https://www.humana.com/provider/medical-providers/pharmacy/tools/approvals) for pharmacy drug prior authorization
- Humana.com/medPA (https://www.humana.com/provider/medical-providers/pharmacy/precertification) for prior authorization of drugs administered in a physician's office, clinic, outpatient or home setting
- Humana.com/Rxtools (https://www.humana.com/provider/medical-providers/pharmacy/tools/) for generic drug options and a free pharmacist consultation program for eligible members

Patients with COPD Receive Support from Pulmonary Rehab

As mentioned in the August edition of Humana's YourPractice, patients with chronic obstructive pulmonary disease (COPD) may need more information about pulmonary rehabilitation and their options especially after an inpatient stay.

Pulmonary rehabilitation includes supportive resources, such as:

- · Breathing retraining
- General education (e.g., triggers, early signs of infection, when to seek treatment and disease progression)
- Medications (e.g., inhaler use and side effects)
- Treatment options, including oxygen therapy
- · Diet, nutrition and weight management techniques
- · Monitored and supervised exercise, including both cardio and strength training
- · Psychosocial support options
- · Referrals for smoking cessation

The benefits of pulmonary rehab include:

- · Fewer emergency room visits and hospitalizations
- Reduced mortality
- · Improved quality of life with reduced exacerbations and better symptom management
- · Improved exercise capacity

If health care professionals have questions regarding pulmonary rehabilitation programs, they can call Humana at 1-800-448-6262, Monday through Friday, 8 a.m. to 8 p.m. Eastern time.

HumanaVitality Becomes Go365

Effective Jan. 1, 2017, Go365™ will take the place of HumanaVitality®. Go365 is a wellness and rewards program that motivates and rewards eligible members for taking steps to improve and continue their healthy behaviors. Beginning in 2017, the program will expand to serve more than 5.5 million members nationwide. By integrating rewards with health, Go365 provides the tools and support to help the program's members live healthier lives and reduce health care costs.

In addition to the new name, the program has also been redesigned based on member feedback. The new Go365 member experience will give members more rewards opportunities and more control over their path to health. It will continue to be personalized to each individual with recommended activities that will help members reach their personal health goals no matter where they are on their journey to better health.

Additional details about enhancements to the program and experience will be announced throughout 2017.

For more information about HumanaVitality/Go365, visit <u>Humana.com/vitality/</u>).

Refer to Guidelines for Working with Dual-eligible Members

The Centers for Medicare & Medicaid Services (CMS) requires that all Medicare Advantage Organizations (MAOs) inform their network physicians and other health care providers about the Medicare and Medicaid benefits and rules for enrollees (members) eligible for both Medicare and Medicaid (i.e., dual eligibles).

An overview of the general eligibility and cost-sharing guidelines for Medicaid coverage of dual-eligible members can be found here.

Special Needs Plan Training Due for Completion

The Centers for Medicare & Medicaid Services (CMS) and state Medicaid contracts mandate that all Humana-contracted physicians and other health care professionals complete compliance program requirements. This may include special needs plan (SNP) training and Medicaid-specific trainings if the Humana-participating Medicare health care professional serves members in one or more of the following locations: Alabama, Arizona, California, Colorado, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Maine, Missouri, Mississippi, Montana, North Carolina, Nevada, New York, Ohio, Puerto Rico, South Carolina, Tennessee, Texas, Virginia or Washington.

SNP training pertains to health care professionals who participate in a Humana Medicare HMO network. If an organization does not have physicians or other health care professionals who participate in a Humana Medicare HMO network, SNP training is not required.

Humana's SNP training covers important plan information, such as the history of SNPs, how to identify Humana SNP members, the SNP enrollment process, Humana's available SNPs, cost-sharing, physician involvement and the SNP model of care.

For information on how to complete the compliance attestation or for additional guidance on this requirement, refer to these FAQs (http://apps.humana.com/marketing/documents.asp?file=1827553). Other questions about compliance program requirements may be directed to Humana provider relations Monday through Friday at 1-800-626-2741 from 8 a.m. to 5 p.m. Central time.

Clinical Practice Guidelines Provide Important Tips to Physicians, Staff

Humana adopts clinical practice guidelines based on guidance from national organizations generally considered expert in their fields. Humana's YourPractice features updates to established guidelines and introduces newly adopted guidelines. The goal of these updates is to provide timely information about evidence-based best practices to help improve patient care and improve quality measures. While many guidelines are updated annually, others may not change for several years. Humana encourages physicians and other practitioners to look for these clinical practice guideline notifications in Humana's YourPractice. Medical and behavioral health clinical practice guidelines are available https://www.humana.com/providers/clinical/clinical_practice.aspx).

Updated current clinical practice guidelines

- Adult immunizations (2015)
- Arterial fibrillation (2014)

- Asthma care (2015)
- Childhood immunizations (2015)

Newly added clinical practice guidelines

- Obstetrics routine care (2012)
- Well-woman routine care (2015)
- Heart risk calculator (2013)

New and Revised Pharmacy and Medical Coverage Policies Available

Humana's medical and pharmacy 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 pharmacy coverage policies can be found at **Humana.com/provider** by selecting "Medical and Pharmacy Coverage Policies" under "Resources." Policies can be reviewed by name or revision date. Users also may search for a particular policy using the search box. More detailed information can be found by reviewing "How to Read a Medical Coverage Policy" and "Understanding the Medical Coverage Policy Development Process" under "Helpful Links."

Below are new, revised and retired policies:

New pharmacy coverage policies

- Byvalson (nebivolol and valsartan)
- Cabometyx (cabozanitib)
- Epclusa (sofosbuvir/velpatasvir)
- · GLP-1 Analogs
- · Ocaliva (obeticholic acid)
- Otovel (ciprofloxacin-fluocinolone otic solution)
- Pediatric Antipsychotic Utilization Program
- Probuphine (buprenorphine) Implant
- Tecentriq (atezolizumab)
- Xiidra (lifitegrast ophthalmic solution)
- · Zinbryta (daclizumab)
- · Zurampic (lesinurad)

Pharmacy coverage policies with significant revisions

· No policies with significant revisions

New medical coverage policies

• No new medical coverage policies

Medical coverage policies with significant revisions

- Acupuncture
- Benign prostatic hyperplasia (BPH) treatments
- · Benign skin lesion removal
- Clinical trials
- · Cosmetic surgery, reconstructive surgery, scar revision
- Deep brain stimulation (DBS) and cortical brain stimulation
- · Drug testing
- Electrical stimulators for pain and nausea/vomiting
- Erectile dysfunction treatments
- Fecal microbiota transplantation (FMT)
- · Gastrointestinal (GI) motility monitoring
- · Genetic testing for breast and/or ovarian cancer susceptibility
- Genetic testing for cystic fibrosis
- · Injections for chronic pain conditions
- Keratoconus surgical treatments
- Mobility assistive devices (wheelchairs)
- Obstructive sleep apnea (OSA) surgical treatments
- Osteochondral defects surgery
- · Pharmacogenomics and companion diagnostics
- · Sleep studies, adult
- Tissue Doppler imaging (tissue Doppler echocardiography, tissue Doppler ultrasound)
- Ultraviolet light/laser therapy for skin conditions
- · Videofluoroscopy, dynamic MRI for musculoskeletal indications

Retired medical coverage policies

· No retired medical coverage policies

Online information Makes It Easier to Do Business with Humana

Humana's "Education on Demand" tool provides physicians, other practitioners and their office staff with quick, easy-to-understand information on topics that should simplify doing business with Humana.

To access this tool, health care providers may choose: https://www.humana.com/provider/support/on-demand/. If a computer with a sound card is not available or if the computer is not configured for streaming audio, the presentations may be accessed via telephone while viewing the slides on screen. To begin the telephone playback process, health care providers should follow these steps:

- Open a presentation
- · 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 needed to hear the audio presentation

Available topics are as follows:

- · Commercial Risk Adjustment
- HumanaAccessSM Visa Card
- Humana Member Summary
- HumanaVitality®
- · Making It Easier for Health Care Providers
- Special Needs Plans (SNPs)
- · Texas Deficiency Tool
- · Working with Humana
- Consult Online
- SmartSummary® Rx

Humana's claims education page includes educational tools that help health care professionals better understand Humana's claims policies and processes. To access the tool, physicians and other health care professionals can visit **Humana.com/MakingItEasier** (https://www.humana.com/provider/medical-providers/education/tools/making-iteasier).

The page, which will be updated with new content each month, has brief education-on-demand computer-based presentations that include a printable tip sheet with the most important information about each topic. Current topics include:

- Medicare Preventive Services
- Professional Component and Technical Component (PC/TC)
- Humana's Maximum Unit Values
- Chronic Care Management Services
- Drug Testing and Codes
- · Humana's Approach to Code Editing
- Modifier 24

- Procedure-to-Procedure Code Editing
- Modifiers 59 and X (EPSU)
- · Anatomical Modifiers
- · Modifier 25
- Application of Medicare NCD/LCD Guidelines

The presentations can be accessed around the clock.

Working with Humana Online: The Availity Web Portal

Physicians, other health care professionals and their administrative staff who want to work with Humana online can register for the Availity Web Portal. This multipayer site offers a single user ID and password to work with Humana and other participating payers.

Once registered, users will be able to complete tasks such as:

- · Verifying patient eligibility and benefits
- Submitting referrals and authorizations
- · Checking claim status
- Using Humana-specific tools

To register for the Availity Web Portal, the health care professional should visit Availity.com and select "Get started."

Health care professionals and staff can sign up for a training session offered by a Humana eBusiness consultant at **Humana.com/providerwebinars** (https://www.humana.com/provider/medical-providers/education/provider-self-service/interactive/).