Standard Roster Template
Frequently Asked Questions and Answers for Physicians and Healthcare Providers

1. **Q: What is happening?**
   A: Humana has created a standard roster template for physicians and healthcare professionals/ administrators to use when submitting demographic additions, updates and terminations.

2. **Q: Why is Humana using a standard roster?**
   A: Per the Centers for Medicare & Medicaid Services (CMS) 2018 Model MA Plan Provider Directory Policy Updates, CMS remains focused on confirming the accuracy of provider directories for enrollees and their caregivers who rely on them to make informed decisions regarding their healthcare and health plan choices. As a result, CMS provided general instructions regarding the elements and the format of the provider directory in Chapter 4 of the Medicare Managed Care Manual (MMCM), as well as the Medicare Advantage and 1876 Cost Plan Model Provider Directory.

   A number of states also are beginning to mirror CMS and National Association of Insurance Commissioners (NAIC) model laws. To comply with these directives, Humana created the standard roster template to include those fields required by CMS, National Committee for Quality Assurance (NCQA), Florida's Agency for Healthcare Administration (AHCA), America's Health Insurance Plans (AHIP), etc.

   Humana hopes to improve our data integrity and load accuracy by providing a standard roster template that sets expectations of information we receive from physicians and healthcare professional/administrators and present to your patients in our directories. If we find through this pilot that the standard roster template improves the accuracy of our demographic loads, we hope to roll this out as an industry wide solution.

3. **Q: Which provider types are affected?**
   A: The standard roster template may be used by any provider type.

4. **Q: Which lines of business are affected?**
   A: The standard roster template may affect any line of business.

5. **Q: What do physicians and healthcare professionals/administrators need to do?**
   A: Physicians and healthcare professionals/administrators are requested to review the **Instructions** and **Data Dictionary Definitions** tabs of the standard roster template for direction. Both tabs provide definitions of fields on the rosters and the type of information to provide. Required fields are highlighted in blue on each tab, and guidance on how to fill those fields can be found on the **Data Dictionary Definition** tab.

6. **Q: To whom should the physician or healthcare professional/administrator send the completed standard roster template?**
   A: The standard roster template will be sent to the physician or healthcare professional/administrator by a specific point of contact. Completed standard roster templates need to go back to that individual upon completion.

7. **Q: How often should the physician or healthcare professional/administrator update the standard roster template?**

    A: Per Humana's Provider Manual for Physicians, Hospitals, and Healthcare Providers, Humana requires that changes be submitted at least 30 days prior to the effective date of a change to facilitate accurate directory information and claims payment. The **Adds**, **Updates** and **Terms** tab needs to be completed and submitted to Humana immediately when there is a change. Physicians and healthcare professionals/administrators need to work with their Humana point of contact to determine the frequency for filling out the full roster tab (e.g., monthly, quarterly, annually).

8. **Q: How often are data updated in Humana's systems (i.e., how long will it take Humana to update its systems once a physician or healthcare professional/administrator provides an updated roster)?**

    A: Humana's turnaround time is based on industry and regulatory standards.

9. **Q: How will Humana use the information on the standard roster template?**

    A: Humana will use the information captured to populate our paper and online provider directories, as well as populate our claims processing systems for reimbursement.

10. **Q: Is a physician or healthcare professional/administrator required to use this standard roster template?**

    A: At this time, using the standard roster template is preferred and encouraged. The detailed descriptions provided regarding what each data field should contain and the notes on why this information is required from a regulatory perspective help our associates better support physicians and healthcare professionals/administrators.

11. **Q: What is the value of this roster format?**

    A: The standard roster template incorporates information required for provider directories by CMS, NCQA, NAIC and states. The descriptions added for each data field help physicians/ healthcare professionals/administrators understand what information is needed to populate this information.

12. **Q: Why is Humana the only plan asking for this information?**

    A: Humana is working to redesign key end-to-end enterprise processes and supporting technologies to increase quality and ensure a compliant operating model. We would like to work with other payers to adopt this template as an industry standard once we have designed a user-friendly format.

13. **Q: Why does Humana have so many data requirements?**

    A: Requirement for data population varies by intent. Once the majority of information is populated during an initial load, the amount of information required for maintenance is limited to a few identifying fields and information on the change. Ultimately, the information required for provider directories by CMS, NCQA, NAIC and states has increased. Therefore, we are updating our intake process to incorporate this information.

14. **Q: What is the bare minimum of information that will be accepted using the standard roster template?**
    A: The required fields for the maintenance in question need to be completed.

15. **Q: What if a physician or healthcare provider is working with other plans to create a separate template?**
    A: Please notify your Humana point of contact.