



# Population Insights Compass

## External FAQ

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## Access to Compass

### 1. How do I access Population Insights Compass?

To access the application, copy and paste this URL into Google Chrome or Microsoft Edge:  
<https://populationinsightscompass.humana.com>.

### 2. What process should a user follow to gain access?

You can request access to the application from your Humana representative.

### 3. What are the differences between private domain email, public email, and generic email?

A **private domain** email will usually contain the provider organization within the email address. For example, John Smith's email is [jsmith@abcmedical.com](mailto:jsmith@abcmedical.com). A **public domain** is when the email address is from Gmail, Yahoo, Hotmail, AOL, etc., so the provider email will display [jsmith@gmail.com](mailto:jsmith@gmail.com). A **generic email** is when the email address does not contain the full name of the person. And while the user's full name is not required in the email address, it does have to be associated with an individual user. For example, if the email submitted reflects a generic name, such as [referrals@abcmedical.com](mailto:referrals@abcmedical.com) or [referrals@gmail.com](mailto:referrals@gmail.com), the request will be denied.

### 4. When is Compass available?

Compass is available daily, 8 a.m. – 8 p.m., Eastern time. If you attempt to access Compass outside of the designated time frame, you might receive a maintenance message. If you can sign in, you may notice delays in report load times.

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## Training

### 1. Will training be offered?

Yes, we offer ongoing Compass University training sessions. Visit [Humana.com/Compass](https://Humana.com/Compass) to find session descriptions and enrollment options. We also offer Compass Café, which features live demonstrations of new enhancements and updates explained by our Compass subject matter experts. After each Compass University training session, you will receive a copy of the Compass One Guide, which includes all Compass report details and descriptions.

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## Communications

1. **Where is the best place to find explanations of acronyms/abbreviations used in reports?**

Within the application, users can hover over or select the information icon next to a field and acronyms pertaining to the field will appear. Users also can ask their Humana representative for a Compass User Guide, which explains acronyms and abbreviations. As a new user, you will receive a welcome email with the Compass Quick Start Guide.

2. **Where can I find communications about Compass?**

Communications are sent to the email address you entered on the Compass application. You also can ask your Humana representative for information about communications.

3. **Will I be able to see notifications within the application?**

On the top right of the global filters within the Compass application, you will find the notification icon

(  ). When selected, you will see recent notifications pertaining to specific reports.

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## Compass 101 – Functionality

1. **How do I submit a support case?**

For help with submitting a support case, reach out to your Humana representative.

2. **Patient demographics vary by report. Will I need to use multiple reports to find the data I need?**

Every report includes the same patient-level demographic data, including last primary care provider (PCP) visit date, attributed provider and coverage status. These fields can be shown or hidden, based on the user’s preference.

3. **How can I find explanations of unfamiliar metrics or acronyms?**

Every report includes hover-over capabilities and informative icons users can select for explanations of metrics or acronyms. You also can consult our Compass Quick Start Guide or One Guide. Our Quick Start Guide offers a short overview of the application and highlights our most-utilized reports. Our One Guide comprises all reports, and it highlights report details and descriptions. It is sent at the end of each Compass University session. To obtain a copy of the Quick Start Guide, refer to the **Resources** tab via the drop-down caret on the top right corner of the Compass and select “Training Resources.” For a copy of the One Guide, please reach out to your Humana representative.

4. **Can you filter by provider name in Compass?**

Yes, you can filter the data within a report by searching for a specific provider under the “Paneled Provider” column, or you can run reports at the Center level filter through the hierarchy in the global filters.

## 5. Where can I obtain educational or training resources?

You can locate resources embedded within the Compass application in the top right-hand corner. The drop-down resources menu includes both educational and training resources. Under Educational Resources, you can locate quick links to Quality Stars, Clinical Programs, Social Determinants of Health, Pharmacy and more. Under Training Resources, you can find a quick start guide, external FAQs and training opportunities.

## 6. Can you access patient details when searching by a patient's name?

Within the Patient tab at the top of Compass, you can search by patient name or Humana member ID number and pull up the patient's details. You also can select a patient name in the reports. You will be redirected to the Patient tab, where you can identify the same information.

## 7. Is there a way to tell where report data is coming from and when it was refreshed?

Each report has a hyperlinked clock icon on the bottom right of the screen. Selecting the icon opens a pop-up window that shows the data source, last refresh and next scheduled refresh date.

## 8. Is there a way to save favorite groupers?

Yes, users can use the bookmarking feature  to save their locations. When filters are applied, this icon can be found on the far right of the screen and offers 2 options:

1. The first option enables you to save your favorite location by level, ID and line of business (LOB).
2. The second option lets you create a group of your favorite locations, although the locations will need to have:
  - o The same LOB and
  - o The same level or combinations of locations (SG1, Grouper, SG2 and Centers)

To learn more about this function, take our Compass 101 University course. You can enroll by visiting [Humana.com/Compass](https://www.humana.com/Compass).

## 9. What are the criteria for a location search?

There are 2 layers within the Compass hierarchy: superior grouper level and Tax Identification Number (TIN). Superior grouper levels include SG3 – enterprise-wide search; SG2 – state level and SG1 – market level. The Tax ID level allows you to search by TIN. You also can choose ALL to search any of the 3 levels.

## 10. Why is the data in the reports different when I search by TIN and SG1 level, or other levels in the hierarchy?

It is important to consider the information rolling up to each level when pulling reports at different levels. Suppose a provider has a TIN and SG1, pulls the patient roster and doesn't see the same member count. The TIN level may include generic groupers but not the SG1 level. Users can understand which groupers are included at each level by viewing a grouper column.

Additionally, contract updates can impact the application's information. It is possible that the contained information in the TIN level is not available for the grouper and SG1 levels (for example, if the group just received brand new groupers and SG1s).

#### 11. Is there a way to save customizations made to a report?

The My View feature lets users save their customizations. Changes that can be saved are the column order (includes pinned columns), columns hidden/visible and specific sorted columns. The My View feature will gradually be added to each report available in Compass.

#### 12. Are users able to upload or export patient detail information?

Yes. An Actions button located at the top right of the report enables users to export patient detail information to Excel.

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## Enhancements

#### 1. What if you have an idea about how to improve capabilities or functionality? How can I share it?

By selecting the "Feedback" button at the top-right of Compass, users can submit any feedback relative to their user experience, as well as suggestions regarding future enhancements.

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## Support

#### 1. How do I reset my username and password?

Your username for Population Insights Compass is the work email you used to set up access. The Population Insights Compass team does not handle passwords. You can troubleshoot by selecting the "Forgot my password" or "Can't Access Your Account" option. If the latter option is not available to you, please reach out to your organization's information technology team for assistance.

#### 2. How do I get access to specific reports inside of Compass?

External Core access is granted upon initial setup. If Clinical, Pharmacy or Financial access is needed, please reach out to your Humana representative.

#### 3. What is a business associate agreement, and how do I complete it?

A business associate agreement (BAA) is intended to protect the privacy and personal health information of your Humana-covered patients and to ensure that Humana complies with the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The BAA you sign will allow Humana to share Compass data with you. Please return a completed BAA form to your Humana representative for processing.

**4. How do I obtain a BAA form?**

Please reach out to your Humana contracting representative to work with them on executing a BAA.

**5. How long does it take to receive access to Compass?**

10 business days is the standard time frame for access approval.

**6. What is the preferred browser for Compass?**

Microsoft Edge and Google Chrome work best and are our preferred browsers.

**7. It appears that my account was deactivated since the last time I logged in. How can I regain access to Compass?**

In compliance with Humana security policies, Population Insights Compass application accounts not accessed for 90 days will be deactivated. To regain access, please contact your Humana representative.

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## Compass Reporting: Quality

**1. What is the difference between a Medical Record Upload and Electronic Attestation Form (EAF)?**

A Medical Record Upload (MRU) involves uploading a record using Compass. Using the Measure Detail tab in the Quality Stars report, you can select either Medical Record Upload or Patient reported EAF options under the EAF/MR column when filtered as “available”. To close a gap, it takes about 30 to 60 days for a medical record to be processed once retrieved by the nurse review team. Standard EAF selection allows for direct entry of the gap closure information within Compass. After you submit the information, it is submitted for processing, resulting in the gaps being closed in 4 to 6 weeks.

**2. Does patient reported EAF require medical records?**

Yes, when you choose patient reported EAF in Compass it will require a user to upload a medical record.

**3. How can I obtain the reason a Standard EAF or MRU failed?**

To find out why a “Standard EAF” or MRU failed, please contact your Humana Representative.

**4. Can I submit several EAF’s at the same time?**

Each row within the Measure Detail tab in the Quality Stars report represents a measure that is open for a member. Users should submit the corresponding EAF that aligns with the specific measure found within that row. This also applies when uploading medical records.

**5. How can I view additional details regarding the measure when I am submitting a “Standard EAF”?**

Via each Standard EAF modal, the user can select the Additional Details tab, which will have the latest information regarding the specific measure.

**6. Why can’t I see the EAF functionality via Compass? I already provided my Humana Representative with a signed attestation statement form on file.**

It is possible that the user is not utilizing the correct level in the hierarchy. The functionality is only visible at the grouper and/or Tax ID level. Users who try to leverage the EAF functionality via the Superior Groupers, Center, Address, etc., will see the Standard EAF functionality grayed out.

**7. If a measure does not pass, how am I alerted?**

You can use the Electronic Gap Closure report to track the journey and status of all previously submitted Standard EAF’s, Patient Reported EAF’s and MRUs.

**8. Can I use the Electronic Gap Closure report to submit new EAF’s?**

Yes. Within the status column, you can select the upward pointed arrow icon for the submitted EAF, or the red “X” icon for the failed EAF to initiate a new submission for that measure.

**9. Can I cancel an EAF or MRU if I realized an error was made?**

Yes. EAFs and MRUs can be cancelled only if the status of the submission is still “submitted.” If the status of that EAF or MRU is “pending,” then it cannot be cancelled. A new EAF or MRU can be submitted if the submission returns from the nurse review team as “failed.”

**10. Why can’t I submit a standard EAF for the Colorectal Cancer Screening measure noting a FIT DNA procedure?**

The FIT DNA procedure requires medical record documentation and cannot be submitted using a standard EAF.

11. I noticed members that should be excluded for SUPD (Statin Use in Persons with Diabetes). How long does it take for these members to fall off the denominator?

Once a claim is processed, it generally takes anywhere between 30-60 days to get the member excluded from the denominator.

12. Does the data in Test Kits close gaps in care?

The data from the Test Kit report is incorporated into the Quality Stars report and will close measures that contain a passing score. Test Kit results can be seen via the Measure Detail tab view in the Additional Details column. Select the columns icon to add the Additional Details column to the Quality/Stars report. The Test Kit will close the appropriate measure if the test is reflecting a passing score.

13. Are members notified when their test kit results are unfavorable?

The contracted vendor will reach out to the member advising them to reach out to their PCP.

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## Compass Reporting: Clinical

1. In the Census Report, what are the sources of the ADT data? Direct hospital feeds? State Health Information Exchanges (HIEs)?

Our ADT tables are pulled from Admits/Discharge and Transfer repository from HIE/third-party vendors via HIT/MRM processes. In short: EMR/EHR -> HIT/MRM->EDW->Compass (ADT)

2. Why is there no discharge date listed for certain admits/discharges within the Census report?

Emergency and Observation stays listed in the Census report will not have a discharge date as they are outpatient events. Additionally, Observations and ER visits will fall off the Admits/Discharges tab after 14 days but will remain on the Event Follow-up tab for 30 days, as these types of events may require follow-up for the new care coordination measures.

3. Is there a hierarchy or prioritization schema that Humana uses if, for example, a patient has both an ADT episode and Authorization episode come in?

ADT trumps an Authorization, but ADT may not always have complete information and that will come through on the claims file. Claims update can take months, which is why it isn't used in Census where we are looking for quick, real-time data.

4. How is the admission risk score determined within the Clinical Programs report?

Referral to a clinical program occurs with an Admission Risk Score of 42,000 or greater, if the member isn't part of an excluded group (delegated provider, in hospice, etc.). Members who

are participating in Triage & Support may also be referred to CCM if the care manager feels the member has care management needs beyond 30 days or the member has an Admission Risk Score greater than 10,000 and/or they've had 2 inpatient hospital admissions (not SNF or rehab) in the last 6 months.

#### 5. Why does the number of patients listed on the Clinical Dashboard not match what is displayed on the Patient Roster?

The metrics on the Clinical Dashboard will reflect membership as if it were frozen at that time. This means that all the metrics listed includes termed or moved membership.

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## Compass Reporting: Rx

### 1. Why are “First Fills” showing up as fails within the Rx Quality Opportunities report?

First fills are technically not in the measure; therefore, are not true fails. However, if a medication is filled again, they will enter the measure upon that second fill and automatically fail the measure with that fill if the current year adherence falls below 80%. It is important to look at the following columns for more insight to determine why the member is reflecting as a failure: Last fill date, Refill Due, Last Impactable date, Current Year Adherence %, and Day Supply Date. For example, a member's first fill was due in February, but the member had a 30-day supply. If the medication is filled in July, the member will automatically fail because they do not have 80% current year adherence.

### 2. How is the Last Impactable date determined?

This calculation starts when the member has their first fill (remember, they are not part of the denominator and counting toward the measure until their second fill). With that, you use that first fill date until the end of the year (assuming they will be enrolled for the entire year) and calculate the Last Impactable Date based on that.

### 3. Why is a member showing compliant when they should really be in a warning status?

The opportunity status tool tip will display why a member will display Compliant, Warning or Fail. For example, if a member is displaying 85% compliant, and the medication refill due is coming up in the next few weeks, the patient will continue to reflect compliant because the warning is based on their Current Year Adherence and not the Refill due date. The user can still sort the Refill due date column by selecting the actual column filter and filter in chronological order.

#### 4. How are members notified of medications impacted by CMS formulary changes?

Members are mailed an annual letter informing them of certain impacts on their medications. Additionally, providers can get ahead of such changes by referring to the Formulary Impact Summary report within Compass that is updated annually.

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## Compass Reporting: Population Explorer

### 1. What are social determinants of health (SDOH)?

SDOH refer to “conditions in the places where people live, learn, work and play that affect a wide range of health risks and outcomes,” according to the Robert Wood Johnson Foundation. Humana has chosen to focus efforts on addressing food insecurity, loneliness and social isolation because of their direct impact on healthy days and clinical outcomes.

### 2. How are SDOH populated in Compass?

SDOH are populated by direct evidence through claims, clinical notes or screenings within the past 12 months indicating that a member has an identified social risk and predictive modeling.

### 3. What is an avoidable hospitalization?

An avoidable hospitalization is an acute or observation stay where a patient was hospitalized with 1 of 5 chronic conditions such as CHF, Diabetes, Asthma, COPD, hypertension or 2 acute conditions such as UTI or community acquired pneumonia.

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