

2026 Pharmacy Compliance Education and Training Requirements FAQ and Answers

Notable changes to this document:

Humana has updated guidance in its answers to the following questions:

Q2, Q4 and Q6: Humana removed Illinois as a state where education and training requirements apply for Humana's Medicaid-related business in that state. This is because Humana is not contracted to perform or delegate prescription drug fulfillment in Humana's plan administered there. If your organization performs that function for another plan sponsor, contact that sponsor about corresponding requirements.

Compliance program requirements

1. Q: Do compliance requirements apply to my organization?

A: Yes. As an entity that participates in Humana's pharmacy network, you must ensure that all persons employed by or contracted with your organization to support a Humana-administered plan have completed compliance trainings.* In addition, your organization may be required to complete a Medicaid and/or Medicare training attestation form.

** An example of this is performing a function related to prescription drug fulfillment for a member of a Humana-administered plan.*

2. Q: What compliance requirements must participating pharmacies adhere to, and do I have to provide assurance of this?

A: The Centers for Medicare & Medicaid Services (CMS) and Humana's Medicaid contracts mandate Humana's contracted pharmacies, which may include first-tier, downstream and related entities (FDR), (as defined in question 3), adhere to Compliance Program Requirements. The Compliance Program Requirements are outlined in these Humana documents for the current calendar year:

- [Compliance Policy for Contracted Healthcare Providers and Third Parties \(Compliance Policy\)](#)
- [Ethics Every Day for Contracted Healthcare Providers and Third Parties \(standards of conduct\)](#)

The above documents are extensions of your organization's agreement with Humana and list ongoing and annual requirements. Contracted pharmacies and those supporting the contracted pharmacies' contracts with Humana are required to review the Compliance Policy and standards of conduct documents or materially similar content.

Humana requires network pharmacies to educate affected employees and subcontractors on the Compliance Program Requirements; train them on detecting, correcting, and preventing fraud, waste and abuse (FWA); and track distribution of the materials and FWA training conducted. The materials referenced above do not constitute FWA training. Your organization is responsible for meeting the training requirement by either developing or adopting other training content.

Meeting the FWA training requirement can include integrating related content from the Compliance Policy and standards of conduct documents in the content you develop or adopt. Your organization must provide affected employees and subcontractors with content conveying the expectations and requirements outlined in the Compliance Policy and standards of conduct documents (or materially similar documents) at the following frequencies: upon hire/contract and annually thereafter. The same

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frequencies apply to the FWA training. The first time those in new support roles for Humana business should be provided these materials and FWA training is within 30 days of starting this support function.

All entities that support a Humana-administered plan for members who are Medicaid and/or dual Medicare and Medicaid beneficiaries, including parties contracted with a Humana subsidiary, must assure additional compliance training (Medicaid Training Modules) is completed by those designated to support those members. The Medicaid Training Modules below may be required for pharmacies located in the following states or pharmacies providing services or medications for the above-outlined members living in these states: Florida, Indiana, Louisiana, Oklahoma, South Carolina, Virginia and/or surrounding areas. The Medicaid Training Modules are:

- [Cultural humility, health equity and implicit bias training for providers \(Florida, Kentucky, Louisiana, Ohio and South Carolina\)](#)
- [Cultural humility, health equity and implicit bias training for Medicaid providers \(Oklahoma\)](#)
- [Cultural humility, health equity and implicit bias training for Medicaid providers \(Virginia\)](#)
- [Health, Safety and Welfare Education Training \(Florida, Kentucky, Louisiana and South Carolina\)](#)
- [Humana Healthy Horizons In Oklahoma Health, Safety and Welfare Required Training](#)
- [Humana Healthy Horizons in Virginia Health, Safety and Welfare Required Training](#)
- [Medicaid Pharmacy Orientation and Annual Provider Training - Florida, Kentucky, Indiana, Ohio, Oklahoma, South Carolina and Virginia](#)
- [Medicaid Pharmacy Orientation and Annual Provider Training - Louisiana](#)

3. Q: What is an FDR?

A: FDR is a CMS term adopted by Humana. Generally, an FDR is any non-Humana employee (individual or entity) providing administrative or healthcare services on Humana's behalf for a Humana-administered plan for Medicare, Medicaid and/or dual Medicare and Medicaid-eligible beneficiaries. An FDR includes, but is not limited to, delegated and nondelegated contracted healthcare providers, pharmacies, delegated entities, delegated agents, suppliers, and vendors.

First-tier entity: A first-tier entity is a party that enters into a written arrangement with a Humana entity to perform administrative services or provide healthcare services for any of the beneficiaries identified in question 2. Example: A pharmacy contracted directly with Humana is a first-tier entity.

Downstream entity: A downstream entity is a party that enters into a written arrangement with one or more individuals or entities involved in supporting any of the beneficiaries listed in the response to question 2 and is below the level of the arrangement between Humana and a first-tier entity. The written arrangement continues down to the level of the ultimate provider of a service or product. Example: While a pharmacy contracted directly with Humana is a first-tier entity, the pharmacists and pharmacy technicians of the pharmacy are downstream entities.

Related entity: A related entity is any entity that is related to Humana by common ownership or control. Within this scope are subsidiaries either wholly or partially owned by Humana. Examples include Humana Pharmacy Solutions® and joint ventures of Humana and companies in which Humana has an investment interest and that are performing a plan function or providing healthcare services.

4. Q: Why is Humana requiring me to do this?

A: Humana has contracts with government agencies that stipulate Humana's contracted third parties must adhere to compliance requirements, including specific training per plan type supported:

Agency	Plan type
CMS	• Medicare-related plan
	• Special Needs Plan
State agencies overseeing programs for the plan type	Any plan administered by Humana for Medicaid members in Florida, Indiana, Louisiana, Oklahoma, South Carolina or Virginia

A pharmacy located in one of these states or surrounding areas does not automatically perform a function in support of that state’s plan. If your organization is not certain it is supporting a Medicaid plan administered by Humana, please contact Humana for guidance.

5. Q: Do nonmember-facing personnel have to complete training?

A: Yes, but not on every topic. Please refer to the following for details:

- Being considered member-facing personnel is not limited to having an in-person interaction with a plan member. It can consist of communicating over the phone, by fax or by email with a plan member or caregiver or accessing member-specific information to perform a function (e.g., processing a claim, authorization or prescription).
- All personnel who support a Humana-administered Medicare and/or Medicaid plan are required to be provided with the Compliance Policy and standards of conduct (or materially similar documents) and be trained on the Compliance Program Requirements and the detection, correction and prevention of FWA.

Please note the following for personnel supporting a Humana-administered plan related to Medicaid:

	Topic		
Audience	Health, Safety and Welfare Education Training	Cultural Competency Training	Medicaid Pharmacy Orientation and Provider Training
Member-facing personnel	Required	Required	Required
Nonmember-facing personnel	Not required	Not required	Not required (unless otherwise directed by your organization due to one or more related functions performed)

6. Q: Are the education materials (via policies) and separate training(s) a one-time requirement?

A: No, they are not a one-time requirement. The following must be provided/conducted or assured upon hire/contract and annually thereafter for employees and subcontractors: distribution of Compliance Policy and standards of conduct materials and training on the separate topics of general compliance and combating FWA.

Humana reserves the right to require a contracted pharmacy to submit an attestation form to certify these requirements are being met.

A contracted pharmacy supporting Medicaid and/or dual Medicare and Medicaid members in a Humana-administered plan in Florida, Indiana, Louisiana, Oklahoma, South Carolina and/or Virginia must complete additional and related compliance training.

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Humana sends an annual notification as a reminder that all who participate in Humana's pharmacy network, including those contracted with Humana subsidiaries, must complete these requirements.

7. Q: My organization has its own similar documents and training or we have already completed similar training and education furnished by another organization. Do I still have to do this?

A: Your organization must continue to:

- Adhere to the requirements outlined in the Compliance Policy and standards of conduct materials made available by Humana
- Conduct or assure and track applicable training(s) and submit attestations when required by Humana to confirm commitment to completion of the policy distribution and compliance with training requirements within the calendar year an attestation may be assigned

Your organization does **not** have to utilize Humana materials to meet the education and training requirements. However, Humana documents are a good reference to assess the training and educational content your organization seeks to use. Additionally, Humana reserves the right to request documentation (i.e., policies and tracking records) confirming that your organization has an effective compliance program and meets the requirements outlined in the Compliance Policy and standards of conduct materials.

8. Q: Where can I find more information about the requirements?

A: Requirements for plan sponsors like Humana and their FDRs, which include network pharmacies, are outlined in Title 42 of the Code of Federal Regulations, Part 422.503 as well as Chapter 9 of the CMS Prescription Drug Benefit Manual. These documents are publicly available online and can be accessed at the links below:

42 C.F.R. § 422.503

[CMS Prescription Drug Benefit Manual Chapter 9 – Compliance Program Guidelines and Medicare Managed Care Manual Chapter 21 – Compliance Program Guidelines](#)

[Federal Register – Medicare Program; Contract Year 2019 Policy and Technical Changes to the Medicare Advantage, Medicare Cost Plan, Medicare Fee-for-Service, the Medicare Prescription Drug Benefit Programs, and the PACE Program](#)

Note: The changes outlined in the documents above are not outdated. Instead, they were implemented to apply on a go-forward basis. Additionally, there are requirements in dual Medicare and Medicaid and Medicaid-specific contracts awarded to Humana.

Additional clarifications

9. Q: Is the material the same each year?

A: No, the material is not the same year after year. However, Humana's commitment to compliance does not change. Therefore, the bulk of the material is retained from the prior year to assure alignment with expectations of the applicable government agency contracting with Humana. Humana adds new requirements and clarifications to its materials when necessary. To simplify your review of Humana compliance materials, there is either a notable changes section in each Humana compliance and training document or language advising when there are no material changes.

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10. Q: What will happen if my organization or I do not fulfill any Compliance Program Requirements addressed in this document and fully outlined in the Compliance Policy and standards of conduct materials?

A: If your organization does not fulfill the requirements, it will be out of compliance with its contract with Humana, which could result in disciplinary action up to termination of your organization's contract.