2025 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**: Humana clarified that:

- Humana's policies do not constitute fraud, waste and abuse (FWA) training, yet contain related content that can be used in such training.
- The Medicaid training attestation must be completed annually by organizations supporting one Humana plan or more that has a Medicaid component.

Q8: A submitted attestation is not necessarily confirmation that required education and/or training requirements have been met. At the very least, it affirms a commitment to meeting the requirement(s) in the calendar year the attestation was assigned.

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 the 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 annual Compliance Program Requirements. The Compliance Program Requirements are outlined in the following 2 Humana documents for the current calendar year:

- Compliance Policy for Contracted Healthcare Providers and Third Parties (Compliance Policy) https://assets.humana.com/is/content/humana/Compliance Policypdf
- Ethics Every Day for Contracted Healthcare Providers and Third Parties (standards of conduct) https://assets.humana.com/is/content/humana/Ethics Every Daypdf

The above documents are extensions of your organization's agreement with Humana. 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 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 education requirement by either developing or adopting other materially similar 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. 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 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 complete additional compliance training (Medicaid Training Modules). 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, Illinois, Indiana, Oklahoma, South Carolina, Virginia and/or surrounding areas. The Medicaid Training Modules are:

• Cultural humility, health equity and implicit bias training for providers (Florida, Illinois, and South Carolina):

https://assets.humana.com/is/content/humana/Provider%20Cultural%20Competency%20Trainingpdf

- Cultural humility, health equity and implicit bias training for Medicaid providers (Indiana): https://assets.humana.com/is/content/humana/IN_PROV_Cultural_Humility_Implicit_Bias_Trainingpdf
- Cultural humility, health equity and implicit bias training for Medicaid providers (Oklahoma): https://assets.humana.com/is/content/humana/339402OK1023-A_OK_Prov_Cultural_Humility_Implt_Biaspdf
- Cultural humility, health equity and implicit bias training for Medicaid providers (Virginia): https://assets.humana.com/is/content/humana/VA_Cultural_humility_and_implicit_bias_trainingpdf
- Health, Safety and Welfare Education Training (Florida, Illinois and South Carolina): https://assets.humana.com/is/content/humana/2025%20HSWpdf
- Indiana PathWays for Aging Required Critical Incident Training (Indiana): https://docushare-web.apps.external.pioneer.humana.com/Marketing/docushare-app?file=5519800
- Humana Healthy Horizons In Oklahoma Health, Safety and Welfare Training: https://assets.humana.com/is/content/humana/FINAL_384201OK0124-B_OklahomaHSW-FINALpdf
- Humana Healthy Horizons In Virginia Health, Safety and Welfare Training (Virginia): https://assets.humana.com/is/content/humana/VA_Health_Safety_Welfare_Trainingpdf
- Medicaid Pharmacy Orientation and Annual Provider Training: https://assets.humana.com/is/content/humana/Medicaid Pharmacy Orientation and Annual Provider Trainingpdf

Humana provides a separate notification with access instructions for these Medicaid Training Modules. Network pharmacies and vendors to which Medicaid training applies must review the Medicaid Training Modules and confirm acknowledgment of their receipt and compliance with those materials by completing an annual attestation form.

Note: If your organization has multiple (pharmacy or related) locations under one contract with Humana, the expectation is your organization completes one attestation on behalf of all those locations.

For those pharmacies supporting a Humana Medicaid contract for Florida, Indiana, Oklahoma, South Carolina, Virginia or a dual Medicare and Medicaid contract for Illinois, Humana offers a manual attestation form to assist your organization in assuring additional requirements related to the Medicaid and/or dual Medicare and Medicaid requirements are met. The Humana attestation form is located at Provider.Humana.com/pharmacy-resources/manuals-forms under the "Medicaid training resources" tab. Fax the completed form to Humana at 877-820-5740.

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	Any plan administered by Humana for members who are:		
programs for the plan type	Medicaid beneficiaries in Florida, Indiana, Oklahoma, South Carolina		
	or Virginia		
	Dual Medicare and Medicaid beneficiaries in Illinois		

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: Who should complete the Medicaid attestation form and submit it to Humana?

A: Someone authorized to complete attestations and acknowledgments related to compliance on behalf of your organization should complete the 2025 Medicaid-Specific Training Attestation Form for Pharmacy Providers and submit it to Humana if the following criteria is met: Your organization supports a Humana-administered plan with a Medicaid component for members in one or more of the following states (Florida, Illinois, Indiana, Oklahoma, South Carolina and/or Virginia).

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

A: Yes, but not on every topic, and none of them need to submit an attestation form to Humana. 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.

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

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

7. Q: Are the training and attestations a one-time requirement?

A: No, they are not a one-time requirement.

- Training on the separate topics of general compliance and combating FWA must be provided to affected employees and subcontractors upon their initial hire/contract and annually thereafter. Humana reserves the right to require a contracted pharmacy to submit an attestation form for these training requirements.
- A contracted pharmacy supporting Medicaid and/or dual Medicare and Medicaid beneficiaries in a Humana-administered plan in Florida, Illinois, Indiana, Oklahoma, South Carolina and/or Virginia must:
 - Complete additional and related compliance training
 - Attest accordingly via Humana's attestation form on an annual basis to meet Humana's contractual requirements within the applicable state(s) above.

Humana sends notifications at least annually as a reminder that all who participate in Humana's pharmacy network, including those contracted with Humana subsidiaries, must complete these requirements.

- 8. 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 and track applicable training(s) and submit attestations where required by Humana to confirm commitment to completion of the training and compliance with training requirements within the calendar year the attestation was assigned

Your organization does **not** have to utilize Humana materials to meet the 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 that meets the requirements outlined in the Compliance Policy and standards of conduct.

9. 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 and Chapter 21 of the Medicare Managed Care Manual. These documents are publicly available online and can be accessed at the links below:

42 C.F.R. § 422.503

www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-422/subpart-K/section-422.503

CMS Prescription Drug Benefit Manual Chapter 9 – Compliance Program Guidelines and Medicare Managed Care Manual Chapter 21 – Compliance Program Guidelines www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Chapter9.pdf

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

www.govinfo.gov/content/pkg/FR-2018-04-16/pdf/2018-07179.pdf

Note: The changes outlined in the document 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

10. Q: Is the material the same each year after the initial attestation requirement?

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.

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.

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