



Humana  
Physician  
News

**Q1 2025 newsletter** for in-network physicians, clinicians and office staff to support you in the care of your Humana-covered patients



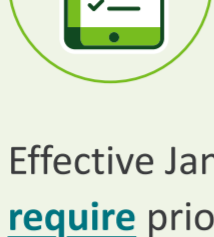
**Streamline your workflow: Availity Essentials adds IPA and delegated entities**

Effective November 2024, Availity Essentials™ member profiles now include names and addresses of Independent Practice Associations (IPAs) and delegated entities associated with Humana members. This update ensures claims are correctly routed.

What you can expect:

- **Improved efficiency and accuracy:** Reduce your administrative burden with improved accuracy of Humana member information to make informed decisions.
- **Better coordination:** Coordinate care more effectively with detailed Humana member information.
- **Time savings:** Access details in one place, saving time and effort.

**Get started** →



**New rule improves prior authorization process**

Effective Jan. 1, 2026, the Centers for Medicare & Medicaid Services (CMS) will **require** prior authorization decisions within 7 calendar days for standard (non-urgent) requests for medical items and services. To meet the streamlined time frame in advance of 2026, supporting clinical information must be submitted **at the time of prior authorization requests** for items or services. Otherwise, it may result in a delayed and/or adverse decision.

You can easily determine if a prior authorization is required with Humana's [search tool](#). Search by Current Procedural Terminology (CPT®) codes, procedures or generic drug name(s). Remember to verify benefit coverage in [Availity Essentials](#).

**Review details** →



**Reduce your patients' out-of-pocket expenses with participating DME providers**

As **announced** in 2023, durable medical equipment (DME) providers, AdaptHealth and Rotech Healthcare, manage Humana's Medicare Advantage (MA) health maintenance organization (HMO) business in the states below:

- **AdaptHealth:** AL, AR, CO, CT, DC, DE, GA, IA, IL, KS, MA, MD, ME, MN, MO, NC, ND, NE, NH, NJ, NM, NV, NY, OK, PA, RI, SC, SD, TN, TX, VA, VT and WI
- **Rotech Healthcare:** Central North FL, IN, KY, LA, MI, MS, OH and WV

**Referring patients to a non-participating DME provider may cause them to incur higher costs and out-of-pocket expenses.** If your area is not serviced by AdaptHealth or Rotech Healthcare, review a full list of Humana's participating DME providers.

**Review DME providers** →

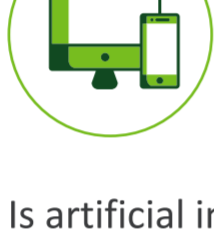


**New study shows CenterWell Pharmacy benefits heart failure with reduced ejection fraction patients**

CenterWell Pharmacy® mail order with 90-day fills is associated with higher proportion of days covered, reduced hospitalizations and allowed medical spend, including for patients with heart failure with reduced ejection fraction (HFrEF).

Recent research confirmed HFrEF patients who take more medications on guideline-directed medical therapy have better health outcomes, regardless of pharmacy. In addition, those who filled with CenterWell had higher adherence and fewer admits compared with patients who fill elsewhere.\*

**Review research findings** →



**Artificial intelligence adoption in the value-based era**

Is artificial intelligence (AI) accelerating the shift to value or just making healthcare better at fee-for-service practices?

The Medical Group Management Association and Humana recently surveyed healthcare leaders about their perceptions and implementation of AI solutions in their organizations, including motivations for and barriers to AI adoption, governance and important factors for organizational buy-in.

**Review research findings** →

**Resources and support**

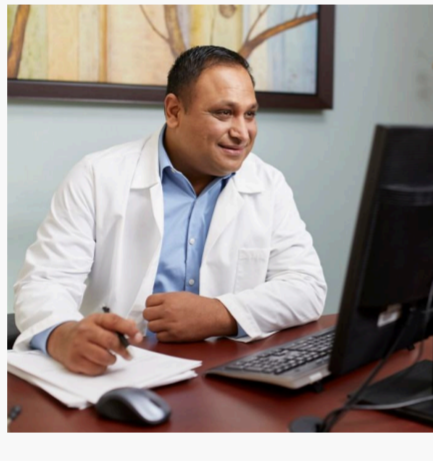


**NEW! Watch the Stars condition management overview video**

According to the Centers for Disease Control and Prevention, **38 million** Americans have diabetes and an additional **27 million**, age 65 or older, have pre-diabetes. Effective diabetes management is vital to the health and well-being of your patients and an important component of meeting Medicare quality goals.

Ensure you have the information to best support your diabetic patients and understand CMS guidelines to meet Stars requirements, including those introduced in 2024.

**Watch overview video** →



**Compliance reminders**

**Complete your required 2025 training**

CMS requires that training be completed annually by healthcare providers who participate in Humana MA Special Needs Plans (SNPs); Humana Healthy Horizons® Medicaid plans in 1 or more applicable states; and/or a Humana Medicare-Medicaid dual plan in Illinois. Review what training applies to your practice.

**Access training** →

**Care for Older Adults—Medication Review measure**

To ensure compliance, healthcare providers should perform the Care for Older Adults-Medication Review (COA-MDR) at least annually with 2 codes submitted at the same date of service:

- **1159F** Medication list documented in medical record
- **1160F** Review of all medications (prescriptions, over the counter, supplements) conducted and documented by prescribing practitioner

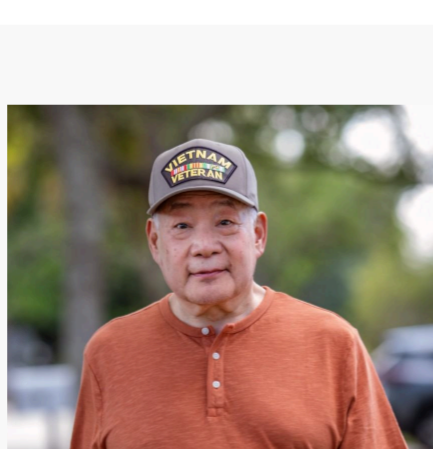
**Review the COA measure** →



**NEW! Go365 provider toolkit puts patient well-being front and center**

Go365 by Humana® well-being and rewards program can support your Humana-covered patients' health outside the office. Offering guidance and tools to positively impact their nutrition, sleep, exercise and more, this toolkit features 2025 rewards, CPT codes and links to downloadable patient resources.

**Access provider toolkit** →



**The holidays and substance use disorders**

For many, the holidays were more than a time of celebration. According to the American Psychological Association, **38%** of people reported increased stress, which can be especially troubling for those with a history of a substance use disorder. In fact, **27%** of Americans admitted to drinking more over the holidays. Learn about managing substance use disorders.

**Review guidelines** →

**Additional links**

[Prior authorization and notification lists](#) →

[Important policy reminders](#) →

[Claims payment policies](#) →

[Claims processing edits](#) →

[Medical and Pharmacy Coverage Policies](#) →

[Moving to value-based care](#) →

[Making It Easier: Series about doing business with Humana](#) →

[Clinical practice guidelines](#) →

[Behavioral health credentialing and resources](#) →

[Medicare/Medicaid annual compliance training](#) →

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\* Patients should contact their plan for more information. Limitations, copayments and restrictions may apply. Benefits and member cost share may change on Jan. 1 of each year. Patients have the sole discretion to choose their pharmacy and expect that prescribers will use their independent medical judgment when discussing pharmacy choices with their patients. Other pharmacies are available in Humana's network.

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