Why Humana

Humana

2016 AEP Readiness Webinar
Introduction

At Humana:

- We value our agents
- We will continue to adapt our product line to best fit the needs of your clients
- We not only give you access to a comprehensive product line, but also a great service and sales support system
- We know you work hard to grow your business and we want to give you tools and materials to be successful
Agenda

- Humana Journey
- 2016 Product Overview
- Grass Roots Marketing
- What Humana Can Do For You
- What Can We Do For Your Client
- Clinical Strategy
- Supplemental Benefits & Tools
- Compliance Updates
- Star Rating
Newsweek Magazine
Has published its annual ranking of the top 500 U.S. corporations based on their overall sustainability efforts and Humana is ranked No. 25.

2015 Fortune 500 List
Fortune magazine, ranks Humana 58th, up from 73rd in 2014. It is Humana’s highest-ever ranking.

Exceeds veteran hiring goal:
Humana has hired 2,380 veterans and military spouses since 2011, surpassing by nearly 20 percent a goal it set for itself four years ago.
2016 Product Overview
Product Portfolio

Senior Products
Medicare Advantage Plans, Part D PDP, Medicare Supplement Plans, Value-Added Services

Individual Medical
On and Off Exchange Plans

Dental
Preventive Plus, On Exchange Dental

Vision
Vision Focus

Supplemental
Junior Estate Builder, Critical Illness
Humana MA-HMO and MA-PPO 2016
Region 1: Florida

More good reasons to get certified to sell Humana Medicare:

• 4,700,625 Medicare eligibles in Florida*
• We offer two carriers to choose from – Humana and CarePlus
• CarePlus is the only Florida MAPD plan to hold a 5-star rating in 2015
• Tampa, Orlando, and South Florida opportunities for both Humana and CarePlus
• We plan to offer $0 premium plans statewide
Region 2: Alabama, Georgia, Louisiana, Mississippi, North Carolina, South Carolina and Tennessee

More good reasons to get certified to sell Humana Medicare:

- 7,669,287 Medicare eligibles*
- New Humana HMO filed for Wake County, North Carolina
- We plan to offer excellent HMO value in Knoxville, Tennessee
- Humana has filed a number of strong HMO choices in Louisiana
Region 3: Delaware, District of Columbia, Indiana, Kentucky, Maryland, New Jersey, Ohio, Pennsylvania, Virginia, West Virginia

More good reasons to get certified to sell Humana Medicare:

• 11,025,939 Medicare eligibles*
• HMO opportunities filed for the Tidewater area of Virginia – home of our 4.5-star plan in 2015
• Humana plans to offer new HMO Chronic and Dual Eligible SNPs in Cincinnati, OH
• Columbus, OH, Humana HMO filed for 2016 offers SilverSneakers with access to area YMCAs
• Strong HMO from Humana in Louisville, KY, filed for in 2016
Region 4: Connecticut, Illinois, Iowa, Maine, Massachusetts, Michigan, Minnesota, Montana, Nebraska, New Hampshire, New York, North Dakota, Rhode Island, South Dakota, Vermont, Wisconsin, Wyoming

More good reasons to get certified to sell Humana Medicare:

- 13, 324,456 Medicare eligibles*
- Humana continues to expand in New York City with coverage in Brooklyn, Staten Island, Queens, Manhattan, and the Bronx
- In Wisconsin, Humana continues to provide strong and consistent MA plans
- Humana filed excellent $0 premium HMO plans for Chicago, IL
Region 5: Arkansas, Colorado, Kansas, Missouri, New Mexico, Oklahoma, Texas

More good reasons to get certified to sell Humana Medicare:

• 13,324,456 Medicare eligibles*
• Check out our $0 premium HMO in St. Louis, MO
• New growth in Dallas, Texas! 4 starts in 2015!
• Humana’s strong RPPO filed for Texas continues to provide excellent coverage!
• New Mexico has a $0 premium HMO that was 4-star rated in 2015!
Region 6: Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Utah, Washington

More good reasons to get certified to sell Humana Medicare:

- 13, 324,456 Medicare eligibles*
- In Los Angeles and Orange County, Humana plans filed for 2016 maintain excellent prescription drug formularies providing extensive coverage for a $0 HMO premium!
- Continued growth of our dual-eligible SNPs planned for 2016 in California
- Humana favorable in Hawaii with excellent HMO and LPPO plans
- Excellent SNP opportunities from Humana in Clark and Spokane counties in Washington state
2016 PDP plan by plan highlights

Humana Preferred Rx Plan (PDP)
- Available in all regions
- $360 deductible
- Cost sharing:
  - Preferred same in all regions
  - $1/$2/20%/35%/25%
  - Standard varies by region
  - $2-3/$3-9/25%/36-50%/25%
  - 5-tiered formulary
- Walmart as preferred partner
- Co-marketed with Walmart

Humana Walmart Rx Plan (PDP)
- Available in 34 regions (not available in Puerto Rico)
- $360 deductible; only applies to tier 3, 4, and 5
- Cost sharing
  - Preferred same in all regions
  - $1/$4/20%/35%/25%
  - Standard varies by region
  - $10/$20/25%/45-50%/25%
  - 5-tiered formulary
- Walmart as preferred partner
- Co-marketed with Walmart
Medicare Supplement 2016
Top reasons to sell Humana Med Sup

1. Flexibility, freedom, and choice
2. Focus on customer service
3. Year-round selling
4. Complements Part D and standalone dental and vision coverage
5. Broad plan offerings
6. Consumer focused value-added services
7. Committed to stable rate increases
8. Humana’s national brand and reputation as a leader in the senior products market
Humana Medicare Supplement Plans Competitive Landscape – High Level

Please see below for guidance on competitive classifications. Also, please note that this provides a composite view based on the counties that make up ~75% or greater of Medicare eligibles. However, certain counties may have a value prop incongruent with the composite view.

Note: Competitive designations are based on plans F, F-HD, and N against a competitive set of carriers (including BC/BS, Mutual of Omaha, AARP/UHC & AETNA). Reviewing higher ages produces similar results.

Green indicates HUM plans are generally within ~$15 PMPM of competitors. Yellow indicates some or all plans are within ~$15-$30 PMPM. Red indicates a price position of ~$30 PMPM more than competitors. Plan F-HD is competitive (green) in all states (Most competitors do not offer it). Plan N is generally more competitive than Plan F and is not offered by all leading carriers which also creates opportunity.

May 19, 2015
Why Humana?
What Humana can do for you

- Self reporting tools to monitor your book of business
  - Submitted Sales, Active Members, & Terminated Member reports

- Electronic enrollment options for 2016
  - Tablet and laptop options

- Top commissions and renewals

- Broad portfolio of products to serve your clients and meet their needs

- Strong Medicare Advantage and PDP plans

- Best in class Agent Support Unit
Humana’s Integrated Care Delivery Model

Our Integrated Care Delivery Model is the engine of our consumer focused strategy.
New Member Assessment (welcome calls)

Welcomes Medicare program enrollees within **90 days** of eligibility per CMS requirements. First attempts are made within 30 days of enrollment.

1. Thank member for choosing Humana
2. Answers member’s questions
3. Asks member to complete a brief Health Assessment
4. Determines at-risk members
5. Directs member to additional resources if needed

**Outcomes**

*National Data – 2014*

- **88%** of members were successfully contacted
- **62%** of those contacted completed HRA:
  - 30% referred to medical case management program
  - 13% referred to Medicaid application assistance
  - 8% referred to behavioral case management programs

*National Data – 2014*
Humana Supplemental Benefits & Tools
Supplemental benefits and helpful tools

- **Humana Pharmacy (formerly RightSource)** – Humana’s mail-order pharmacy
- **Physician Finder Plus** – Find Physicians on Humana.com
- **Guidance Centers** - Retail "store-fronts“ providing the community with access to wellness resources
- **Smart Summary** – Personalized member monthly statements
- **HumanaFirst** – 24-hour nurse hotline
- **SilverSneakers** – Exercise and wellness program for seniors
- **Well Dine** – Meals Program
- **Over-the-Counter**
- **Vitality** – Wellness Program
Humana Pharmacy Solutions

Our mission is to make pharmacy care simple, accessible, safe, and affordable for the people we serve. Our vision is to at all points of care (the physician’s office, the hospital, the pharmacy counter, the home); to know our members, caregivers, and providers, empower them with simple, powerful, and improve the health of our members by 20% by 2020.

68.4%
More than 68.4% of Medicare beneficiaries have two or more chronic conditions\(^1\)

Almost three out of every four Americans do not take their medication appropriately\(^2\)

Adverse drug events cause more than 700,000 emergency department visits each year\(^3\)

15% savings
Mail-order pharmacies save consumers and payers an average of 15% on 90-day prescriptions\(^4\)
How to get started with Humana Pharmacy

- **Online:** Members can go to Humanapharmacy.com and register or login using their MyHumana user name and password

- **By Phone:** Members can call Humana Pharmacy at 1-855-310-5799 (TTY: 711)

- **By Mail:** Members can mail their paper prescriptions with a New Prescription Order form (HumanaPharmacy.com/forms) to:
  
  Humana Pharmacy  
  P.O. Box 745099  
  Cincinnati, OH 45274-5099

- **Through Their Healthcare Provider:** Healthcare providers can send the member’s prescriptions by:
  
  - E-prescribe and selecting “Humana Pharmacy” from the list of pharmacies on their e-prescribing tool
  - Phone: 1-800-379-0092

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**Please Note:** Members with an active benefit plan should have the following information ready when they call or go online: Humana ID, medications (name, strength, dosage, etc.), physician’s contact information (name, phone number, and fax number), amount of medication left.
Humana Medicare Advantage
The plan people stick with

When something works, people stick with it. Find out why more people stick with Humana Medicare Advantage.

→ Shop Now

⚠️ Humana and Aetna have announced an agreement to combine the two companies. Read the news release.

Browse our products

- Medical
- Dental
- Vision
- Pharmacy

Find a doctor

Quickly locate a doctor, hospital, dentist, vision provider or pharmacy. → Search
Guidance Centers

Humana Guidance Centers and Humana locations are retail "store-fronts" providing the community with access to wellness resources.

- Attract a mix of member and non-member visitor traffic (visitor mix varies significantly by market, ranging from 50-80% Humana members)
- In-person customer service support – Assistance with claims questions, prescription pricing information, and/or benefits understanding etc.
- Deliver wellness content and support at no cost.
SmartSummary

SmartSummary

• is a personalized monthly statement

• puts all your health and financial information in one place, making it easier to review your benefits, track your costs, and manage your healthcare budget

• includes health information of particular interest to you. You can find the statement on MyHumana or receive in the mail.
HumanaFirst

Toll-free member access to a registered nurse for
1. Immediate Medical Concerns – 24/7 decision support (triage)
   - Whether an urgent care center is an option for the specific situation
   - What to do when a child has a fever in the middle of the night
   - Whether reactions to new medications are cause for alarm
2. Health Planning & Support – member self-referral for support services
   - Provide guidance on how to best use benefits when planning medical care
   - Connect members with helpful clinical programs and services

“When debating on going to the ER, when planning future medical procedures, when diagnosed with a new condition... To see what Humana can do to help, call HumanaFirst.”

Bottom Line
- 32% of those inclined to go to the ER decide to pursue an alternative, lower-cost care option
- 93% of callers would call again with other medical issues
- 36% of callers speak with a nurse immediately
SilverSneakers® Fitness

SilverSneakers is included on many MA and MedSupp plans and over 650,000 Humana members are enrolled in the program.

SilverSneakers offers:
- A basic fitness membership to any of more than 11,000 locations
- SilverSneakers Steps, an at-home fitness component
- SilverSneakers FLEX, classes and activities offered outside a fitness location
- SilverSneakers Online, a secure, easy-to-use member website
Well Dine Meal Program

**Standard version**
- Nutritious meals to eligible Medicare members recovering from an inpatient stay in a hospital or skilled nursing facility
- Up to 4 sets of 10 frozen, packaged meals per year
- Regular, diabetic, puree, vegetarian, kosher, gluten free and renal-supportive options
- Available to over 2.9 million members (around 90% of members)
- In 2014, 129,000 + meals were delivered

**Chronic Version**
- Meals for Chronic Special Needs Plan members with Diabetes Mellitus, Chronic Heart Failure & Cardiovascular Disorders.
- Upon doctor approval, members get up to 2 sets of 10 frozen, precooked meals (per covered condition) delivered to the home with no inpatient stay required
- Available to over 30K members

**Member education**
- ANOC/EOC and Summary of Benefits
- MyHumana.com annual benefit content
- Get Well card
- Promotional content in Humana Active Outlook® materials

**Member education**
- SNPs Humana Guide
- Humana Case Manager outreach to eligible members
- ANOC/EOC and Summary of Benefits
- Humana Customer Care Reps trained for inbound inquiries
HumanaVitality

HumanaVitality is a wellness program created to help you get and stay on a healthier path – one small step at a time.

Once you join HumanaVitality, members take a Health Assessment and earn rewards!

How does it work?

Complete healthy activities ➔ Earn Vitality Bucks ➔ Get rewarded
Start getting healthy

1. **Prevention**
   - Earn Vitality Bucks for screenings you’re probably already getting
   - You’ll be automatically rewarded when your screening goes through Humana’s claims process

2. **Education**
   - Completing the HumanaVitality Health Assessment isn’t required, but you can earn up to 1,250 Vitality Bucks for completing it

3. **Fitness**
   - Register your pedometer or other fitness device with your HumanaVitality account and automatically get reward when you log at least 3,000 steps/day*
   - Attend Silver Sneakers classes**? You’ll automatically earn Vitality Bucks when you swipe your Silver Sneakers card at a Silver Sneakers location

*If you’re an offline member, you can fill out a paper activity tracker and return it to HumanaVitality monthly
**Not all plans include SilverSneakers
Spend your Vitality Bucks in the HumanaVitality Mall

**Fitness devices**
- Pedometers
- Heart rate monitors
- Activity trackers

**Fitness gear**
- Yoga mats
- Soft-grip weights
- And more

**Movie tickets**
- Various theatres

**HumanaVitality apparel**
- Men's and women's workout apparel

**Gift cards**
- Various retailers
- Gas stations
Community Based Marketing
Community based marketing: Who

Put the “Market” Back in Marketing
Important!

All agents representing Humana in their communities must abide by all rules set down by: CMS, your state DOI and Humana.

These rules include:

- Receiving approval from Humana to hold an event (marketing or educational).
- Marketing events must be reported to CMS.
- Educational events must be advertised as “Educational” with CMS approval disclaimer or they are Marketing events.
- No marketing (flyers or sales material) allowed at an educational event.
Community based marketing: What

What Is Community Based / Grass Roots Marketing?

• Public Relations = Messaging to the Masses
• Community Relations = Messaging to a Community
• Community Based Marketing = Strategic Community Relations

In Other Words....

• Where Do You Want to Go?
• When?
• What Is Your Message?

It’s See and Be Seen in Your Community!
Community based marketing: Where

**Wherever!**
Senior Centers       Professional Groups
Community Centers   Social Groups
Church Groups       Volunteer Groups
Home Owners Assoc.  Assisted and Independent Living
Patio Homes         PTA’s
Mobile Home Parks   School Assemblies
Renter Associations Libraries
Chambers of Commerce **(Fill in the Blank)**

**Summary:**
*Wherever and Whenever Any Organization Meets on a Regular Basis, They Are in Need of a Speaker. Why Not You?*
Community based marketing: Why

✓ Ownership  Community Events are Better When

✓ Branding  Your Business.

✓ Visibility  An Ounce of Image is Worth a Pound of

✓ Prospecting  Self Generating Leads.

✓ Economics  No or Low Dollar Expenditure!
Community based marketing: The efficiencies

- We go to them!
- They promote.
- We get into their network.
- They supply the food.
Community based marketing: The reality

1. Grass Roots Marketing **Is a Process!**

   ![Image of coal](image1.png) + Time = ![Image of diamond](image2.png)

2. **It’s an Effort!**....Over perform on expectation.

3. **It’s a Commitment!**....No one and done!
2016 Medicare Marketing Guidelines and Compliance Updates
Topics for today

- 2016 CMS Medicare Marketing Guidelines
  There were not a lot of changes.....
  
  Note: Each plan you contract with may have different interpretations of Medicare Marketing Guidelines

- TCPA Update

- Pre-AEP Application Guidance
  Some important reminders

- Complaint Drivers

- Factors that cause Applications to Pend
Medicare Marketing Guidelines

2016 Updates
2016 Medicare Marketing Guidelines

- Sections 30.6, 40.9, 60.4 & 100.4 – Directories
  - Allow plans to provide directories electronically rather than automatically mail one upon enrollment without prior consent.
  - Creates a “notice” to be given to the enrollee instructing them where to find directories on plan website
  - Creates a new requirement that the directories must be updated real time and on a monthly basis.

- Impact
  - Good news! This should result in vastly improved data in online directories.

- 2016 Call Letter also requires more accurate directories and will be auditing plans to ensure compliance.
- Agents will need to advise clients with instructions where to access the directory online or how to request a paper copy.
2016 Medicare Marketing Guidelines

- Section 50.15 – Disclaimer related to preferred cost sharing pharmacy
- “Part D Sponsors with limited access to preferred cost sharing pharmacies must include the following disclaimer on materials that reference preferred cost sharing pharmacy networks and/or preferred cost sharing benefits”:

- Impacts
  - For example, Agents selling Walmart PDP plans in areas where closest Walmart is not close by to where the beneficiary resides must be sure to advise clients that the lower costs may not be available to them in their area if they use other pharmacies.
2016 Medicare Marketing Guidelines – key impacts

• Section 120.2 – Plan Reporting of Terminated Agents
  - Plans/Part D Sponsors must report for-cause terminations to CMS Account Managers, via email or letter. Plans/Part D Sponsors must also report to CMS Account Managers any sales of Medicare products which were made by agents without a valid license.

• Impacts
  - Specifying for the first time, a reporting requirement to let them know if an agent sold without a license.
  - **DO NOT LET YOUR LICENSE LAPSE**
  - **GET YOUR CE DONE**
  - **BE SURE YOU HAVE ALL APPLICABLE LICENSES BEFORE YOU SELL – RESIDENT AND NON-RESIDENT**
  - **RECERTIFICATION – GET IT DONE**
FCC Declaratory Ruling on the TCPA: Sales Impacts
July 2015 FCC Declaratory Ruling – definition of ATDS

**Definition of ATDS**

Included a Very Broad Definition of ATDS (Automatic Telephone Dialing System) that could arguably include *smartphones/cell phones*

**Obtaining Consent**

- Informational calls to cell phones via ATDS require prior express consent
- Marketing calls to cell phones via ATDS require prior express written consent
- Whenever possible – GET THE RESIDENTIAL PHONE NUMBER, NOT A CELL PHONE!
FCC Declaratory Ruling – revoking consent and reassigned phone numbers

Revoking Consent

• Consent may be revoked at any time by any method, verbally or in writing. There is no limitation on how the consumer may revoke consent.

Reassigned Numbers

• If a company has received prior express written consent to call a cell phone, that consent is no longer valid if the cell number has been reassigned to a different user.

• One free pass and then subject to a fine.
What does this mean to agents?

• Not just related to MA/PDP.

• Guidance is still being evaluated so short answer is “we don’t fully know yet”

• Will likely mean you have to get documentation when someone gives you the OK to call them.

• Try to get residential phone numbers and avoid cell phone numbers for now.

• News at 11!!
Pre-AEP Guidance

2016
Pre-AEP Applications

• CMS application guidance:
  “Paper AEP enrollment requests received prior to the start of the AEP for which there is indication of sale agent or broker involvement in the submission of the request (i.e., the name or contact information of a sales agent or broker) must be investigated by the organization for compliance with the requirements in the Medicare Marketing Guidelines.”

• In addition to an investigation, the member’s application will be rejected.
Pre-AEP Applications

Agents should instruct the beneficiary to wait to sign, date and mail the AEP application until October 15th or later to:

1. Avoid rejection of application
2. Reduce agent investigations – saves you time

Applications received prior to 10/15 with an agent name listed will be rejected and the beneficiary will be notified by mail that Humana was unable to complete their enrollment. The letter encourages the beneficiary to:

1. Call in to Humana to enroll over the phone
2. Request that an agent come back to their home to assist them
Complaint Drivers
Top 3 Compliant Categories

• **Provider participation** – numerous possible issues.
  • PPO versus HMO participation
  • Different HMO plans may have different HMO networks
  • Be sure to explain that the PCP has to be willing to refer to a particular Specialist. Just because their name is in the network does not mean the PCP they chose will refer to that provider.
  • Use Physician Finder vs the paper directory – more up-to-date.

• **Presentation/Benefits** - did not use presentation or SOB, misrepresented or failed to disclose plan benefits or premium

• **Enrollment/Eligibility** - effective date incorrect, election type code issues, enrolled in wrong plan or they did not want to enroll.
Agent Assisted Pended Application Summary
Agent assisted application pends

- Group ID Issues: 44%
- Missing or Invalid Forms: 5%
- Election Code Issues: 8%
- Missing Information: 14%
- Signature Page Issues: 14%
- Other Invalid Data Issues: 15%
Pended application summary

80% of all Agent related application pends are a result of the top 8 issues.

1. Group ID Not an individual Product
2. Signature is missing from the application
3. Election Type code is not valid for market receipt date
4. Birth date filed must contain a valid date
5. Sex type must not be blank
6. Election Type Code= O,N, I or T –not valid for PDP Members
7. Service Area Invalid
8. City Name, State and Zip Code missing
What does this mean to agents?

• PLEASE take the time to fill out ALL fields on the app

• Fill them out correctly, especially with correct GR/BN #

• Be sure the app is signed!

• Review the rules around election codes so you are using the right one.
Medicare Star Program Overview
Medicare Stars Program

Overview
Stars is a CMS program created under the Affordable Care Act to drive quality for Medicare Advantage members.

Stars is an important subset of quality which helps drive improvement through increased awareness and focus.

Value

Member
- Quality and Overall Health
- More engaged members, connected to their PCPs
- Improved member experience
  - Benefit Usage
  - Customer Service
  - Process Improvement
- Patient safety related to Prescriptions
- Screenings and early detection result in healthier members

Provider
- More engaged providers
- Improved provider experience
- Facilitates provider partnership
- Provider tools and rewards
Medicare Advantage initial certification

• Step #1  Get appointed!
• Step #2  Complete AHIP and Humana Compliance/Product Certification courses online
• Step #3  Attend a Certification Class

If you are currently certified with Humana you must complete the annual recertification:
Thank you for being a Humana Super Agent!

• We continue to value our agent partners

• We continue to adapt our product line to best fit the needs of your clients

• We give you access to a comprehensive product line, and service and support unlike any other

• We know you work hard to grow your business and we want to give you the tools and materials you need to continue toward a successful future