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CAQH Announces Humana Inc. Certified to Use CORE Phase I Rules

Washington, DC – (March 4, 2009) – CAQH announced today that Humana Inc., one of the nation's largest health-benefits companies, has completed the testing process certifying its systems can deliver patient administrative data according to the Committee on Operating Rules for Information Exchange (CORE) Phase I rules.

Through CORE rules certification, Humana has taken another step toward more efficient exchange of patient administrative information with healthcare providers. The certification will impact approximately two-thirds of Humana's 10.6 million medical members, including Medicare beneficiaries. The CORE rules are not applicable to Humana Military Healthcare Services, and Humana's Puerto Rico operations, which together represent approximately 30 percent of Humana's total medical membership.

The announcement signifies an important milestone in the industry-driven effort to transform nationwide electronic data exchange and advance system interoperability.

CAQH launched CORE to create an all-payer solution that enables provider access to patient insurance information before or at the time of service, with providers using the electronic system of their choice. CAQH has brought together more than 100 industry stakeholders to collaborate on a multi-phase set of uniform business rules to achieve that goal.

"Humana is a founding CORE participant and is playing an essential role in shaping the CORE rules," said Robin Thomashauer, executive director of CAQH. "Its sizable presence nationally and significant Medicare membership considerably increase the impact of our administrative simplification effort."

With more than 1 million Americans covered through its Medicare Advantage plans, Humana is the second largest administrator of Medicare benefits in the U.S. Its national and regional networks include more than 450,000 physicians, hospitals, pharmacies and ancillary care providers, in every state.

"CORE is building a milestone-driven path for industry coordination on electronic administrative data exchange," said Bruce Goodman, senior vice president and chief service and information officer for Humana. "We believe the CORE rules are a critical component for moving our organization and the entire industry toward a more efficient, understandable health care system."

Availity, LLC, a clearinghouse and health information network partially owned by Humana, also is certified as operating in accordance with the CORE Phase I rules.

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Humana Phase I Certification/2

To date, CORE has created and promulgated two phases of rules. The Phase I rules ensure that health plans and providers share accurate and consistent eligibility and benefit information. CORE Phase II rules build on the Phase I rules, adding guidelines covering electronic connectivity, patient identifiers, claims status and reporting of patient financial responsibility.

CORE participants have begun the process to develop Phase III rules, which will focus on improving the electronic exchange of additional administrative transactions, such as prior authorization and remittance advice.

About CAQH

CAQH, a nonprofit alliance of health plans and trade associations, serves as a catalyst for healthcare industry collaboration on initiatives that simplify and streamline healthcare administration. CAQH solutions help promote quality interactions between plans, providers and other stakeholders, reduce costs and frustrations associated with healthcare administration, facilitate administrative healthcare information exchange and encourage administrative and clinical data integration. Visit www.caqh.org for more information.

About Humana

Humana Inc., headquartered in Louisville, Kentucky, is one of the nation's largest publicly traded health and supplemental benefits companies, with approximately 10.6 million medical members. Humana is a full-service benefits solutions company, offering a wide array of health and supplementary benefit plans for employer groups, government programs and individuals. Over its 48-year history, Humana has consistently seized opportunities to meet changing customer needs. Today, the company is a leader in consumer engagement, providing guidance that leads to lower costs and a better health plan experience throughout its diversified customer portfolio. More information can be found at <u>www.humana.com</u>.

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