



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

**Steven L. Beshear**  
Governor

275 East Main Street, 6W-A  
Frankfort, KY 40621  
P: 502-564-4321  
F: 502-564-0509  
www.chfs.ky.gov

**Audrey Tayse Haynes**  
Secretary

**Lawrence Kissner**  
Commissioner

September 22, 2014

Chad Pendleton  
Humana CareSource Health Plan  
101 South 5<sup>th</sup> Street  
Louisville, KY 40202

Dear Mr. Pendleton,

Please accept this correspondence as notification from the Commonwealth of Kentucky, Department for Medicaid Services (“Department”) that in order to be compliant with Section 21.5 (EQR Performance) of the Managed Care Contract (“Contract”) between the Commonwealth of Kentucky and Humana Health Plan (Humana), shall submit to the Department Corrective Action Plans for each deficiency cited below. Plans shall be submitted within 60 days following the date of this notification delineating the time and manner in which each deficiency is to be corrected. Humana’s final resolution of all potential quality concerns shall be completed within six (6) months of Humana’s notification.

The 2013 Medicaid Compliance Review conducted by IPRO on behalf of the Department found Humana Minimally Compliant in the following area of Behavioral Health Services:

Unique Identifier	Requirements and/or Findings
HCS2014IPRO-BH1	The Behavioral Health Services Hotline may serve multiple Contractor Programs if the Hotline staff is knowledgeable about all of the Contractor Programs. The Behavioral Health Services Hotline may serve multiple Service Areas if the Hotline staff is knowledgeable about all such Service Areas, including the Behavioral Health Provider Network in each Service Area.

I am aware that Humana may have submitted Corrective Action Plans to IPRO in an effort to correct these deficiencies. Upon IPRO’s recommendation, DMS will accept those

plans and I encourage you to implement them in order to become fully compliant with the Contract and Federal Regulations. In order to track Humana's progress in this area, I am asking that Humana give a report on the plan's progress at the Quarterly Quality Meetings.

Please note that each issue is assigned a unique identifier. This must be included in in any other correspondence concerning these issues. I look forward to receiving Humana's Quarterly Progress Reports and will be available for your questions throughout the process.

Sincerely,

A handwritten signature in black ink that reads "Patricia Biggs" followed by a stylized monogram "RW".

Patricia Biggs  
Director of Program Quality and Outcomes  
Department for Medicaid Services

cc: Lawrence Kissner, Commissioner, Department for Medicaid Services  
Christina Heavrin, General Counsel, Cabinet for Health and Family Services  
Elizabeth Justus, Manager, Managed Care Oversight, Department for Medicaid Services