**Subject: COVID-19 telehealth and other virtual services eligible for risk adjustment with Humana**

Dear <Insert healthcare provider’s name with credentials>:

Please refer to the attached flyer that provides information regarding COVID-19 telehealth and other virtual services that are eligible for risk adjustment with Humana.

If you have questions, please contact me at <Insert sender’s phone number>, Monday through Friday <Insert hours of availability and time zone> or via email at <Insert sender’s email address>.

Sincerely,

<Insert market representative signature>

<Insert market representative name>

<Insert market representative title>