Humana Healthy Horizons in Ohio Provider Resource Guide

Welcome to Humana Healthy Horizons® in Ohio, a Medicaid managed care program focused on improving the health and well-being of children and adults across the state.

This provider resource guide includes tools and information for network and Ohio Department of Medicaid (ODM)-designated providers to assist in working with Humana Healthy Horizons. You can find updates to this provider resource guide at **Humana.com/OHDocuments**.

Online self-service

A variety of provider resources is available at **Humana.com/Provider** (no registration required).

You can find Medicaid-specific materials, communications and resources at **Humana.com/HealthyOH** including those covering:

- Answers to frequently asked questions
- Applications to join our network
- Availity Essentials™
- Behavioral and physical health clinical coverage policies
- Behavioral health tool kit
- Claims and payments
- Clinical practice guidelines
- Communications and network notices
- Documents and resources
- External medical review

- Optimization of pregnancy outcomes
- Pharmacy
- Pharmacy clinical coverage guidelines
- Prior authorizations
- Provider network management
- Services for children
- Telehealth services
- Training requirements

Humana
Healthy Horizons ®
in Ohio

Humana Healthy Horizons in Ohio is a Medicaid Product of Humana Health Plan of Ohio, Inc.

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Contact information

Contact description	Contact	Hours of operation (all times Eastern)
Provider services Our interactive voice recognition line can help with multiple situations, including: • Member eligibility verification • Claim processing • Prior authorization status inquiries • Care management (acute and chronic conditions)	**877-856-5707**	Monday – Friday, 7 a.m. – 8 p.m.
Neonatal Intensive Care Unit (NICU) admissions	**855-391-8655**	Monday – Friday, 8:30 a.m. – 5 p.m.
Map of ODM territories with assigned representatives To request a call, contact the provider engagement representative assigned to your region.	**https://docushare-web.apps. external.pioneer.humana. com/Marketing/docushare-app?file=4572074** **OHMedicaidProviderRelations@ humana.com**	Monday – Friday, 7 a.m. – 5 p.m.
Medical and behavioral health care management • Refer members to care management programs • Submit questions or inquiries • Provide documentation	**OHMCDCareManagement@ humana.com** **OHMCDCareManagement_BH@ humana.com**	Email accounts monitored Monday – Friday, 8 a.m. – 5 p.m.
HumanaBeginnings® program referrals	**OHMCDMaternity@humana.com** Subject line: HumanaBeginnings referral	Email accounts monitored Monday – Friday, 8 a.m. – 5 p.m.
Social determinants of health (SDOH) Contact for members who need social support, including: • Housing support • Food insecurities support • Utility assistance • Other social needs/community support For more information on SDOH, please review our Ohio SDOH physician guide at **https://docushare-web.apps.external. pioneer.humana.com/Marketing/ docushare-app?file=5377164.**	**OHMCDSDOH@humana.com**	Email accounts monitored Monday – Friday, 8 a.m. – 5 p.m.

Contact description	Contact	Hours of operation (all times Eastern)
OhioRISE • Submit program referrals • Submit questions or inquiries • Submit documentation	**OHMCDOhioRise@humana.com**	Email accounts monitored Monday – Friday, 8 a.m. – 5 p.m.
Gainwell Technologies—single pharmacy benefit manager (SPBM) Customer Service Center	**833-491-0344**	Available 24/7
Fraud, waste and abuse reporting	**800-614-4126**	Available 24/7

Availity Essentials

Healthcare providers must submit all prior authorization requests and claim submissions through the Availity Essentials portal. Healthcare providers who want to work with Humana Healthy Horizons online will need to register to receive the OH|ID number for ODM's provider network management (PNM) system. Please go to **https://ohid.ohio.gov** to create an account or, if you would like more information, please visit the PNM and Centralized Credentialing website at **https://managedcare.medicaid.ohio.gov/home**.

Providers also need to register for Availity Essentials. This multipayer portal allows providers to interact securely with Humana Healthy Horizons and other participating payers without learning to use multiple systems or remembering different user IDs and passwords for each payer. Many tools available to Humana Healthy Horizons providers are accessible from Availity Essentials. To learn more, call Availity Essentials at **800-282-4548** or visit **www.availity.com**. Availity Essentials lets you:

• Check eligibility and benefits

• Submit claims and view claim status

• Submit and view authorizations

• View remittance advice (electronic remittance advice and electronic funds transfer enrollment should be submitted)

• View member summaries

• Confirm/remedy overpayment

• Confirm/remedy appeal

Prior authorization and referral procedures

Healthcare providers must submit all prior authorization requests, including physician-administered drug requests and associated attachments, through Availity Essentials via one of the following methods:

• Practice management system: Prior authorization submissions sent from a provider's practice management system

• Direct entry into Availity Essentials

For both of the above methods, select the following payer descriptions from the drop-down menu in Availity Essentials:

• Humana (medical)

• Humana behavioral health

For prior authorization submissions and Availity Essentials technical support, please call **800-282-4548**. Please review the Ohio Medicaid preauthorization list online at **Humana.com/PAL**.

Humana Healthy Horizons does not require authorizations for home health assessments.

Humana Healthy Horizons allows providers to submit authorization requests for unplanned and/or emergency inpatient admissions the next business day. The plan utilization review staff evaluates within the appropriate time frames for decision making.

• Humana Healthy Horizons requires prior authorization for admissions to inpatient psychiatric facilities, including Institutions for Mental Diseases.

• Humana Healthy Horizons members can obtain a second medical opinion at no cost to the member.

• Humana Healthy Horizons authorizes out-of-network care, based on medical necessity, when a network provider is not available to supply members with medically necessary covered services in a timely manner.

• Authorization requests must be submitted to Availity Essentials for members to receive out of network services.

• Additional value-added benefits are available to Humana Healthy Horizons members without prior authorization.

For more information please refer to the Humana Healthy Horizons in Ohio Provider Manual, available at **Humana.com/HealthyOH**.

Pharmacy program

Ohio Medicaid managed care entities use Ohio's SPBM, Gainwell Technologies. They use Utilization Management policies and a uniform Preferred Drug List developed by ODM.

More information is available at **https://spbm.medicaid.ohio.gov/**.

Medication Therapy Management

Humana Healthy Horizons offers a Medication Therapy Management (MTM) program that helps ensure patients achieve the best possible outcomes from their medications. The MTM program:

• Promotes collaboration between the pharmacist, patient and prescriber to optimize safe and effective medication use

• Optimizes therapeutic outcomes by focusing on safety, effectiveness, lower-cost alternatives and adherence

Prescribers with questions about the program may call the Outcomes MTM Patient Engagement team at **855-905-4689**, Monday – Friday, 8 a.m. – 7 p.m., Eastern time.

Coordinated Services Program

The Coordinated Services Program (CSP) aids Humana Healthy Horizons members who need help managing their use of prescription medications. It is intended to limit overuse of benefits and reduce unnecessary costs to Medicaid while providing an appropriate level of care for the member. Members who meet program criteria receive written notification. Members are allowed 30 days to choose a pharmacy and/or provider through which to receive services, or one is selected for them. Members are notified of their assigned pharmacy location, program information and right to a fair hearing regarding the plan's decision. The initial pharmacy assignment is in place for two years.

Excluded from enrollment in CSP are members who:

• Have a current diagnosis of cancer and receive chemotherapy or radiation treatment

• Reside in a long-term care facility

• Receive hospice services

• Are enrolled in both Medicaid and Medicare programs

If you have questions about CSP, please call Humana Healthy Horizons' CSP Services at **833-410-2496**, 8 a.m. – 5:30 p.m., Eastern time.

Claim submission process

The claim submission process is different for Humana Healthy Horizons than for other Humana lines of business. For all payable claims, submission must be made via electronic data interchange to ODM by visiting **https://medicaid.ohio.gov/resources-for-providers**.

Healthcare providers may also submit manual claims and associated attachments through Availity Essentials. Paper claim submissions are prohibited. Humana's payer ID is 61103 for fee-for-service claims.

Please note: Humana's traditional payer ID for fee-for-services claims (61101) cannot be used to submit Humana Healthy Horizons claims. Humana rejects all Ohio Medicaid claims submitted with its traditional payer ID. The following is a list of some of the commonly used claim clearinghouses:

• Availity Essentials: **www.availity.com**

• Change Healthcare®: **www.changehealthcare.com**

• SSI Group: **https://thessigroup.com**

• TriZetto®: **www.trizettoprovider.com**

Please note: Some clearinghouses and vendors charge a service fee. Contact the clearinghouse for more information.

Claim adjudication

• All claims are electronically accepted and will be processed appropriately by Humana.

• Humana Healthy Horizons notifies providers who submitted claims of claim status—paid, denied and all claims not in a final paid or denied adjudicated status—within 30 calendar days of receipt.

  – Such notification may be in the form of a claim payment/remittance advice produced on a routine monthly or more frequent basis.

- In accordance with 42 CFR 447.46, Humana Healthy Horizons:
  - Pays or denies 90% of all submitted clean claims within 21 calendar days of the date of receipt
  - Pays or denies 99% of submitted clean claims within 60 calendar days of the date of receipt
  - Pays or denies 100% of all claims within 90 calendar days of the date of receipt

Providers will receive a 30-calendar-day notice of all edits or system changes related to claims adjudication or payment processing.

Humana Healthy Horizons Medicaid provider numbers

The following are Humana's Medicaid provider numbers for use when submitting documents for wraparound payments.

Line of business:

- Medicaid—aged, blind and disabled
  - Humana's Medicaid ID number: 0461038
- Medicaid—covered families and children
  - Humana's Medicaid ID number: 0462285

Comprehensive primary care

Comprehensive primary care (CPC) is a patient-centered medical home program that comprehensively manages a patient's health needs, empowering practices to deliver the best care possible to Ohio Medicaid-eligible members. ODM instituted this member-centered program to improve health outcomes while improving cost effectiveness. The program also grants access to data and reports that deliver actionable, timely information for providers to make better decisions about outreach, care and referrals.

CPC practices may be eligible for two payment streams in addition to existing payment arrangements with ODM and the Medicaid managed care plans:

- Per-member-per-month payment, to support activities required by the CPC program.
- Shared savings payment, to reward practices for achieving total cost-of-care savings For more information about Ohio CPC and how to enroll, please visit **https://medicaid.ohio.gov/resources-for-providers/special-programs-and-initiatives/special-programs-and-initiatives**.

Behavioral health

Humana Healthy Horizons recognizes the significance of behavioral health needs to overall health and well-being and emphasizes a strengths-based approach, with fully integrated physical and behavioral health care. Humana Healthy Horizons' overall behavioral health system includes evaluation and treatment for mental health, substance use and developmental disabilities services. The following are eligible:

- Adults: All covered behavioral health services.
- Child members: All covered behavioral health services for child members not enrolled in the Ohio Resilience through Integrated Systems and Excellence (OhioRISE) plan. Behavioral health providers should follow the prior authorization process outlined in this document.

OhioRISE

OhioRISE is a specialized Medicaid managed care program for children and youth with complex behavioral health and multisystem needs. OhioRise members have access to comprehensive behavioral health services while remaining in their homes and communities.

Participating laboratory and radiology providers

Laboratory and radiology services are available at Humana Healthy Horizons-participating national and local laboratory providers, hospitals and freestanding radiology centers. Providers can use Humana Healthy Horizons' online find a doctor tool at **Humana.com/FindADoctor** to identify participating providers.

Find a doctor instructions:

1. Enter member's ZIP code and preferred mileage distance from the ZIP code.
2. Select a look-up method and choose coverage type Medicaid, then OH Medicaid.
3. Search by provider name or specialty type.
   a. Specialty types: Use clinical medical laboratories to locate reference labs and radiology clinics/centers for radiology service locations.

Member ID cards

Your Humana Healthy Horizons-covered patients received member ID cards issued by ODM. Please ask members to present their current ID card at the time of service.

Humana Healthy Horizons members

Humana Healthy Horizons.

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827

Member Name JaneHasVeryLongName Veryloooonglastname

Member ID Number 000000000000

Plan ID Number HXXXXXXXX

Primary Care Provider
Dr. John Doe
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

Pharmacy Benefit
gainwell
Rx Bin: 024251
Rx PCN: OHRXPROD
Phone: 833-491-0344

Use Member ID for Billing

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827

Information for Members
Directions for what to do in an emergency
Please present this card each time before you receive medical care except in an emergency. In case of emergency, call 911 or go to the closest emergency room.
Please visit us at: **Humana.com/HealthyOhio**

Information for Providers
Please verify member eligibility on Date of Service via the ODM provider portal before rendering services.
Payor ID: 61103
Please visit **Humana.com/HealthyOH** for detailed billing instructions or call 877-856-5707 for assistance. Providers may also call the ODM IHD at 800-686-1516 for assistance.

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Humana Healthy Horizons members enrolled in OhioRISE

Humana Healthy Horizons.

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827
OhioRISE Member Service | Phone: 833-711-0773

Member Name JaneHasVeryLongName Veryloooonglastname

Member ID Number 000000000000

Plan ID Number HXXXXXXXX

OhioRISE
♥aetna
Aetna Better Health of Ohio
Phone: 833-711-0773

Primary Care Provider
Dr. John Doe
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

Pharmacy Benefit
gainwell
Rx Bin: 024251
Rx PCN: OHRXPROD
Phone: 833-491-0344

Use Member ID for Billing

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827
OhioRISE Member Service | Phone: 833-711-0773

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Please visit **Humana.com/HealthyOH** for detailed billing instructions or call 877-856-5707 for assistance. Providers may also call the ODM IHD at 800-686-1516 for assistance.

OhioRISE

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Humana Healthy Horizons members enrolled in OhioRISE and the Coordinated Services Program

Humana Healthy Horizons.

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827
OhioRISE Member Service | Phone: 833-711-0773

Member Name
JaneHasVeryLongName
Verylooooonglastname

Member ID Number
000000000000

Plan ID Number
HXXXXXXXX

OhioRISE
♥aetna
Aetna Better Health of Ohio
Phone: 833-711-0773

Primary Care Provider
Dr. John Doe
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

Pharmacy Benefit
gainwell
Rx Bin: 024251
Rx PCN: OHRXPROD
Phone: 833-491-0344
CSP Enrolled
Use Member ID for Billing

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827
OhioRISE Member Service | Phone: 833-711-0773

Information for Members
Directions for what to do in an emergency
Please present this card each time before you receive medical care except in an emergency. In case of emergency, call 911 or go to the closest emergency room.
Please visit us at: **Humana.com/HealthyOhio**

Information for Providers
Please verify member eligibility on Date of Service via the ODM provider portal before rendering services.
Payor ID: 61103
Please visit **Humana.com/HealthyOH** for detailed billing instructions or call 877-856-5707 for assistance.
Providers may also call the ODM IHD at 800-686-1516 for assistance.
CSP Pharmacy Name: XXXXXXXXXX
CSP Pharmacy Phone Number: 000-000-0000

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OhioRISE
Ohio | Department of Medicaid

Humana Healthy Horizons members enrolled in the Coordinated Services Program

Humana Healthy Horizons.

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827

Member Name
JaneHasVeryLongName
Verylooooonglastname

Member ID Number
000000000000

Plan ID Number
HXXXXXXXX

Primary Care Provider
Dr. John Doe
Phone: 000-000-0000

Issuance Date: MM/DD/YYYY

Pharmacy Benefit
gainwell
Rx Bin: 024251
Rx PCN: OHRXPROD
Phone: 833-491-0344
CSP Enrolled
Use Member ID for Billing

SAMPLE

Member Services | Phone: 877-856-5702
24 Hour Emergency Services | Phone: 866-376-4827

Information for Members
Directions for what to do in an emergency
Please present this card each time before you receive medical care except in an emergency. In case of emergency, call 911 or go to the closest emergency room.
Please visit us at: **Humana.com/HealthyOhio**

Information for Providers
Please verify member eligibility on Date of Service via the ODM provider portal before rendering services.
Payor ID: 61103
Please visit **Humana.com/HealthyOH** for detailed billing instructions or call 877-856-5707 for assistance.
Providers may also call the ODM IHD at 800-686-1516 for assistance.
CSP Pharmacy Name: XXXXXXXXXX
CSP Pharmacy Phone Number: 000-000-0000

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Ohio | Department of Medicaid

SAMPLE

Front of Humana Healthy Horizons ID card

- Member ID number—The Ohio Medicaid member identification number, also known as the Ohio Medicaid Management Information System Identification (MMIS ID) number, begins with a number.

  - **Note:** Claims submitted to Humana Healthy Horizons and OhioRISE must include the member ID number.

- Plan ID number—The member's Humana Healthy Horizons plan ID number begins with an "H." Do not use the plan ID number when submitting claims to Humana Healthy Horizons.