HUMANA Claim Escalation Form

The Humana Provider Concierge Unit resolves provider service issues previously reviewed and closed by Customer Service or Provider Disputes not completed to the provider's satisfaction.

Use this form to email escalated service issues to the Humana Provider Concierge Unit at humanaproviderservices@humana.com.

Be sure to provide the reference number, in column J below, from your initial contact.

If secure email capabilities aren't available to you, ensure your email contains enough information to research the issue, while omitting the member's protected health information.

Provider Concierge Unit will acknowledge receipt of your issue, and will provide the new reference number.

Remember, you can check claim status, member eligibility and authorization requirements 24 hours a day at www.Availity.com (registration required).

For status of your submission you may contact Customer Service by calling the number listed on the member's identification card.

related to a claim's

Provider name:							Provider tax ID number:						
Contact person's name:								Contact phone number: Email:					
Provider to complete this section										Humana to complete this section			
Humana member ID number	Patient's name (Last, first)		Humana Claim number (required)	Date of service	Total charge	Procedure code(s) disputed	Explanation of dispute	Additional payment expected	Prior Reference/Case #	Additional amount paid	Amount overpaid	Check date	Reviewer's comments