

Durable medical equipment (DME) is medical equipment that can withstand repeated use, is primarily and customarily used to serve a medical purpose, is generally not useful in the absence of illness or injury, and is appropriate for use in the member's home. Medicare and Medicaid acute-care programs cover most DME that Humana Healthy Horizons® comprehensive plan members need. Items needed by Humana Healthy Horizons comprehensive plan members that are not covered by Medicare require preauthorization from the member's Humana Healthy Horizons comprehensive plan case manager.

Consumable medical supplies (CMS) assist members and caregivers in meeting members' needs. Items include incontinence and diabetic supplies not covered by Medicare. They do not include personal toiletries, over-the-counter medications or household items.

For DME and CMS, contact the care manager to have a paper authorization faxed to you. In reviewing the authorization, please follow the units and products approved by the clinical team. Each DME authorization will have a prescription.

Please don't deliver any products without authorization from the clinical team. If the product must be changed, contact the care manager immediately. Variance in the product may prevent correct reimbursement. In the event a single case agreement/letter of agreement (LOA) is provided, please wait until the authorization request is approved and the single case agreement/LOA is signed to bill for services according to the negotiated amount.

It is important to confirm member eligibility before every delivery. To validate, visit the Florida Medicaid portal, sign in with your credentials and save a copy of the eligibility details.

DME and CMS billing guidance

Fee schedule policy and procedure

Visit Rule 59G-4.002, Provider Reimbursement Schedules and Billing Codes | Florida Agency for Health Care Administration and navigate to the most appropriate promulgated fee schedule aligning to dates of service for billed DME services.



Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan, Inc. 825608FL0925 FLHMH9KEN 0825

Many DME items and services are limited to recipients younger than 21. To determine whether a service is available to all recipients or limited to recipients younger than 21, refer to the appropriate fee schedule, available at Rule 59G-4.002, Provider Reimbursement Schedules and Billing Codes | Florida Agency for Health Care Administration.

Modifiers

- Please use the correct modifiers when submitting claims.
- Ensure modifier combinations are valid and appropriate for the services rendered.
- Providers should bill the appropriate modifiers or modifier combination based on whether the claims are submitted for rental or purchase.

The list of modifiers below is not all-inclusive; please follow appropriate billing and coding guidelines for modifier usage.

Modifier	Definition	
BR	Beneficiary informed of the purchase and rental options and elected to rent the item	
KH	DME Prosthetics, Orthotics, and Supplies item, initial claim, purchase or first month rental	
KI	DME Prosthetics, Orthotics, and Supplies DMEPOS item, second- or third-month rental	
KJ	DME Prosthetics, Orthotics, and Supplies DMEPOS item, parenteral/enteral nutrition pump or capped rental, months 4 to 15	
KM	Replacement of facial prosthesis including new impression/moulage	
KN	Replacement of facial prosthesis using previous master model	
KR	Rental item—billing for partial month	
LL	Lease/rental	
NR	New when rented	
NU	New equipment	
RA	Replacement of a DME orthotic or prosthetic item	
RB	Replacement of a part of DME orthotic or prosthetic item furnished as part of a repair	
RR	DME rental	
UE	Used DME	

Frequency and units

- State regulations may limit frequency and units billed within a given time frame.
- Providers should consult the DME fee schedule for frequency and unit restrictions as indicated per each item.

Rental guidance

- DME may be rented, purchased or rented until it has been purchased.
- For rented DME, claim processing will be based on the terms of the rental agreement.
- Humana Healthy Horizons reimburses for rental equipment at the prorated daily amount of the monthly rate, per day, when the item is returned to the provider before the end of a 30-day period.

- Humana Healthy Horizons reimburses for up to the total of 10 monthly claims for rent-to-purchase items; the items then become the personal property of the recipient at the end of the lease.
- Humana Healthy Horizons reimburses for oxygen equipment delivered to a recipient's home up to 72 hours prior to the recipient's discharge from a hospital or skilled nursing facility.
- Humana Healthy Horizons reimburses only 1 form of oxygen (gaseous, liquid or concentrated) at a time.
- Humana Healthy Horizons reimburses for servicing recipient-owned oxygen equipment.

Important contact information

	Contact information
Long-term care (LTC) provider	Contact your local provider relations representative.
inquiries	Email: FLMedicaidPR@humana.com
	Phone: 888-998-7735 (TTY: 711), Monday – Friday,
	8 a.m. – 8 p.m., Eastern time
Member Services	Phone: 800-477-6931 (TTY: 711), Monday – Friday,
	8 a.m. – 5 p.m., Eastern time
Pharmacy	Phone: 800-555-2546, Monday – Friday, 8 a.m. – 6 p.m., Eastern time
Humana Healthy Horizons provider website	Managed Medical Assistance (MMA) Humana Healthy Horizons in Florida
Pharmacy website	Pharmacy resources Humana Healthy Horizons in Florida
LTC	
Case management	Phone: 888-998-7732 (TTY: 711), Monday – Friday,
	8 a.m. – 8 p.m., Eastern time
24-hour nurse advice line	Phone: 800-477-6931
Claims	
Availity Essentials™	Web: Availity Essentials
	Phone: 800-282-4548, Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Humana Healthy Horizons MMA	Humana Claims Office
	P.O. Box 14601
H	Lexington, KY 40512-4601
Humana Healthy Horizons LTC	Claims Department P.O. Box 14732
	Lexington, KY 40512-4732
Humana claims overpayment	Humana Claims Overpayment
	P.O. Box 931655
	Atlanta, GA 31193-1655

Contact information				
Other information				
Provider complaints	Mail: Humana Healthy Horizons Provider Correspondence P.O. Box 14601 Lexington, KY 40512-4601 Phone:			
	8 00-477-6931 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time			
Provider grievances and appeals	Humana Attn: Provider Reconsiderations P.O. Box 14546 Lexington, KY 40512-4546			

Clearinghouse information

Clearinghouse	Website	Phone		
Availity Essentials— preferred LTC vendor	Availity Essentials	800-282-4548		
Waystar®	Healthcare Revenue Cycle Management Solutions Waystar	844-692-9782		
TriZetto [®]	TriZetto Healthcare Administration Solutions Cognizant	800-556-2231		
The SSI Group	Healthcare Revenue Cycle Management Solutions SSI Group	800-881-2739		
Payer ID: 61101 MMA fee-for-service claims 61115 LTC fee-for-service claims				

Helpful Humana Healthy Horizons links

- Find a doctor: Find Care—Humana
- Provider homepage: Managed Medical Assistance (MMA) | Humana Healthy Horizons in Florida
- Member homepage: Florida Medicaid, Medicaid Insurance Plans from Humana
- Prior authorization list: Provider prior authorization and notification lists
- Expanded benefits: Medicaid Expanded Benefits in Florida—Humana

Provider compliance training and education

The Centers for Medicare & Medicaid Services and state Medicaid contracts mandate that all Humana Healthy Horizons contracted healthcare providers complete compliance program requirements each year. Please visit Education and training | Humana Healthy Horizons in Florida for more information.

Provider contracting and credentialing

Contracting opportunities:

• Email: LTCNetworkRequests@humana.com

Credentialing:

• Email: Credentialinginquiries@humana.com

Agency for Health Care Administration provider enrollment:

- Agency Provider Enrollment Policy
- Provider enrollment website
- Provider enrollment references and training
- Provider enrollment helpline: 800-289-7799, option 4

Nonemergency transportation contact information

Modivcare nonemergency medical transportation (NEMT)	Contact information
Modivcare reservation line	Phone: 866-779-0565, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Transportation covered	NEMT: • Ambulatory • Wheelchair • Stretcher van • Mass transit This does not include emergency ambulance services.
After-hours	Phone: 866-779-0565
Ride assistance	Florida Medicaid ride assistance (Where's My Ride?) Phone: 866-779-0565
Reservations	Reservations must be made at least 72 hours in advance and no more than 30 days prior to the appointment.
Billing	Phone: 800-930-9060, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Escalations	Phone: 800-477-6931, Monday – Friday, 8 a.m. – 8 p.m., Eastern time