Humana Healthy Horizons in Florida Long-Term Care

Home health provider quick guide

Humana Healthy Horizons® in Florida home health providers facilitate the delivery of medically necessary home health services. These services can be effectively and efficiently provided in the place of residence of a homebound member and can include:

- Adult companion care
- Attendant care
- Caregiver training
- Homemaker services
- Intermittent and skilled nursing
- Medication administration
- Medication management
- Nutritional assessment/risk reduction
- Personal care
- Respite care
- Therapy

As required by the 21st Century Cures Act, Medicaid home health claims must be submitted through HHAeXchange. Effective for dates of service on or after June 21, 2021, statewide Medicaid managed care (SMMC) health plans deny all claims for personal care and home health services not submitted through their electronic visit verification (EVV) vendors. The Agency for Health Care Administration (AHCA) requires a minimum 85% EVV submission rate to comply. For more information, please visit the following website:

Everything Homecare Agencies Need to Know About EVV

If the home health agency has difficulties implementing this due to connection issues, please use the offline mode. If you need additional assistance, please contact the provider engagement associate in your area.

Visit **HHAeXchange Knowledge Base Launch Pad I HHAeXchange** for detailed training resources.

For HHAeXchange issues or help, please go directly to the **HHAeXchange client support portal**, and utilize the ticketing system.

Humana
Healthy Horizons®
in Florida

1098107FL1026 FLHMH9NEN

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan, Inc.

If a single case agreement (SCA) or letter of agreement (LOA) is provided, please adjust your rate within HHAeXchange to submit your claims for the higher contracted rate amount. After the SCA or LOA expires, please ensure the rates are changed according to your contracted rates.

Call HHAeXchange at 855-400-4429, Monday – Friday, 7 a.m. – 8 p.m., Eastern time.

Participant direction option (PDO) is an alternative program available to individuals who are in the Medicaid long-term care (LTC) managed care program. This program allows participants who receive some in-home services significant flexibility in hiring and supervising in-home workers.

Visit **Long-Term Care Plans Participant Direction Option (PDO)**.

Home health billing guidance

Please follow the authorization schedule set by the care manager and member. If the schedule must be changed, contact the care manager immediately. Variance in the schedule may prevent correct reimbursement. If an active member appears to be inactive, contact the authorization department through the HHAeXchange portal using the managed care organization communication tab. If a member's demographic information appears inaccurate, please work with the member's care manager to update the information.

Services are in 15-minute increments; 1 hour will reflect as 4 units on the authorization request.

Please note there are services reimbursed by visits. All services should be billed on a daily date span (e.g., T1019 DOS Jan. 1, 2025, to Jan. 1, 2025, with the number of units for the day). A claim cannot have overlapping months or a different date span within the same payment line.

Reimbursement

- Participating providers will be reimbursed according to their contracted rate.
- **AHCA's reimbursement rules website** provides codes for informational purposes only and is subject to change. These codes are not an all-inclusive list and are not a guarantee of coverage or reimbursement.
- Additional billing guidance can be found on **AHCA's adopted rules website**.
- You can find procedure codes and the latest published fee schedules on **AHCA's reimbursement rules website**.

Important contact information

Department	Contact information
Provider Relations	Contact your local provider relations representative Email: **FLMedicaidPR@humana.com** Phone: 888-998-7735 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Member Services	Phone: 888-998-7732 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Pharmacy	Phone: 800-555-2546 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Humana Healthy Horizons provider website	**Welcome to Humana Healthy Horizons in Florida**
Pharmacy website	**Humana Healthy Horizons in Florida pharmacy resources**
Humana LTC	
Case management	Phone: 888-998-7732 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Claims	
Availity Essentials™	Web: **Availity Essentials** Phone: 800-282-4548, Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Humana Healthy Horizons Managed Medical Assistance	Humana Claims Office P.O. Box 14601 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
Provider complaints	Humana Healthy Horizons Provider Correspondence P.O. Box 14601 Lexington, KY 40512-4601 Phone: 800-477-6931, Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Provider Grievances and Appeals	Humana Attn: Provider Reconsiderations P.O. Box 14546 Lexington, KY 40521-4546

Clearinghouse information

Clearinghouse	Phone
Availity Essentials Preferred long-term care vendor	800-282-4548 Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Waystar®/ZirMed®	844-692-9782 Monday – Friday, 8 a.m. – 5 p.m., Eastern time
TriZetto®	800-556-2231 Monday – Friday, 8 a.m. – 5 p.m., Eastern time
The SSI Group	800-820-4774 Monday – Friday, 8 a.m. – 5 p.m., Eastern time

Use payer ID 61115 for LTC claims, 61101 for fee-for-service managed medical assistance (MMA) claims and 61102 for MMA encounter claims.

Helpful Humana Healthy Horizons links

- **Find care**
- **Humana Healthy Horizons in Florida provider homepage**
- **Humana Healthy Horizons in Florida member homepage**
- **Provider prior authorization and notification lists**
- **Humana Healthy Horizons in Florida expanded benefits**

Provider compliance training and education

The Centers for Medicare & Medicaid Services (CMS) and state Medicaid contracts mandate that all Humana-contracted healthcare providers complete compliance program requirements each year. Please visit the **Humana Healthy Horizons in Florida provider education and training website** for more information.

Clearinghouse information

Contracting opportunities:

- Quickbase application:

  Providers - Request to Join
- Credentialing:
- Email: **CredentialingInquiries@humana.com**

AHCA provider enrollment:

- View the **AHCA Provider Enrollment Policy**.
- Visit the **AHCA Provider Enrollment website**.
- Take advantage of **AHCA's Provider Enrollment References and Training**.
- If you have questions, call the Provider Enrollment helpline at 800-289-7799, and choose option 4.

Non-emergency transportation contact information

Modivcare non-emergency 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 Does not include emergency ambulance services
After-hours call line	Florida Medicaid ride assistance (Where's My Ride?) Phone: 866-779-0565, 24 hours a day, 7 days a week
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: 888-998-7732, Monday – Friday, 8 a.m. – 8 p.m., Eastern time