

Humana Gold Plus® Integrated Medicare-Medicaid Alignment Initiative (MMAI) Long-Term Services and Supports Provider Resource Guide

Online self-service

A variety of long-term services and supports (LTSS) Medicaid-specific provider materials, communications and quality resources are available on the **Humana.com/ILLTSS** (no registration required). Resources include:

- Claim-payment inquiry resolution guide
- Provider billing guide

The general **Humana.com/HealthyIL** hosts more resources, including:

- Provider manual
- Provider notices and updates
- Training materials

Humana LTSS home- and community-based services

Humana is here to support the patient's needs and daily living activities. A Humana care coordinator will manage these services. Waiver services patients may qualify for the following:

- Adaptive equipment rental and purchase
- Adult day service and transportation
- Agency and individual home health aide/certified nursing assistant (CNA)
- Day habilitation
- Home health intermittent nursing registered nurse (RN), licensed practical nurse (LPN) (agency provider)
- Home health intermittent nursing RN, LPN (individual provider)

Humana®

Humana Gold Plus Integrated (Medicare-Medicaid plan) is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to members.

- Home modification (environmental accessibility adaptations)
- Home-delivered meals
- Homemaker
- Nursing (multi-customer)
- Nursing facility
- Nursing/LPN (agency and individual)
- Nursing/RN (agency and individual)
- Occupational therapy
- Personal Emergency Response Services (PERS)/installation and monthly service
- Personal assistant
- Physical therapy
- Prevocational services
- Respite/adult day service
- Respite/adult day service transportation
- Respite/CAN for medically fragile/technology dependent (MFTD) patient
- Respite/homemaker
- Respite/personal assistant
- Respite/RN and LPN
- Speech therapy (home and hospital)
- Supported employment
- Support-living facility

Availity Essentials

Healthcare providers can register for Availity Essentials™ at no cost.

This multipayer portal allows providers to interact securely with Humana and other participating payers without learning multiple systems or remembering different user IDs and passwords for each payer. Many Humana-specific tools are accessible within **Availity Essentials**.

To learn more, call Availity Essentials at 800-282-4548 or visit **Availity.com**. With Availity Essentials, providers can:

- Review eligibility and benefits
- Submit referrals and authorizations
- Check claim status
- Confirm/make claim submissions
- Receive remittance advice
- View medical history summaries
- Confirm/remedy overpayment
- Get electronic remittance advice (ERA) and set up electronic funds transfer (EFT)

Get paid faster and have your Humana claim payments automatically deposited with EFT and ERA. Visit [Humana.com/EPaymentInfo](https://www.humana.com/EPaymentInfo) for more information.

For help or more information about these self-service tools, call Provider Services at **800-787-3311**. Training opportunities and webinar schedules are available on [Humana.com/ProviderSelfService](https://www.humana.com/ProviderSelfService).

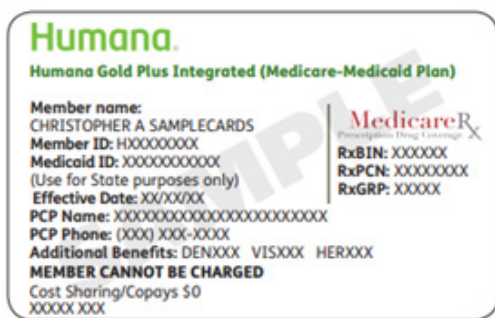
Frequent contact information

Important services	Contact information	Operation hours	Website and/or additional details
Availity Essentials	800-282-4548 (800-AVAILITY) Press 0 for live assistance	Monday through Friday, 6 a.m. to 5:30 p.m., Central time	Availity Essentials
Credentialing	877-782-5565 (option 2, then option 1)		IMPACT – State of Illinois
Humana Medicare-Medicaid Dual Provider call center	800-787-3311	Monday through Friday, 7 a.m. to 7 p.m., Central time	
Humana Provider Relations email	ILMCDProvRelations@humana.com		
Humana Special Investigations Unit (SIU)	800-614-4126	Monday through Friday, 7 a.m. to 4 p.m., Central time	Fraud, waste and abuse reporting
Illinois Department of Healthcare and Family Services	844-453-7283 (844-ILFRAUD)		Medicaid/welfare fraud
Member Grievances and Appeals	Humana Health Plans P.O. Box 14546 Lexington, KY 40512-4546		
MMAI Enrollment Broker	877-912-8880 TTY: 866-565-8576		HealthChoice Illinois
Preauthorization assistance for LTSS	HUMLTSSTransitions@humana.com		PERS must be submitted to care coordinators
Provider services	800-787-3311	Monday through Friday, 7 a.m. to 7 p.m., Central time	
Provider complaints	Humana Attn: Provider Complaints P.O. Box 14601 Lexington, KY 40521-4601		

Important services	Contact information	Operation hours	Website and/or additional details
Provider correspondence/claims	Humana Attn: IL LTSS Provider Correspondence P.O. Box 14601 Lexington, KY 40521-4601		
Provider Payment Integrity (PPI) customer service	800-438-7885	Monday through Friday, 7 a.m. to 7 p.m., Central time	Confirm or remedy overpayment; inquire or review issues related to financial recoveries

Member identification card

Please ask members to present their Humana identification card at the time of service.



Please note: These sample identification cards comply with state guidelines and can change without notice.

Only those services deemed medically necessary will be covered. **All LTSS services require an authorization.** It is important that the provider emails the LTSS authorization request to **HUMLTSSTransitions@humana.com**. Each member is assigned a care coordinator who facilitates authorizations. PERS requests must be submitted to care coordinators by sending an email to **HUMLTSSTransitions@humana.com**. If you would like additional information regarding care coordination services, please call Humana MMAI Customer Care at **800-787-3311**. **Do not submit LTSS authorizations via Availity Essentials.**

Humana basic billing guidelines

LTSS homemaker claims must be submitted with proper date sequence and include charges for only a single month.

- LTSS claims must be submitted with proper daily date of service sequence for the per-day unit allowance.
 - Homemaker services are allowed in 15-minute increments up to the allowable time per date of service. Four 15-minute increments equals 1 hour. Refer to the **IAMHP Billing Guide** for details.

- Facility room and board claims require a revenue code.
 - Temporary leaves of absence or bed reserves at the facility also require revenue codes.
 - Leave of absence days require the use of the Revenue Code 74-Occurrence Span.
- Patient credit/responsibility, which is updated by Department of Health Services (DHS) caseworkers, is based on the amount listed in the DHS Patient Credit File website.
- Room and board is the only covered LTSS hospice service when the member resides in a skilled nursing facility (SNF). All other hospice care should be billed through Medicare.
 - Hospice room and board claims are paid at the service facility daily rate. These claims should include the servicing facility and National Provider Identifier (NPI) for timely processing.

Frequent claim denial reasons

- Incorrect or missing member ID or demographics
- Patient has other insurance
- Missing or incorrect state-approved Medicaid Identification Number
 - LTSS providers must bill with their state-approved Medicaid Identification Number
- Authorization on file does not include all days and units billed
- Authorization on file exceeds number of units billed
- Missing or incorrect service codes or service dates

LTSS MMAI claims

Submitting claims is easier when you have what you need. Here is some helpful information for filing LTSS MMAI claims:

Humana payer IDs

Claims: **61101**

Encounters: **61102**

File electronic claims directly and at no cost via Availity Essentials.

Mail paper claims to:

Humana Claims Office
P.O. Box 14601
Lexington, KY 40512-4601

Mail paper encounters to:

Humana Claims Office
P.O. Box 14605
Lexington, KY 40512-4605

The following are some of the many available clearinghouses offering services to healthcare providers. Some clearinghouses and vendors charge a service fee. Contact the clearinghouse directly for more information.

Important addresses

Clearinghouse
Availity Essentials Humana's preferred vendor
Change Healthcare
TriZetto®
SSI Group

Please refer to the **LTSS Provider Billing Guide** for additional details.

Annual compliance training

Humana supports providers in their efforts to care for patients with Medicaid coverage by offering training materials to help them meet state and federal compliance requirements. A variety of materials are available online, including:

- **Humana LTSS Illinois Medicaid provider orientation and training**
- **Health, safety and welfare training**
- **Cultural competency training**
- **Ethics and standards of conduct**
- General compliance and **fraud, waste and abuse training**

Trainings are available at **Humana.com/ProviderCompliance** and via Availity Essentials.

Completion of training must be documented with the **Medicaid Partner Training Attestation** form.

More information is available at **Humana.com/ProviderCompliance**. Please see the Training Requirements included in the **provider orientation and training**.