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For current and previous editions of Kentucky New Horizon, visit [Humana.com/NewHorizon](https://www.humana.com/NewHorizon).

Humana Healthy Horizons® in Kentucky

Humana Healthy Horizons in Kentucky is a Medicaid product of Humana Health Plan Inc.

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Humana Healthy Horizons: Medicaid coverage that gives enrollees much more than the basics

Humana Healthy Horizons® in Kentucky makes it easier to get the basic benefits enrollees need in their daily lives. But Humana Healthy Horizons goes further than basic benefits. We offer extra services so enrollees can stay on top of their health and live life to the fullest. These include:

- Cellphone services
- Child care
- Criminal expungement services
- Digital apps
- Doula services
- Free back-to-school haircut
- GEDWorks, a GED education program
- Home-delivered fresh fruits and vegetables
- HumanaBeginnings™, a program to help moms before and after giving birth
- Post-hospital discharge meals
- Remote monitoring devices
- Sports physicals for younger enrollees
- Tobacco cessation health coaching
- Weight management health coaching
- Workforce development

Staying healthy goes beyond the doctor's office. Enrollees can access programs that enhance their daily lives, support for basic needs and tools to help them build a brighter future. Enrollees can learn more about these plan-included benefits on [Humana's website](#).



Healthy activities can earn enrollees rewards

Go365 for Humana Healthy Horizons® is a wellness program that offers enrollees the opportunity to earn rewards for taking healthy actions.

To earn rewards, enrollees must:

- Download the Go365 for Humana Healthy Horizons app from the Apple App Store® or Google Play® on a mobile device.*
- Create an account to access and engage in the program.
 - Enrollees younger than 18 must have a parent or guardian register on their behalf to participate and engage with the program. The person completing the registration process on behalf of a minor must have the minor's Medicaid enrollee ID number.
 - Enrollees 18 and older can register to create an account. You must have your Medicaid enrollee ID.

With a **MyHumana** account, enrollees can use the same login information to access Go365 for Humana Healthy Horizons after downloading the app.

Enrollees can call Go365 at **888-225-4669 (TTY: 711)** or visit **Humana.com/KentuckyGo365** to learn more about the program.

* All product names, logos, brands and trademarks are property of their respective owners, and any use does not imply endorsement.



Federal government announces end of COVID-19 public health emergency: How to help your Humana Healthy Horizons-covered patients with eligibility

During the COVID-19 public health emergency, the annual eligibility renewal process was placed on hold so enrollees would not lose their Medicaid or Kentucky Children's Health Insurance Program coverage. The federal government has indicated the public health emergency, declared under Section 319 of the Public Health Service Act, will end May 11, 2023. When it does, eligibility renewal requirements will resume, and enrollees will receive letters indicating it is time for them to renew. Accurate enrollee contact information is critical for enrollees to receive their renewal packets.

Please direct your patients with coverage through Kentucky Medicaid to make sure their mailing address, phone number, email address and other contact details are updated within **kynect**.

Enrollees with questions about renewing their Medicaid coverage and benefits can call **kynect** at **855-4kynect (459-6328)**.

Once enrollees begin receiving redetermination letters, they can complete the requirements in one of four ways:

- By accessing the online self-service portal at **kynect**
- By mailing a completed renewal form to the Department for Community Based Services (DCBS):
DCBS Family Support
P.O. Box 2104
Frankfort, KY 40602
- By calling **855-306-8959**
- By visiting their local DCBS office

Compass enhancement

To ensure healthcare provider partners are aware of their patients' upcoming redetermination dates, Humana Healthy Horizons enhanced the Compass platform to include enrollee eligibility redetermination dates. These dates are enrollee-specific; enrollees could be required to take action by that date to prevent interruption to their eligibility. The feature became accessible within Compass October 2022.

As Humana Healthy Horizons' proprietary population health platform, Compass is a valuable tool for providers. Through our robust data-sharing capabilities, providers gain insight into their patient panel to help manage the health of their patients and prioritize outreach and care.

Compass compiles utilization, financial and clinical data that can be filtered so providers can identify patients or groups that require additional support. For more information, email KYPE_MCD_Quality@humana.com.



Visits from Provider Relations staff help Humana Healthy Horizons comply with care contract

Humana Healthy Horizons Provider Relations conducts in-person visits to primary care physician (PCP) offices to validate contractual compliance with the Kentucky Department for Medicaid Services (Kentucky DMS) managed care contract.

These visits include review and discussion of:

- Access and availability standards
- Americans with Disabilities Act (example: wheelchair access)
- Directory status
- Grievances and appeals
- Group and patient roster changes
- Health Insurance Portability and Accountability Act policies and procedures
- Kentucky Health Information Exchange
- Medical record policies and procedures
- Network notices and communications
- Patient rights and responsibilities
- Provider resources materials

These visits are also an opportunity for us to offer providers education and assistance. We encourage our network partners to reach out with questions that may arise.

With the federal COVID-19 public health emergency (PHE) set to end May 11, Kentucky Medicaid providers need to be in compliance with revalidation requirements. Once the PHE ends, many flexibilities implemented to relieve healthcare provider and beneficiary burden will end. Providers can get more details on Medicaid PHE unwinding on [Kentucky's PHE webpage](#).

Your Provider Relations representative will contact your office to schedule an in-person visit. For a listing of Provider Relations representatives, visit our [website](#).

If you have questions, please email Provider Relations at KYMCDPR@humana.com.



Specific billing codes receive updates for Kentucky Medicaid-covered patients

Humana Healthy Horizons wants to remind providers of billing edit updates from Kentucky DMS.

Edits include the following:

- Provider Type 54: Only procedure codes of J2326, 99401 or J3399 are accepted. With the exception of Vaccine Counseling, only National Provider Identifiers (NPIs) of 1639375066, 1043309735, 1417915653 or 1346208949 are allowed to bill for this state provider type.
- Centers for Medicare & Medicaid Services (CMS) Place of Service 99: Only procedure codes of H0038 and H2015 are acceptable for Place of Service 99.
- Enrollees with Medicare and Medicaid: when providing coordination of benefits data related to Medicare payments on your Medicaid claim, Kentucky DMS requires that the Other Insurance indicator under loop 2320 segment SBR09 must be either MA (Part A benefits), MB (Part B benefits) or 16 (Medicare Advantage plans).
- Modifier CR (catastrophe/disaster related): Applicable only to procedure 99404, enrollees must be 20 years old or younger, allowed once per day per enrollee and the billing provider type must be 01, 02, 22, 36, 39, 40, 45, 64, 78, 90 or 95.
- Modifier 50 (bilateral procedure): Modifier 50 reflects a bilateral service is rendered and therefore the unit should not be greater than 1.
- Non-emergent Transportation: As noted from the Kentucky DMS-approved “Billing Instructions for Transportation Services,” issued on Dec. 29, 2003, transport code A0427 is expected to be billed in lieu of A0426, A0433 and A0434. Transport code T2005 is expected to be billed in lieu of A0150 or A0428 under the Kentucky Medicaid program.



Antidepressant HEDIS measure improves medication adherence

Use of appropriate medications helps improve treatment for depression and reduce suicide risk. Treatment for depression consists of an acute phase to induce remission and a continuation phase to maintain remission. The Antidepressant Medication Management HEDIS® measure intends to improve the medication adherence rate for enrollees 18 years and older diagnosed with major depression who started on an antidepressant medication.

Two rates are reported through claims-based data:

1. Acute phase: Enrollees must remain on the antidepressant medication for at least 84 days.
2. Continuation phase: Enrollees must remain on an antidepressant medication for at least 180 days.

The following examples are methods that can improve compliance rate:

- Educate enrollees about benefits of antidepressants, how to take them, expected side effects, typical treatment duration and length of time before they may take effect.
- Emphasize the importance of medication compliance for effectiveness.
- Advise enrollees to continue medication even when they start feeling better.
- Support medication compliance by stressing timely 90-day prescription refills.
- Monitor treatment response with a standardized tool.
- Encourage follow-up visits and check on enrollees through follow-up calls.
- Schedule appointments to prescribe and/or refill antidepressant medications.
- Use correct coding and submit claims and encounter data in a timely manner.



Ask enrollees about their support systems and daily challenges — questions that can improve quality of care and emotional health

Humana Healthy Horizons values our partnership with behavioral healthcare providers. This partnership includes conducting surveys of enrollees utilizing behavioral health services.

Enrollees provided valuable feedback about their behavioral healthcare in areas such as outcomes, function, access and social connectedness. Behavioral health providers have a unique opportunity to help enrollees increase their sense of belonging, receive support during a crisis and feel better about their relationships.

These are some steps and strategies providers can use to help enrollees:

- Conduct routine and ongoing assessment of daily functioning and support systems.
- Evaluate social determinants of health needs such as housing and transportation, and work with enrollees to identify needed resources or refer to case management.
- Ensure collaboration of care with primary care physicians and external providers, schools and family.
- Engage enrollees in developing a crisis plan with identified support systems and provide a 24-hour crisis resource such as the Behavioral Health Crisis Line, **833-801-7355 (TTY: 711)**.

Including these practices as part of an enrollee's behavioral healthcare ensures enrollees have the right support to manage their challenges and care that meets both physical and emotional needs.



Address potential recordkeeping shortcomings with this list of 10 most frequent missing elements

Humana Healthy Horizons reminds providers that detailed medical recordkeeping helps your patients receive the best care possible. We assembled a list of the most frequent missing elements found during our regular medical records review process:

- Client identification on every page of the record
- Intake record missing referral source and address, PCP and address, and name of informant
- Documentation of assessment and service notes signed within 48 hours of date of service
- Plan of care includes measurable goals and reviewed every 6 months
- Documentation of coordination of care with PCP, includes a release of information or refusal and a summary report sent initially and every 3 months
- Targeted Case Management (TCM) initial assessment includes collateral information
- TCM documents: 4 face-to-face service contacts (5 or more for complex) each month; 2 or more with client
- TCM care plans are updated every 3 months face-to-face with client
- Notes by a behavioral health practitioner under supervision, co-signed and dated within 30 days
- Services in a group do not exceed 8 individuals for peer support and 12 for group therapy

If you have questions regarding this list, please email the Kentucky Medicaid Quality Improvement team at KYQIMedicaid@humana.com.



HEDIS goal helps enrollees with schizophrenia reach 80% medication adherence

Enrollees who are diagnosed with schizophrenia often have difficulty with medication adherence, increasing the risk of relapse. Schizophrenia requires ongoing treatment and maintenance, and the use of antipsychotic medications as prescribed can reduce the risk of relapse or hospitalization.

The Adherence to Antipsychotic Medications for Individuals with Schizophrenia HEDIS measure intends to improve antipsychotic medication adherence in enrollees age 18 and older with schizophrenia or schizoaffective disorder who were dispensed an antipsychotic medication¹.

To meet compliance for the measure, enrollees must remain on their antipsychotic medication for 80% of their treatment period, as evidenced by claims-based data.

Here are some ways to encourage compliance:

- Use correct coding and submit claims and encounter data in a timely manner.
- Educate patients about benefits of antipsychotics, how to take them, expected side effects, typical treatment duration and length of time before they may take effect.
- Emphasize the importance of medication compliance for effectiveness.
- Inform patients to continue medication even when they start feeling better.
- Consider use of long-acting injectable medications to promote compliance.
- Encourage follow-up visits to address questions or concerns and conduct follow-up calls.
- Schedule appointments to prescribe and/or refill antipsychotic medications.



Let us know if your office contact information changed

At times, we attempt to contact provider offices regarding updates, processes and education only to find that a provider's office has closed, a phone number is inaccurate or a doctor within the group is retired or has left the practice.

If you have recent changes to your group's information, including change of address, phone number, fax number or provider changes within your group, please email those changes to:

ProviderDevelopmentKYWV@humana.com. Behavioral health providers should email any contact information updates to **KYBHMedicaid@humana.com**.



Resources to make your claims process with Humana easier

“Making It Easier for Physicians and Other Healthcare Providers” is a series of educational presentations about Humana claims payment policies and processes.

Download the **Tools and Resources for Physicians and Other Healthcare Providers Resource Guide** to learn about Humana's inventory of useful tools and resources, which can simplify your claims-related and other interactions with Humana.

Visit **Humana.com/MakingItEasier** today, or **Availity.com**, in the Humana Payer Space under the Resources tab.

Look for the **STAY CONNECTED** widget on the Humana website and subscribe to be notified when content is added.

Humana Healthy Horizons in Kentucky provider website and resources

Our Humana Healthy Horizons provider website, [Humana.com/HealthyKY](https://www.humana.com/HealthyKY), has materials and resources to help you achieve optimal results:

- Provider Manual
- Regular network notices
- Telemedicine information
- Provider Resource Guide
- Provider training materials
- Prior authorization information

We encourage you to visit the website often, as we regularly update its content.

Humana’s provider compliance training

Healthcare providers serving Humana Medicaid plans in Kentucky must complete the following training modules:

- Humana Medicaid provider orientation
- Health, safety and welfare training
- Cultural competency
- Compliance and fraud, waste and abuse training

To start your training:

1. Go to [Availity.com](https://www.availity.com).
2. Sign in and select “Payer Spaces,” then “Humana.”
3. Under the Resources tab, select “Humana Compliance Events” to begin.

For more information, please visit [Humana.com/ProviderCompliance](https://www.humana.com/ProviderCompliance) or [Humana.com/KYTraining](https://www.humana.com/KYTraining).

References:

1. HEDIS Measurement Year 2023, Volume 1
2. “Title 907—Cabinet for Health and Family Services—Department for Medicaid Services,” Kentucky Administrative Regulations, last accessed March 7, 2023, <https://apps.legislature.ky.gov/law/kar/titles/907>

Humana Healthy Horizons® in Kentucky