



Humana Healthy Horizons in Florida Long-Term Care Provider Resource Guide

Welcome to Humana Healthy Horizons® in Florida, a Medicaid managed care program focused on helping members achieve their best health. This provider resource guide includes tools and information to assist network and Florida-designated long-term care (LTC) providers in working with Humana Healthy Horizons. You can find updates to this provider resource guide on the Humana Healthy Horizons in Florida provider website.

The Humana Healthy Horizons LTC plan

The LTC plan is designed for all eligible individuals ages 18 and older who meet a nursing home level of care and Medicaid financial requirements as determined by the state. The LTC plan provides eligible individuals with access to care in a nursing home or a less restrictive environment in the community.

The goal of this program is to reduce the number of individuals residing in nursing homes and increase care of individuals in less restrictive environments while reducing costs for the state.

The Humana Healthy Horizons LTC plan works directly with the state of Florida to provide members with community and/or facility care, coordinating members' primary care through their primary insurance. Humana Healthy Horizons is a statewide contractor for the LTC plan, allowing members to move to any county within the state.

Eligibility for enrollment in the LTC plan is based on standards established by the Department of Elder Affairs (DOEA) and the Comprehensive Assessment and Review for Long-Term Care Services (CARES) program. Financial eligibility is based on standards established by the Florida Department of Children and Families (DCF).

Members must:

- Be at least 18 years old
- Reside in Florida
- Be at risk of nursing home placement
 - The member must meet specific clinical/functional criteria and be able to be served safely with home- and community-based services (HCBS), as determined by CARES.
- Be financially eligible, as determined by DCF
 - Financial eligibility requirements for the program are the same as for the Medicaid institutional care plan.

Humana
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For specific information regarding eligibility criteria, please contact your provider relations representative or contract specialist. If you need help locating your local contract specialist, please call LTC Provider Services at 888-998-7735, Monday – Friday, 8 a.m. – 5 p.m., Eastern time.

The Humana Healthy Horizons Comprehensive plan

The Humana Healthy Horizons Comprehensive plan covers both medical and LTC services and includes members who are enrolled in both:

- Florida’s Managed Medical Assistance (MMA) plan, including HIV/AIDS specialty plans or serious mental illness (SMI) specialty plans
- Florida’s LTC plan

Members enrolled in a Medicare Dual Eligible Special Needs Plan (D-SNP) are eligible for LTC services from the Humana Healthy Horizons LTC plan. Members must be enrolled in both MMA and LTC.

Humana Healthy Horizons’ goal for this program is to keep members in their homes and provide HCBS that can delay or prevent long-term placement in a nursing facility. If members require an environment with more supervision or socialization, Humana Healthy Horizons will facilitate services in an assisted living facility or an adult family home. Humana Healthy Horizons helps members transition to a nursing home level of care when it is no longer safe to remain in a community setting. Humana Healthy Horizons facilitates care that meets the individual needs of each member.

Frequent contact information

General phone numbers

Contact name	Contact information	Hours of operation
Availity Essentials™	Phone: 800-282-4548	Hours of operation Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Behavioral health inquiries (Call these numbers for all behavioral health inquiries, except behavior analysis [BA] services inquiries.)	Region A Address: Access Behavioral Health Attn: Claims Department 1221 W. Lakeview Ave. Pensacola, FL 32501 Phone: 866-477-6725	Monday – Friday, 9 a.m. – 6 p.m., Eastern time
	Regions B – I Address: Carelon Behavioral Health P.O. Box 1870 Hicksville, NY 11802-1870 Phone: 844-265-7590 Email: FLBA@humana.com	Monday – Friday, 8:30 a.m. – 6 p.m., Eastern time

Contact name	Contact information	Hours of operation
Clinical intake (Use these numbers for discharge planning [during regular business hours] and for authorization requests.)	Phone: 866-856-8974 Fax (outpatient): 813-321-7220 Fax (inpatient): 813-321-7218	Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Clinical intake team (This is Humana’s general prior authorization line.)	Phone: 800-523-0023	Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Discharge planning (Call or fax these numbers for discharge planning after hours or over the weekend.)	Phone: 877-329-0413 Fax: 833-996-2187	Monday – Friday, before 8 a.m. and after 5 p.m., Eastern time, and on weekends
HHaExchange® (Sign in to your portal to ask questions or receive support related to authorization for home health providers.)	Phone: 855-400-4429	Monday – Friday, 7 a.m. – 8 p.m., Eastern time
Humana Clinical Pharmacy Review (HCPR)	Phone: 800-555-2546 Fax: 877-486-2621 Forms are available on our Provider authorization and notification lists	Monday – Friday, 8 a.m. – 8 p.m., Eastern time
LTC case management	Phone: 888-998-7735	Monday – Friday, 8 a.m. – 5 p.m., Eastern time
LTC contracting	Email: LTCNetworkRequests@humana.com	Monday – Friday, 8 a.m. – 5 p.m., Eastern time
LTC member services	Phone: 888-998-7732	Monday – Friday, 8 a.m. – 5 p.m., Eastern time
LTC provider services	Phone: 888-998-7735	Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Medicare and Medicaid health services phone line (For information on HumanaBeginnings® or questions pertaining to case management and inpatient utilization management.)	Phone: 800-322-2758, ext. 1394119 for HumanaBeginnings	Monday – Friday, 8:30 a.m. – 5 p.m., Eastern time
Provider relations (To notify us of demographic changes, please email provider relations or contact your provider relations representative.)	Email: FLMedicaidPR@humana.com	

Fraud, waste and abuse reporting

Contact name	Contact information	Hours of operation
Humana's Special Investigations Unit (SIU)	Phone: 800-614-4126 Email: SIUReferrals@humana.com	24 hours a day, 7 days a week
Humana's Ethics Help Line	Phone: 877-5-THE-KEY (584-3539) Email: ethics@humana.com	24 hours a day, 7 days a week
Florida attorney general's office	Phone: 866-966-7226	Monday – Friday, 8 a.m. – 5 p.m., Eastern time

Online Self-Service

A variety of healthcare provider resources are available on the [public provider website](#), no registration required. The [Humana Healthy Horizons provider website](#) has a variety of resources to help you help your patients insured by Humana Healthy Horizons-covered patients understand their benefits and achieve their health and wellness goals. These resources include:

- Humana Healthy Horizons provider handbook
- Information on the Managed Medical Assistance Physician Incentive Program (MPIP)
- Information on telemedicine
- Case management education materials and forms
- Quality resources
- Medicaid provider updates – routinely updated
- Training modules and other important educational materials

We encourage you to visit the [Humana Healthy Horizons provider website](#) frequently for updates.

Humana's Making It Easier series

Humana's [Making It Easier series](#) is a collection of narrated video presentations about Humana's claim payment policies and processes. These brief presentations address a variety of topics and include downloadable tip sheets and guides. Providers can access Humana's Making It Easier series by visiting the [Making It Easier website](#) or through the Humana Learning Center on [Availity Essentials](#).

Annual compliance training

Humana Healthy Horizons offers training materials to support providers' efforts to care for patients with Medicaid coverage and to help meet state and federal compliance requirements. The Centers for Medicare & Medicaid Services (CMS) and state Medicaid contract mandates all Humana-contracted healthcare providers complete compliance programs annually. Healthcare providers must complete annual compliance training requirements by December 31 of each year.

Required training includes:

- Humana Healthy Horizons provider orientation
- Health, safety and welfare training

- Cultural competency training
- Compliance and fraud, waste and abuse training

Training is available through Availity Essentials.

1. Sign in to Availity Essentials and select Payer Spaces > Humana > Humana Learning Center.
2. Select the category Compliance trainings.
3. Search for the current year training by state, making sure to complete training for any state in which you are contracted.

Availity Essentials

Healthcare providers who want to work with Humana Healthy Horizons online can register for **Availity Essentials** at no cost. This multipayer portal allows providers to securely interact with Humana Healthy Horizons and other participating payers without learning multiple systems or remembering different user IDs and passwords for each payer. Many tools specific to Humana Healthy Horizons are accessible within Availity Essentials.

To find out more, call Availity Essentials at 800-282-4548, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. With Availity Essentials, you can:

- Check eligibility and benefits
- Submit claims and check claim status
- Make prior authorization (PA) requests and review status
- View remittance advice
- Request electronic funds transfer (EFT)/electronic remittance advice (ERA)
- Manage overpayments
- Submit disputes and appeals
- View member summaries

EFT and ERA

Get paid faster and have your Humana Healthy Horizons claim payments deposited automatically with EFT and ERA. Visit Humana's **electronic claims payment website** for more information about EFT and ERA.

For help with these self-service tools or for more information, call Member/Provider Services at 800-477-6931, Monday – Friday, 8 a.m. – 8 p.m., Eastern time. For training opportunities, please visit the Humana Learning Center on Availity Essentials. Sign in to **Availity Essentials** and select **Payer Spaces > Humana > Humana Learning Center** to get started.

For help with these self-service tools or for more information, call LTC Provider Services at 888-998-7735, Monday – Friday, 8 a.m. – 5 p.m., Eastern time.

Humana's clearinghouse information —electronic data interchange

Availity Essentials is Humana Healthy Horizons' preferred clearinghouse and charges no service fees when submitting electronic claims to Humana Healthy Horizons.

Please note that some clearinghouses and vendors charge a service fee. Contact the clearinghouse for more information.

Clearinghouse	Information
Availity Essentials	800-282-4548, Monday – Friday, 8 a.m. – 8 p.m., Eastern time
Change Healthcare® (Optum)	800-792-5256, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
McKesson	855-625-4677, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
TriZetto®	800-556-2231, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
SSI Group	800-820-4774, Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Waystar	877-494-7633, Monday – Friday, 8 a.m. – 5 p.m., Eastern time

When filing an electronic claim, you should use payer ID 61115 for LTC and comprehensive claims.

Claim submission guidelines and tips

- Participating providers must submit claims within 6 months of the date of service to Humana Healthy Horizons.
 - Nonparticipating providers have 12 months from the date of service to submit a claim.
- Participating and nonparticipating providers must submit corrected claims within 12 months of the original process date of the initial claim.
- Please confirm the units match the number of billed days.
- For assisted living facility claims, make sure to bill on a separate line if you have a bed hold, and attach the occupancy report to your electronic claim submission via [Availity Essentials](#) or paper claim submission.
- Align data properly in the UB-04 or CMS-1500 fields. Please reference our [Claim Form Provider Resource Guide](#) for more information.
- Avoid missing or invalid National Provider Identifier (NPI)/ZIP code/taxonomy.
- Do not submit encounters with \$0 value.
- If the NPI is not linked to the Medicaid ID, the claim will be denied upon claim submission.
- If you have a missed service, you must notify the member’s Humana Healthy Horizons care coach immediately to ensure the member does not have any access-to-care issues.
 - The care coach can enact the member’s contingency plan.
 - You should also notify Humana Healthy Horizons via [HHAeXchange](#).
 - You do not need to submit a claim for missed service.

Claim submission

Humana Healthy Horizons can receive electronic claims. Acceptable formats include X12 5010 837 institutional, professional and dental formats. Humana Healthy Horizons also allows for direct data entry through [Availity Essentials](#). When filing an electronic claim, you should use payer ID 61115 for LTC claims and comprehensive claims, 61101 for fee-for-service (FFS) MMA claims, and 61102 for MMA encounter claims.

Paper claims should be submitted to the address listed on the back of the member's ID card or to the following addresses:

LTC/Comprehensive claims	Behavioral health claims	
Humana LTC c/o Humana Inc. P.O. Box 14732 Lexington, KY 40512-4732	Region A Access Behavioral Health Attn: Claims Department 1221 W. Lakeview Ave. Pensacola, FL 32501	Regions B through I Carelon Behavioral Health P.O. Box 1870 Hicksville, NY 11802-1870

For questions about enrolling in electronic claim submission, please call [Availity Essentials](#) at 800-282-4548, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

Please review our [Coverage and claims](#) webpage for specific information regarding:

- Claims and encounter submission
- Claims payment inquiries
- Claims payment integrity and disputes
- Claims edits
- PA and referrals
- Electronic payment options

Authorization of LTC services by care coaches

LTC coverage is limited to those services authorized in writing by the member's care coach and in accordance with the Florida Agency for Health Care Administration (AHCA) [Adopted Rules – Service Specific Policies website](#). If a member requires services, a care coach will issue authorization for medically necessary covered services to a participating provider. Humana Healthy Horizons care coaches will assess the member's needs prior to ordering services. Only services deemed medically necessary will be covered.

Procedures for authorization of LTC services

Upon determination a member requires services from a facility or company, the case management team will contact the provider to inquire if the services can be provided and provide authorization. Authorization is valid for the period of time specified or otherwise indicated on the authorization request. If dates of services are not established, the provider's staff is responsible for following up with Humana Healthy Horizons with the date services will begin.

- If a member must stop services for a short period of time (e.g., due to hospitalization), the case management team will fax updated authorization to the provider.
- If a member no longer requires services from the provider, the case management team will fax authorization for termination of services to the provider.
- If a member requires an increase or decrease in services, the case management team will fax updated authorization to the provider.

If you have questions or concerns about a member, please use the [HHAeXchange](#) portal or contact the member's Humana Healthy Horizons care coach.

When providing covered services to Medicaid recipients, state and federal laws require healthcare providers to adhere to applicable provisions in the [Adopted Rules - Service Specific Policies website](#), provider Medicaid registration requirements and all laws pertaining to the provision of such services.

Please note: All services except skilled nursing, hospice and assisted living facilities require prior authorization. While facilities do not require prior authorization, ensure the care coach is informed to meet time sensitive contractual requirements. Each LTC member will be assigned a care coach to facilitate assessment and authorization.

Referrals to Humana Healthy Horizons LTC/Comprehensive plan

If members believe they may qualify to participate in the program, they or the members' representatives must contact the local Aging and Disability Resource Center (ADRC) office to apply for the Humana Healthy Horizons Comprehensive plan. If you assist the member with the application process, you must obtain and document the member's consent using the [Authorization for the Use and Disclosure of Protected Health Information and Managed Care Plan Selection form](#). The member or the provider can contact Humana Healthy Horizons for program information at any time by calling LTC Provider Services at 888-998-7735, Monday – Friday, 8 a.m. – 5 p.m., Eastern time. To locate an ADRC office in your area, please visit the [DOEA website](#).

LTC and Comprehensive member ID card samples

These sample ID cards comply with state guidelines and are subject to change without notice.

Humana Healthy Horizons. in Florida

A Medicaid product of Humana Medical Plan, Inc.

Comprehensive Plan

MEMBER NAME

Member ID: HXXXXXXXXX

Medicaid ID#: XXXXXXXX Group #: XXXXXXXX
Date of Birth: XX/XX/XX RxBIN: 610649
Effective Date: XX/XX/XX RxPCN: 03190000

PCP Name: XXXXXXXXX
PCP Phone: (XXX) XXX-XXXX
Primary Care Address: XXXXXXXXXXXX

Member &

Par/Non-Par Provider Services: 888-998-7732 (TTY: 711)
Member Behavioral Health Inquiries: 888-778-4651
Pharmacist Rx Inquiries: 844-918-0110
Provider Prior Authorization: 800-523-0023
Provider Long-Term Care Inquiries: 888-998-7735
Dental Benefit Inquiries: 877-711-3662

Please visit us at Humana.com/HealthyFlorida

For online provider services, go to Avaality.com

Please mail all claims to:

Managed Medical Assistance	Long-term care
Humana Medical	Humana Long-term care
P.O. Box 14601	P.O. Box 14732
Lexington, KY 40512-4601	Lexington, KY 40512-4732

Humana Healthy Horizons. in Florida

Un producto de Medicaid de Humana Medical Plan, Inc.

Plan Integral

NOMBRE DEL AFILIADO

Número de Identificación del Afiliado: HXXXXXXXXX

N.º de Identificación de Medicaid: XXXXXXXX N.º de Grupo: XXXXXXXX
Fecha de Nacimiento: XX/XX/XX RxBIN: 610649
Fecha de Vigencia: XX/XX/XX RxPCN: 03190000

Nombre del PCP: XXXXXXXXX
Teléfono del PCP: (XXX) XXX-XXXX
Dirección de Cuidado Primario: XXXXXXXXXXXX

Servicios para Afiliados y Servicios de Proveedores

Participantes y No Participantes: 888-998-7732 (TTY: 711)
Consultas sobre Salud del Comportamiento del Afiliado: 888-778-4651
Preguntas sobre Recetas para el Farmacéutico: 844-918-0110
Autorización Previa del Proveedor: 800-523-0023
Consultas sobre Cuidado a Largo Plazo de Proveedores: 888-998-7735
Consultas sobre Beneficios Dentales: 877-711-3662

Visítenos en es-www.Humana.com/HealthyFlorida

Para servicios para proveedores en línea, visite Avaality.com

Envíe todas las reclamaciones por correo postal a:

Managed Medical Assistance	Long-term care
Humana Medical	Humana Long-term care
P.O. Box 14601	P.O. Box 14732
Lexington, KY 40512-4601	Lexington, KY 40512-4732

Humana Healthy Horizons[®] in Florida

A Medicaid product of Humana Medical Plan, Inc.

Long-term care plan

MEMBER NAME

Member ID: HXXXXXXXXX

Medicaid ID: XXXXXXXXXX
Group #: XXXXXXX

Member Long-term care inquiries: 888-998-7732
Provider Long-term care inquiries: 888-998-7735

Please visit us at Humana.com/HealthyFlorida
For online provider services, go to Availity.com

For participating and non-participating providers send claims to:

Humana Long-term care
P.O. Box 14732
Lexington, KY 40512-4732

Humana Healthy Horizons[®] in Florida

Un producto de Medicaid de Humana Medical Plan, Inc.

Plan de Cuidado a largo plazo

NOMBRE DEL AFILIADO

Identificación del afiliado: HXXXXXXXXX

Id. de Medicaid: XXXXXXXX
N.º de Grupo: XXXXXXX

Consultas sobre Cuidado a largo plazo de afiliados: 888-998-7732
Consultas sobre Cuidado a largo plazo de proveedores: 888-998-7735

Visítenos en es-www.humana.com/HealthyFlorida

Para servicios para proveedores en línea, visite Availity.com

Para proveedores participantes y no participantes enviar reclamaciones a:

Humana Long-term care
P.O. Box 14732
Lexington, KY 40512-4732