



Medicaid Pharmacy Orientation and Annual Provider Training

Humana Healthy Horizons® in Indiana
and Indiana PathWays for Aging – 2026



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01 | Welcome

Humana Inc., headquartered in Louisville, Kentucky, is committed to helping people live healthier and happier lives. Through our Humana insurance services and our CenterWell® healthcare services, we strive to make it easier for the millions of people we serve to achieve their best health by delivering the care and service they need, when they need it. These efforts are leading to a better quality of life for people with Medicare or Medicaid, families, individuals, military service personnel, and communities at large.

As part of our commitment to supporting older adults in Indiana, Humana participates in the Indiana PathWays for Aging program, a coordinated initiative designed to provide integrated care and support services for Hoosiers aged 60 and over who are eligible for Medicaid. This program helps ensure that members have access to comprehensive healthcare, long-term services and community-based resources tailored to their unique needs.

We appreciate your role in delivering quality pharmacy services to our Medicaid members. This training will assist your pharmacy staff in processing prescription claims for Humana plans and pertains exclusively to Humana Medicaid members enrolled in a Humana health plan, including those participating in Indiana PathWays for Aging.

02 | Medicaid plan basics

Purpose of Medicaid plans

- Medicaid is a program run by the federal government and state governments that helps people with limited income pay for medical costs.
- Medicaid plans may have different names in different states, and coverage can vary by state.
- By contracting with various types of managed care organizations, states' objectives are to:
 - ❖ Improve the member's experience in accessing and receiving person-centered care
 - ❖ Improve the quality of healthcare and long-term services
 - ❖ Improve care coordination and access to enhanced services
 - ❖ Improve the performance quality of providers and suppliers of services
 - ❖ Reduce costs and avoid unnecessary procedures
 - ❖ Promote independence in the community



Medicaid is the payer of last resort. Medicaid may not pay for a Medicare Part D-covered medication for Medicare-eligible individuals.

03 | Medicaid state-specific information

Indiana – Humana Healthy Horizons in Indiana and Indiana PathWays for Aging

- Indiana PathWays for Aging is a Medicaid managed care program for individuals 60 years old and older who receive Medicaid (or Medicaid and Medicare) benefits. These individuals are eligible for Medicaid based on age, blindness or disability. They can also be patients in a nursing facility and those who are receiving long-term services and supports in a home or a community-based setting.
- Humana Healthy Horizons in Indiana uses criteria from the Indiana Health Coverage Programs (IHCP) in determining formulary, prior authorization, step therapy, quantity limits and age limits.
- Download the [Humana Healthy Horizons in Indiana pharmacy manual](#).
- To access the Statewide Uniform Preferred Drug List (PDL), visit the [IHCP pharmacy benefit manager \(PBM\) provider website](#).
- IHCP pharmacy policy: The Pharmacy Policy Unit oversees pharmaceutical coverage and reimbursement policy, clinical criteria, and monitoring of pharmaceutical utilization. For additional information, visit the [IHCP PBM provider website](#).

No copayments

- Medicaid members have no copays at network pharmacies.

34-day supply

- Medications are limited to a 34-day supply for nonmaintenance medications.

04 | Credentialing and contracting

Humana pharmacy credentialing

Humana requires all network pharmacies to be credentialed during the initial contracting process and to be recredentialed at least every 3 years. The recredentiaing request is sent to the pharmacy by fax and requires the pharmacy to return a recredentiaing application, which includes:

- Pharmacy's state licensure information
- Pharmacy's U.S. Drug Enforcement Administration licensure information
- Signed and dated attestation stating the pharmacy is free of sanctions imposed by federal, state and local authorities
- Copy of current professional liability insurance coverage that meets or exceeds a minimum requirement of \$1 million in aggregate
- Pharmacy's National Council for Prescription Drug Programs (NCPDP) number
- Active PathWays provider ID

Pharmacies that do not meet Humana's required standards, which include having an active state PathWays ID and not being listed on the applicable state exclusion list or on the federal exclusion lists, will be removed from Humana's pharmacy network.

04 | Credentialing and contracting

Contracting process

Visit [Humana's pharmacy resources](#) website and:

1. Select **Pharmacy manuals and forms**.
2. Scroll down and select **Network request forms** under **Manuals and forms**.
3. Choose **Pharmacy Contract Request Form**.
4. Complete the online form and print and submit the document using the instructions on the form.

To check the status of your credentialing or contract, please direct inquiries to Humana Pharmacy Networks at PharmacyContracting@humana.com or by fax at 877-650-2334.

04 | Credentialing and contracting

Contracting process – required information

- Pharmacy NCPDP number and pharmacy National Provider Identifier (NPI)
- Pharmacy doing business as name and legal name
- Pharmacy physical address, phone number and fax number
- Pharmacy contracting contact name and pharmacy owner
- Pharmacy mailing address (if different from physical address)
- Tax Identification Number, PathWays ID and email address
- Type of contract (e.g., retail, long-term care/assisted living, hospice, 340B) and organizational structure form

05 | Complaints

Pharmacy complaint system

Humana corporate management provides and promotes numerous strategies for addressing complaints and/or disputes from pharmacies based on issue type:

SS&C Health system issues

- All pharmacies contracted with Humana are encouraged to call the SS&C Health Help Desk at 855-816-6461, 24 hours a day, 7 days a week, for questions or complaints related to a system issue or claims transaction.

Pharmacy initiative inquiries

- Humana's dedicated pharmacy telephone support unit can be reached by calling 888-204-8349, Monday – Friday, 8 a.m. – 5 p.m., Eastern time to help with pharmacy inquiries and complaints related to specific corporate pharmacy management initiatives.

05 | Complaints

Pharmacy complaint system (continued)

Pricing dispute process

Network pharmacies have the right to submit a request to appeal, investigate or dispute the maximum allowable cost (MAC) reimbursement amount to Humana within 60 calendar days of the initial claim. The pharmacy may submit its request to appeal, investigate or dispute MAC pricing in writing to Humana by fax at 855-381-1332, by email at PharmacyPricingReview@humana.com or through the Pharmacist Portal using the Pharmacy Pricing Review Request. The pharmacy may call Humana at 888-204-8349 to speak to a representative regarding its request.

Humana will respond to the network pharmacy's request within 5 business days of receipt by Humana. The pharmacy is responsible for resubmitting the claim and for collecting and/or refunding any copayment amount.

06 | Prior authorization

For information about prior authorization, visit Humana's [prior authorization for pharmacy drugs](#) website.

- Providers with requests related to medication prior authorization, step therapy requirements, quantity limits and medication exceptions can submit them to Humana Clinical Pharmacy Review (HCPR) in the following ways:
 - Obtain forms at Humana's [prior authorization for pharmacy drugs](#) website and fax them to the number located on the form.
 - Submit requests electronically by visiting Humana's [CoverMyMeds® website](#).
 - Submit requests by fax to 877-486-2621.
 - Call HCPR at 800-555-CLIN (2546), Monday – Friday, 8 a.m. – 8 p.m., Eastern time.
- For prescription drugs delivered/administered in a provider's office, clinic, outpatient setting or home setting:
 - Complete the appropriate fax form at Humana's [prior authorization for professionally administered drugs](#) website and fax it to Humana at the number below.
 - Call 866-461-7273, Monday – Friday, 8 a.m. – 6 p.m., Eastern time.
 - Submit requests by fax to Humana's Medication Intake Team (MIT) at 888-447-3430.

07 | Claims and audits

Submitting pharmacy claims

All participating pharmacies must comply with NCPDP transaction standards for pharmacy drug claims, coordination of benefits and related pharmacy services. Please submit claims using the following BIN and PCN:

Plan	BIN	PCN
Humana Healthy Horizons in Indiana (Medicaid)	610649	03191506

Submitting paper claims

Send paper claims to the following address for processing:

Humana Claims
P.O. Box 14359
Lexington, KY 40512-4359

Pharmacies may call 800-865-8715, 24 hours a day, 7 days a week, with questions and concerns regarding claims.

07 | Claims and audits

Submitting CII claims

The Centers for Medicare & Medicaid Services (CMS) ruling CMS-0055-F mandates that a valid Quantity Prescribed (NCPDP field 460-ET) is submitted on all federally designated Controlled Substance Schedule II (CII) drug claims. This impacts pharmacy claim data submissions, processor adjudication edits to validate the Quantity Prescribed and payer sheet updates to include the Quantity Prescribed field.

If the field (Quantity Prescribed 460-ET) is not populated for a CII drug, you will receive NCPDP reject code ET. Enter a valid quantity prescribed and resubmit.

Download the [CII claim bulletin](#) for additional information.

07 | Claims and audits

Pharmacy audit program

The Humana pharmacy audit program:

- Helps ensure the validity and accuracy of pharmacy claims for its clients, including CMS and state agencies overseeing a program for Medicaid-eligible beneficiaries
- Helps ensure compliance with the provider agreement between Humana and its network pharmacies
- Helps ensure compliance with federal and state laws/regulations and prescription drug-specific requirements
- Educates network pharmacies regarding proper submission and documentation of pharmacy claims

Claim-specific audit objectives include, but are not limited to, correction of the following errors:

- Dispensing unauthorized, early or excessive refills or dispensing an incorrect prescription drug
- Billing the wrong number or billing an incorrect provider
- Using an NCPDP/NPI number inappropriately
- Submitting invalid pharmacy service type or invalid patient residence code
- Calculating the days' supply incorrectly or using a dispense-as-written code incorrectly
- Overbilling quantities or not retaining/providing the hard copy of prescriptions or a signature log/delivery manifest
- Paying claims to the incorrect benefit

08 | Clinical management programs

Humana's health and wellness programs guide members throughout their healthcare journey while encouraging them to take an active role in their health.

For an overview of Humana's clinical management programs, visit Humana's [health and wellness resources for providers](#) website.

Utilization management

Certain prescriptions must undergo a criteria-based approval process prior to a coverage decision. Humana's Pharmacy and Therapeutics Committee reviews medications based on safety, efficacy and clinical benefit and may make additions or deletions to the list of prescription drugs requiring prior authorization. For information on prior authorization, visit Humana's [prior authorization for pharmacy drugs](#) website.

08 | Clinical management programs

Right Choices Program

The Right Choices Program helps members manage their use of prescription medications to prevent overuse of benefits and reduce unnecessary costs to Medicaid while providing an appropriate level of care for the member.

If you or the member have questions, please contact Humana in 1 of the following ways:

- Call 833-410-2496, Monday – Friday, 8 a.m. – 5:30 p.m., Eastern time. After-hours, please leave a voicemail with the member name, PathWays ID number, case number, contact phone number and a detailed description of your request.
- Fax number: 502-996-8184
- Email: CPORM@humana.com

09 | Online resources

Pharmacy provider website – public

Visit Humana's [pharmacy manuals and forms website](#) to find:

- Humana payer sheets
- Humana Pharmacy Solutions Audit and Claim Review Guide
- Pharmacy provider manuals
- Limited Income Newly Eligible Transition documents
- Compliance education and training requirements
- Medicaid training resources
- Tools and resources (e.g., coverage determinations, Humana PDLs, RxMentor)

09 | Online resources

Pharmacist Portal – secure

The Pharmacist Portal (registration required) is a free resource available to any Humana-contracted pharmacy where pharmacists can:

- Search for MAC pricing
 - Send a Pharmacy Pricing Review Request
 - Check member eligibility and prior authorization status and search for member claims
 - Send email inquiries directly from the portal to Humana
 - Access pharmacy news and bulletins
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- For access, visit Humana’s [website](#), select the **Sign in** button and follow the onscreen instructions under “Don’t have an account?” to create your account.

 - For registration help:
 - Send an email to PharmacyContracting@humana.com (include the pharmacy name, NPI, pharmacy contact name and contact phone number)

10 | Contact information

Pharmacy Help Desk	For refill-too-soon overrides and prior authorization status, call 855-816-6461, 24 hours a day, 7 days a week, and follow the prompts.
HCPR For medication supplied by a pharmacy and billed through the pharmacy benefit: medication prior authorization, step therapy, quantity limits and medication exceptions. Humana Drug Lists: Visit the Humana Drug Lists for providers website .	To submit prior authorization requests: <ul style="list-style-type: none">• Obtain forms at Humana’s prior authorization for professionally administered drugs website or submit your request electronically by visiting Humana’s CoverMyMeds website.• Submit request by fax to 877-486-2621.• Call HCPR at 800-555-CLIN (2546), Monday – Friday, 8 a.m. – 8 p.m., Eastern time.
Humana Customer Care	To obtain general Medicaid plan information, call 866-274-5888 (TTY: 711), Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

10 | Contact information

<p>CenterWell Pharmacy®</p> <p>Mail-delivery pharmacy for maintenance medications and other durable medical equipment</p>	<p>Phone number: 800-379-0092 Monday – Friday, 8 a.m. – 11 p.m., and Saturday, 8 a.m. – 6:30 p.m., Eastern time Fax number: 800-379-7617 Website: CenterWell Pharmacy</p>
<p>CenterWell Specialty Pharmacy®</p> <p>Mail-delivery pharmacy for specialty medications</p>	<p>Phone number: 800-486-2668 (TTY: 711) Monday – Friday, 8 a.m. – 11 p.m., and Saturday, 8 a.m. – 6:30 p.m., Eastern time Fax number: 877-405-7940 Website: CenterWell Specialty Pharmacy</p>

10 | Contact information

<p>Humana medication intake team</p> <p>For prior authorization of medication supplied and administered in a provider’s office and billed as a medical claim (Medicare Part B).</p>	<p>Precertification process:</p> <ul style="list-style-type: none">• Obtain forms at Humana’s prior authorization for professionally administered drugs website.• Submit request by fax to 888-447-3430.• View preauthorization and notification lists at Humana's provider prior authorization notification lists website. <p>Questions: Phone number: 866-461-7273, Monday – Friday, 8 a.m. – 6 p.m., Eastern time</p>
<p>Humana Pharmacy Solutions Network Contracting</p>	<p>Pharmacy contract requests Email: PharmacyContractRequest@humana.com Phone number: 888-204-8349, Monday – Friday, 8 a.m. – 5 p.m., Eastern time Fax number: 866-449-5380</p>
<p>Humana pharmacist website (public)</p>	<p>Visit Humana’s pharmacist website to access payer sheets, pharmacy news bulletins, the Humana Pharmacy Solutions Audit and Claim Review Guide, and many other resources.</p>

10| Contact information

Pharmacist Portal website assistance	Email: Pharmacycontracting@humana.com
Humana claims address	The address is located on the patient's Humana PathWays ID card.
Pharmacy appeals	Medicare and Medicaid: Humana Grievances and Appeals P.O. Box 14163 Lexington, KY 40512-4163 To file a Part D redetermination: Visit the Humana prescription drug exceptions and appeals website. Fax number: 800-949-2961
Humana Ethics Help Line	877-5-THE-KEY (584-3539)

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