



Humana.

Medicaid Pharmacy Orientation and Annual Provider Training

2026

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01 | Welcome

Humana Inc., headquartered in Louisville, Kentucky, is committed to helping people live healthier and happy 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.

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.

02 | Medicaid plan basics

Purpose of Medicaid plans – Florida, Kentucky, Ohio, Oklahoma, South Carolina and Virginia

- 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

Florida – Humana Healthy Horizons in Florida

- Humana Healthy Horizons® in Florida uses criteria from the Florida Agency for Health Care Administration (AHCA) in determining formulary, prior authorization, step therapy, quantity limits and age limits.
- Medicaid providers in Florida must meet all requirements set forth in the Hernandez Settlement Agreement. If you are unfamiliar with the agreement and its requirements, or if you need further information, please visit the [AHCA Ombudsman Program website](#).
- For more information, download the [Humana Healthy Horizons® in Florida pharmacy manual](#).
- To access the Medicaid Preferred Drug List (PDL) for Florida, please visit the [Medicaid PDL for Florida website](#).
- AHCA Pharmacy Policy: The Pharmacy Policy Unit oversees pharmaceutical coverage and reimbursement policy, clinical criteria, and monitoring of pharmaceutical utilization. For additional information, visit the [AHCA Pharmacy Policy website](#).

03 | Medicaid state-specific information

Florida pharmacy benefit

Psychotropic informed consent

- Pursuant to statute F.S. 409.912(13), informed consent must accompany prescriptions for psychotropic medications when prescribed for children younger than 13 years old.
- [Download the Informed Consent for Psychotherapeutic Medication consent form.](#)

Opioids

- Humana Pharmacy Solutions® enforces point-of-sale opioid dispensing limits based on F.S. 456.44(5)(a) prescription supply limits.
 - Schedule II short-acting opioids are limited to a 3-day supply. If the patient has an acute pain exception, then the limit is 7 days. Only 2 fills are allowed in a 30-day period.
 - Schedule III, IV and V short-acting opioids are limited to a 14-day supply or less.
 - Nonacute pain (e.g., cancer, sickle cell disease, chronic and nonmalignant pain) is limited to a 30-day supply.

03 | Medicaid state-specific information

Florida pharmacy benefit (continued)

Hemophilia

- AHCA contracts with CVS Caremark® to provide statewide care management and pharmacy benefits management for eligible Medicaid beneficiaries with hemophilia or von Willebrand disease.
- To obtain prescription hemophilia drugs, please call the Medicaid Pharmacy Support Call Center in Florida at 800-603-1714, Monday – Friday, 7:30 a.m. – 8 p.m., Eastern time.

No copayments

- Medicaid members have no copays at network pharmacies.

34-day supply

- Medications are limited to a 34-day supply. Select maintenance medications may receive a 100-day supply.

OTC benefit

- A \$50-per-household over-the-counter (OTC) benefit allowance is available through CenterWell Pharmacy® each month.

03 | Medicaid state-specific information

Oklahoma – Humana Healthy Horizons in Oklahoma

- Humana Healthy Horizons® in Oklahoma uses criteria from the Oklahoma Health Care Authority (OHCA) in determining formulary, prior authorization, step therapy, quantity limits and age limits.
- Download the [Humana Healthy Horizons® in Oklahoma pharmacy manual](#).
- To access the PDL, visit the [Humana Drug Lists for providers website](#).
- OHCA pharmacy policy: The Pharmacy Policy Unit oversees pharmaceutical coverage and reimbursement policy, clinical criteria, and monitoring of pharmaceutical utilization. For additional information, visit the [OHCA Pharmacy website](#).

Copayments

- Medicaid members 21 years old and older have a \$4 copay per prescription/refill for both brand-name and generic medications at network pharmacies.
- As a value-added benefit, the 6-prescriptions-per-month limit is waived for Medicaid members 21 years old and older.

34-day supply

- Medications are limited to a 34-day supply for nonmaintenance medications. Select maintenance medications may receive a 90-day supply.

03 | Medicaid state-specific information

Oklahoma – Humana Healthy Horizons in Oklahoma

OTC benefit

- A \$30-per-household OTC benefit allowance is available through CenterWell Pharmacy mail-order benefit per quarter.
- Unused amounts do not roll over to the next quarter.
- Members must reside in a home and/or community-based setting.

03 | Medicaid state-specific information

South Carolina – Humana Healthy Horizons in South Carolina

- Download the [Humana Healthy Horizons® in South Carolina pharmacy manual](#).
- To access the Comprehensive Drug List (CDL), visit the [Humana Healthy Horizons in South Carolina Provider Documents & Resources website](#).
- South Carolina Department of Health and Human Services has a state-directed PDL in addition to medications already covered by Humana. The combination of these lists make up Humana's CDL for Medicaid in South Carolina. State criteria can be located on the agency website at [South Carolina Pharmacy Services | Physician/Prescriber | Documents](#). Humana may implement a medical necessity review for any prescription drug on the CDL.

Opioids

- Humana Pharmacy Solutions enforces point-of-sale opioid dispensing limits based on Centers for Disease Control and Prevention (CDC) recommendations on prescription supply limits.
 - For the treatment of acute or postoperative pain, providers must prescribe opioids at the lowest effective dose and for a quantity no greater than necessary for the expected duration of pain. Additionally, prescriptions must not exceed a 5-day supply or 90 morphine milligram equivalents per day.
 - Nonacute pain (e.g., cancer, sickle cell disease, chronic and nonmalignant pain) is limited to a 30-day supply.

03 | Medicaid state-specific information

South Carolina – Humana Healthy Horizons in South Carolina

30-day supply

- Medications are limited to a 30-day supply. Select maintenance medications may receive a 90-day supply.

OTC benefit

- A \$65 per-member OTC benefit allowance is available through CenterWell Pharmacy per quarter.

No copayments

- Medicaid members have no copays at network pharmacies.

03 | Medicaid state-specific information

Virginia – Humana Healthy Horizons in Virginia

- To access the Humana Healthy Horizons® in Virginia pharmacy manual, visit [Humana's pharmacy manuals and forms website](#).
- To access the PDL, download the [Virginia PDL](#).
- To access Pharmacy Clinical Policies: The Pharmacy and Therapeutics Committee oversees pharmaceutical coverage and reimbursement policy, clinical criteria, and monitoring of pharmaceutical utilization. For additional information, visit Humana's [Medical and Pharmacy Coverage Policies](#) website.

Opioids

- Humana Pharmacy Solutions enforces point-of-sale opioid dispensing limits based on CDC recommendations on prescription supply limits.
- Buprenorphine-containing drugs, naltrexone and methadone must be covered when enrolled in the medication-assisted treatment program.
 - The preferred medication for treatment of opioid use disorder is Suboxone® films and buprenorphine/naloxone sublingual tablets. These must be covered by all in-network and out-of-network providers.

03 | Medicaid state-specific information

Virginia – Humana Healthy Horizons in Virginia

Copayments

- Medicaid members have a \$0 copay for prescriptions for both brand-name and generic medications listed on the PDL at network pharmacies.

34-day supply

- Medications are limited to a 34-day supply. Select medications may receive a 90-day supply if they are included in the [Virginia Department of Medical Assistance Services 90-day medication maintenance list](#). Contraceptives must be covered up to a 12-month supply for both Medicaid and the Children's Health Insurance Program.

OTC benefit

- A \$65-per-household OTC benefit allowance is available to spend on OTC health and wellness items per quarter, such as:
 - Feminine products
 - First aid equipment that does not require prescriptions
- Unused amounts do not roll over to the next quarter.
- Members must reside in a home and/or community-based setting.

03 | Medicaid state-specific information

Kentucky – Humana Healthy Horizons in Kentucky

- The PBM for Humana Healthy Horizons® in Kentucky is MedImpact. Please visit the [MedImpact portal](#).
- MedImpact processes all pharmacy claims and provides pharmacy-related services with input from the Kentucky Department for Medicaid Services. These services include formulary administration, prior authorization, step therapy criteria development (including quantity and age limits) and postpayment auditing/monitoring.
- Pharmacies may not deny any service provided in the Medicaid programs based on the member's failure or inability to pay any applicable copayment if he or she is at or below 100% federal poverty level, according to federal regulations (42 U.S.C. §447.52).

Additional resources

- To access the MedImpact PDL, visit the [MedImpact portal](#).
- To access Pharmacy Clinical Policies, visit the [Medicaid Provider Portal](#).

03 | Medicaid state-specific information

Ohio – Humana Healthy Horizons in Ohio

Humana Healthy Horizons® in Ohio is not required to cover pharmacy services for members other than the limited pharmacy services required by the Ohio Department of Medicaid (ODM). Humana is responsible for:

- Medication Therapy Management services
- Provider-administered drugs, which includes prior authorization list maintenance, policy creation and prior authorization reviews, and member/provider notifications
- Pharmacy lock-in program
- Provider education and performance reporting
- Collaboration with ODM and the Single Pharmacy Benefit Manager (SPBM).

All other pharmacy benefits are covered by ODM's contracted SPBM: Gainwell Technologies.

To access the Ohio Unified Preferred Drug List, visit the [Ohio Unified Preferred Drug List website](#).

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 Medicaid provider ID

Pharmacies that do not meet Humana's required standards, which include having an active state Medicaid 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
- Pharmacy National Provider Identifier (NPI)
- Pharmacy doing business as name
- Pharmacy legal name
- Pharmacy physical address
- Pharmacy phone number
- Pharmacy fax number
- Pharmacy contracting contact name
- Pharmacy owner
- Pharmacy mailing address (if different from physical address)
- Tax Identification Number
- Medicaid ID
- Email address
- Type of contract (e.g., retail, long-term care/assisted living, hospice, 340B)
- Organizational structure form

05 | Complaints

Pharmacy complaint system for states with Humana Pharmacy Solutions as the PBM

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 state-specific phone numbers for questions or complaints related to a system issue or claims transaction. All **phone** numbers are available 24 hours a day, 7 days a week:

Florida: 844-918-0110

Oklahoma: 844-918-0785

South Carolina: 844-918-0109

Virginia: 844-918-0115

Pharmacy initiative inquiries

- Humana's dedicated pharmacy telephone support unit can be reached at 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 90 calendar days (Florida), 60 calendar days (Oklahoma and South Carolina) or 14 calendar days (Virginia) 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.
 - 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 BINs and PCNs:

Plan	BIN	PCN
Humana Healthy Horizons in Florida (Medicaid)	610649	03190000
Humana Healthy Horizons in Ohio (Medicaid)	024251	OHRXPROD
Humana Healthy Horizons in Oklahoma (Medicaid)	610649	03191505
Humana Healthy Horizons in South Carolina (Medicaid)	610649	03191504
Humana Healthy Horizons in Virginia (Medicaid)	610649	03191507
Humana MAPD and PDP (please submit with the member ID located on the member's ID card), Illinois dual demonstration	015581	03200000
Medicare Advantage plans	610649	03200004
Medicare's Limited Income Newly Eligible Transition (LI NET) Program	015599	05440000
KY MedImpact	023880	KYPROD1

07 | Claims and audits

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.

Medicaid only (Kentucky)

- Pharmacies may call MedImpact at 800-210-7628, 24 hours a day, 7 days a week, with questions and concerns regarding claims.
- MedImpact fax number: 858-549-1569

Medicaid only (Ohio)

- Pharmacies may call Gainwell Technologies at 833-491-0344, 24 hours a day, 7 days a week.

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
- Dispensing an incorrect prescription drug
- Billing the wrong number
- Billing an incorrect provider
- Using an NCPDP/NPI number inappropriately
- Submitting invalid pharmacy service type
- Submitting invalid patient residence code
- Calculating the days' supply incorrectly
- Using a dispense-as-written code incorrectly
- Overbilling quantities
- 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

Lock-in programs – Florida, Kentucky, Ohio, Oklahoma, South Carolina and Virginia

Humana's lock-in programs* help 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, Medicaid ID number, case number, contact phone number and a detailed description of your request.
- Fax number: 502-996-8184
- Email: CPORM@humana.com

* Virginia – Patient Utilization Management and Safety Program

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
- LI NET 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
- 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

<p>Pharmacy Help Desk</p>	<p>For refill-too-soon overrides and prior authorization status, call 800-865-8715, 24 hours a day, 7 days a week, and follow the prompts. These are SS&C Health state-specific phone numbers when Humana Pharmacy Solutions is the PBM. All numbers are available 24 hours a day, 7 days a week:</p> <p>Florida: 844-918-0110 Oklahoma: 844-918-0785 South Carolina: 844-918-0109 Virginia: 844-918-0115</p>
<p>HCPR</p> <p>For medication supplied by a pharmacy and billed through the pharmacy benefit: medication prior authorization, step therapy, quantity limits and medication exceptions.</p> <p>Humana Drug Lists: Visit the Humana Drug Lists for providers website.</p>	<p>To submit prior authorization requests:</p> <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.

10 | Contact information

CenterWell Pharmacy Mail-delivery pharmacy for maintenance medications and other durable medical equipment	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
CenterWell Specialty Pharmacy® Mail-delivery pharmacy for specialty medications	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
CenterWell Pharmacy Humana Healthy Horizons in Florida members only	Phone number: 800-526-1490 (TTY: 711) Monday – Friday, 8 a.m. – 6 p.m., Eastern time Website: Order your over-the-counter products with CenterWell Pharmacy

10 | Contact information

Humana Customer Care

To obtain general Medicaid plan information, call:

Florida: 800-477-6931 (TTY: 711)

Monday – Friday, 8 a.m. – 8 p.m., Eastern time

Kentucky: 800-444-9137 (TTY: 711)

Monday – Friday, 7 a.m. – 7 p.m., Eastern time

Ohio: 877-856-5702 (TTY: 711)

Monday – Friday, 7 a.m. – 8 p.m., Eastern time

Oklahoma: 855-223-9868 (TTY: 711)

Monday – Friday, 8 a.m. – 5 p.m., Central time

South Carolina: 866-432-0001 (TTY: 711)

Monday – Friday, 8 a.m. – 8 p.m., Eastern time

Virginia: 844-881-4482 (TTY: 711)

Monday - Friday, 8 a.m. – 8 p.m., Eastern time

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 member or Medicaid 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)

10 | Contact information

KY MedImpact

Website:

[MedImpact portal](#)

Technical call center:

Phone number: 800-210-7628

24 hours a day, 7 days a week

Prior authorization:

Phone number: 844-336-2676

Daily, 8 a.m. – 7 p.m., Eastern time

Fax number: 858-357-2612

Pharmacy paper claims:

Fax number: 858-549-1569

10| Contact information

Medicaid Gainwell Ohio

Website:

SPBM website:

[Ohio SPBM](#)

Humana provider resources website:

[Medicaid for Providers – Humana \(Ohio\)](#)

Humana member resources website:

[Humana Healthy Horizons in Ohio](#)

Technical call center phone number:

833-491-0344

24 hours a day, 7 days a week

Prior authorization:

Phone number: 833-491-0344

24 hours a day, 7 days a week

Fax number: 833-679-5491

Humana®