## **Provider Transfer of Member**

## The following FAQ details Humana guidance on provider-initiated member transfers

Question	Response
What is Humana strategy for provider off-panel member transfer?	The process details the steps providers shall follow when submitting a member transfer request to Humana due to disruptive, unruly, abusive, or uncooperative member/caregiver behavior that seriously impairs provider ability to furnish services. A transfer request may only be initiated if the member/caregiver first receives behavior expectation education both verbally and by mail.
This process does not apply to members who:	<ul> <li>Have received a mental health diagnosis</li> <li>Are dealing with adverse health status changes</li> <li>Who have diminished mental capacity</li> <li>Exhibit behavior due to member special needs</li> <li>Have attempted to exercise the plan's grievance system</li> </ul>
When can a member be transferred?	Members cannot be transferred until the effective date of an approved transfer. Until then, the assigned provider is responsible for member care. Providers may not take steps to transfer the member prior to obtaining approval from Humana.
Requested transfers cannot be based upon:	<ul> <li>Member inability to pay for services</li> <li>Medical or mental health reasons</li> <li>Member refusal of treatment</li> <li>NOTE: Patients have the right to participate in decisions regarding their health, including the right to refuse treatment.</li> </ul>



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What steps should providers follow to initiate a request to transfer?	<ol> <li>The provider should conduct a verbal discussion with the member/caregiver at the time of the first incident and at every subsequent incident and should outline provider behavior expectations of member/caregiver behavior during office visits and phone conversations. Each conversation should be documented by the provider in the member's record.</li> <li>If the member/caregiver continues to be disruptive, unruly, abusive, or uncooperative after being verbal provided education, the provider shall send a written communication that outlines provider expectations of member/caregiver behavior during office visits and phone conversations. This written communication should be documented by the provider in the member's record.</li> <li>If unruly, abusive, or uncooperative member/caregiver behavior continues after receipt of the written provider</li> </ol>
	communication, the provider may submit a <b>Humana</b> <b>Physician Medicaid-Initiated Transfer Request form</b> to: – Florida:
	Humana_FL_Centralized_Provider_Relations@humana.com
	The Provider Contracting team shall review the submitted form and supporting documentation to ensure they are complete and accurate. The representative shall log and submit the request to the clinical medical director for review and approval.
	<b>NOTE:</b> Please follow these steps unless your request meets the escalated exception criteria listed below in the escalated exceptions section.
If request to transfer is approved by the medical director, what happens next?	The member/caregiver will be sent a transfer notice. The member will next be mailed a new Humana Healthy Horizons® in Florida ID card that includes their new provider's contact information.
	Once the member is transferred, the Provider Contracting team will notify the requesting provider and close out the request.

Question	Response
What are escalated exceptions?	If the situation between the member/caregiver and the provider has intensified to the point of law enforcement involvement, the provider may submit an escalated exception request to the Provider Contracting team.
	The request should include:
	An incident description
	<ul> <li>Any available police reports</li> </ul>
	The Provider Contracting team will escalate the request to the clinical medical director and engagement team to immediately transfer the member to another provider. A notice will be sent informing the member of the change.
	Once the member is transferred, the Provider Contracting team will notify the requesting provider and close out the request.
	The member will receive a new Humana Healthy Horizons in Florida ID card in the mail that includes their new provider's contact information.