Humana Medicaid

Second Quarter 2017

Updates for Physicians and Health Care Providers

In this issue

Confirm your Medicaid ID for claim payments

Beginning April 10, claims will be denied for physicians and health care professionals with invalid Medicaid enrollment. To receive Medicaid reimbursement, a physician or health care professional must be fully enrolled in Medicaid or have "limited enrollment status," as well as meet all provider requirements at the time the service is rendered. Any entity that bills Humana for Medicaid-compensable services provided to Medicaid recipients or that provides billing services of any kind to Medicaid providers must enroll as a Medicaid provider.

PROPER MEDICAID ENROLLMENT IS CRITICAL FOR CLAIMS PAYMENT. ALL PHYSICIANS AND HEALTH CARE PROFESSIONALS NEED TO CONFIRM THEIR MEDICAID ENROLLMENT WITH THE AGENCY FOR HEALTH CARE ADMINISTRATION (AHCA).

Physicians and other health care professionals can verify their enrollment via the AHCA website:
http://portal.flmmis.com/FLPublic/Provider_ManagedCare/Provider_ManagedCare_Registration/tabId/77/Default.aspx?linkid=pml
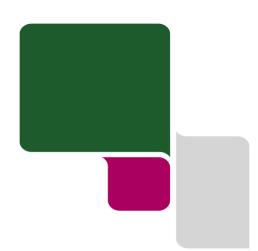
Please note the following details regarding the listing:

- Current listing of Medicaid numbers for all providers confirmed active on the AHCA Portal Provider Master List (PML).
- Provider must be listed as "ENROLLMENT" or "Limited Enrollment" in Enrollment Type column L and as "ACTIVE (A)" in Current Medicaid Enrollment Status column V.
- Provider's billing NPI and/or rendering NPI must be accurate and affiliated with the provider's Medicaid ID.

Incorrect enrollment can affect the way a physician, health care professional or provider group is identified by AHCA and its Choice Counselors, as well as how a physician, health care professional or provider group is listed in Physician Finder, Humana's online provider directory.

AHCA's Provider Enrollment area is available to assist with enrollment issues, such as change of address, change of ownership and re-enrollment issues via the AHCA website:
http://portal.flmmis.com/FLPublic/Provider_ProviderServices/Provider_Enrollment/tabId/42/Default.aspx

Guidelines about how physicians and other health care professionals should enroll with Medicaid can be found in the Provider General Handbook's Reference Chapter 2:
https://www.flrules.org/Gateway/reference.asp?No=Ref-02671

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AHCA updates Medicaid fee schedules

Florida's Agency for Health Care Administration (AHCA) updated Medicaid fee schedules with new therapy codes effective Jan. 1, 2017. The previous codes became obsolete on Dec. 31, 2016, and are now being denied. Health care professionals who have submitted claims with obsolete codes for dates of service Jan. 1, 2017, and after, need to submit corrected claims with the new codes.

Obsolete codes include the following:

- 97001   Physical therapy evaluation
- 97002   Physical therapy re-evaluation
- 97003   Occupational therapy evaluation
- 97004   Occupational therapy re-evaluation
- 97005   Athletic training evaluation
- 97006   Athletic training re-evaluation

New therapy codes to be used for dates of service Jan. 1, 2017, and after, include the following:

- 97161   PT EVAL LOW COMPLEX 20 MIN
- 97162   PT EVAL MOD COMPLEX 30 MIN
- 97163   PT EVAL HIGH COMPLEX 45 MIN
- 97164   PT RE-EVAL EST PLAN CARE
- 97165   OT EVAL LOW COMPLEX 30 MIN
- 97166   OT EVAL MOD COMPLEX 45 MIN
- 97167   OT EVAL HIGH COMPLEX 60 MIN
- 97168   OT RE-EVAL EST PLAN CARE
- 97169   ATHLETIC TRN EVAL LOW CMPLX
- 97170   ATHLETIC TRN EVAL MOD CMPLX
- 97171   ATHLETIC TRN EVAL HIGH CMPLX
- 97172   ATHLETIC TRN RE-EVAL PLAN CR

New shortcut to Humana's Florida Medicaid provider website

HEALTH CARE PROVIDERS CAN FIND THE HELPFUL HUMANA RESOURCES, INCLUDING HUMANA'S FLORIDA MEDICAID PROVIDER HANDBOOK, ON THE HUMANA FLORIDA MEDICAID PROVIDER WEBSITE AT HUMANA.COM/FLORIDAMEDICAID.

Humana encourages provider nominations

Humana makes every effort to recruit and retain physicians and health care professionals of all ethnicities to support the cultural preferences of our members. Currently, Humana's Medicaid provider networks are open to new physicians and health care professionals who agree to Humana's contractual requirements and rates, as well as satisfy all credentialing and regulatory requirements.

We review and accommodate all provider nomination requests, when appropriate, from members and others to facilitate equal representation in our provider network. Questions about Humana's recruitment and retention of minority physicians and health care providers may be directed to your provider relations representative.

The status of Humana's networks is subject to change based on continual assessment of our provider network requirements. Therefore, there may be closed panels for select specialties in specific geographic areas.

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Complete 2017 compliance training requirements

Participating physicians and health care professionals are required to complete and attest to understanding and adhering to compliance program requirements available online.

Highlights include:

- **Humana Medicaid provider orientation**
- **Health, safety and welfare training**
- **Cultural competency**
- **Compliance and FWA training**

Find the training modules by logging in at **Humana.com/providers** (registration required) or http://www.availity.com (registration required). More information is available on Humana's website at Humana.com/floridamedicaid by choosing the "Health Care Provider Training Materials" tab.

Office of Health Information Exchange and Policy Analysis provides resources for health initiatives

The Office of Health Information Exchange and Policy Analysis produces statutorily mandated reports, administers the Medicaid Electronic Health Record (EHR) Incentive Program, provides governance of the Florida Health Information Exchange (Florida HIE) and provides research as well as analytic support to the Agency for Health Care Administration (AHCA).

- The Florida Health Information Network website, www.fhin.net, provides information and resources relating to AHCA's initiatives for Health Information Technology (HIT) and Health Information Exchange (HIE).

- Details about services, as well as the latest news and events relating to the Florida HIE initiative and information on becoming a participant, can be found at: www.florida-hie.net.

- Information about the Medicaid Electronic Health Record Incentive Program can be found at http://ahca.myflorida.com/Medicaid/EHR/index.shtml.

- Reports produced by this Office can be found on the research studies and reports page at http://www.floridahealthfinder.gov/researchers/studies-reports.aspx.

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Physician extender reimbursement updated by 2017 fee schedules

The Agency for Health Care Administration (AHCA) posted updated fee schedules and billing codes, effective Jan. 1, 2017, to reflect new 2017 Healthcare Common Procedure Coding System (HCPCS) codes and fees. The updated fee schedules and billing codes are located on the AHCA website. Health care professionals rendering services to recipients enrolled in a Medicaid health plan should refer to their contract with each health plan to determine whether this change will impact their reimbursement from the plans.

Humana follows state-specific regulations regarding fee schedule management and payments to health care providers; therefore, Humana Medical Plan's fee schedules follow direction from AHCA's provider fee schedules for physician extenders. Consistent with that approach, effective as of March 1, 2017, Humana Medical Plan reimburses physician extenders in accordance with the current published AHCA fee schedules. Under these AHCA fee schedules, services provided by physician extenders are paid at a different rate under Medicaid than other types of health care providers.

Physician extenders include, but are not limited to, the following:

- Licensed midwives
- Certified nurse midwives
- Advanced registered nurse practitioners
- Registered nurse first assistants
- Physician assistants
- Certified registered nurse anesthetists
- Anesthesiologist assistants

If you have questions about the Humana Medical Plan fee schedule, please contact your provider relations representative or visit the Florida Medicaid web portal's provider fee schedules page:
http://ahca.myflorida.com/medicaid/review/fee_schedules.shtml.

For more information, refer to the list below for your region's contact information:

- Region 1 (Walton and Okaloosa counties), call Jerred Carter at 1-813-294-5886 or email Jerred_Carter@iasishealthcare.com.

- Region 1 (Escambia and Santa Rosa counties), call Justin Donato at 1-813-601-4867 or email Jdonato@iasishealthcare.com

- Region 6 (South Hillsborough, Hardee, Highlands and Manatee counties), call Ramon Paulino at 1-813-309-3581 or email RPaulino@iasishealthcare.com.

- Region 6 (North Hillsborough and Polk counties), call Robert Castillo at 1-813-309-7045 or email RCastillo@iasishealthcare.com.

- Regions 9, 10, 11, contact Katrina Knight-Vera at 1-305-626-5006.

Humana's satisfaction survey begins in May

Humana's 2017 provider satisfaction survey will begin in May. Provider practices can expect phone calls from associates with Talk2Rep, the vendor that will be administering the survey on behalf of Humana.

This is an opportunity for health care professionals to tell us how we are doing and suggest opportunities for improvement. The Provider Satisfaction Survey will cover questions and criteria about the following topics:

- Provider Relations and Communications
- Care Coordination & Authorization Processes
- Claims
- Complaint & Appeals Resolution Processes
- Clinical Management
- Administration

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