

Humana Gold Plus Integrated Illinois Medicare-Medicaid Alignment Initiative (MMAI)



Provider Resource Guide

Online self-service

A variety of provider materials and resources are available on the public website at [Humana.com/Providers](https://www.humana.com/Providers) (no registration required). MMAI-specific materials and communications can be found at [Humana.com/HealthyIL](https://www.humana.com/HealthyIL), including:

- Provider publications (i.e., provider manual, newsletters, program updates)
- Preauthorization and notification list
- Prescription drug guide
- Compliance requirements
- Forms

Healthcare providers who want to work with Humana online can register for the Availity Provider Portal at no cost.

This multipayer portal allows providers to interact securely with Humana and other participating payers without learning to use multiple systems or remembering different user IDs and passwords for each payer. Many Humana-specific tools are accessible from the Availity Provider Portal.

To learn more, call Availity at 800-282-4548 or visit [Availity.com](https://www.availity.com). Availity provides the following functions:

- Check eligibility and benefits
- Submit referrals and authorizations
- Check claim status
- Confirm/make claim submissions
- Receive remittance advice
- View enrollee summaries
- Confirm/remedy overpayment
- Get electronic remittance advice and set up electronic funds transfer

Get paid faster and have your Humana claim payments deposited automatically with electronic funds transfer (EFT) and electronic remittance advice (ERA). Visit [Humana.com/EpagementInfo](https://www.humana.com/EpagementInfo) or contact Humana Medicaid Customer Care at **800-787-3311 (TTY:711)** for more information about these self-service tools.

For training opportunities, please visit [Humana.com/ProviderSelfService](https://www.humana.com/ProviderSelfService) and select “View the webinar schedule to sign up for training” under Training opportunities.

Dual Medicare–Medicaid Plan preauthorization list

Humana requires preauthorization for certain services to facilitate care coordination and confirm that the services are provided according to Centers for Medicare & Medicaid Services (CMS) and Illinois Department of Healthcare and Family Services (HFS) coverage policies. To determine whether preauthorization is required for a patient with Humana MMAI coverage, physicians and other healthcare providers should review the Medicare and Dual Medicare–Medicaid Plans Preauthorization and Notification List online at Humana.com/PAL.

Frequent contact information

Important numbers	Phone number	Hours of operation (all times Central)
Humana Medicare–Medicaid Dual Provider Call Center	800-787-3311	Monday through Friday, 7 a.m. to 7 p.m.
Provider relations – health planning and support (fee-schedule requests)	800-626-2741	Monday through Friday, 8 a.m. to 5 p.m.
Preauthorization assistance for medical procedures	800-523-0023	Monday through Friday, 7 a.m. to 7p.m.
Medication prior authorizations – Step therapy, quantity limits and medication exceptions for medication supplied and billed through the pharmacy). Online submission available at www.covermy meds.com/epa/humana . Forms also available at Humana.com/PA .	800-555-2546 Fax: 877-486-2621	Monday through Friday, 8 a.m. to 6 p.m.
Medication intake team – Prior authorization for medication administered in medical office. Forms available at Humana.com/med/PA .	866-461-7273 Fax: 888-447-3430	Monday through Friday, 8 a.m. to 6 p.m.
Medication Therapy Management (MTM) Program	888-210-8622 (TTY: 711)	Monday through Friday, 8 a.m. to 6 p.m.
Humana Pharmacy – Mail order for maintenance medications	800-379-0092 (TTY: 711) Fax: 800-379-7617	Monday through Friday, 7 a.m. to 10 p.m. and Saturday, 7 a.m. to 5:30 p.m.
Humana Specialty Pharmacy	800-486-2668 (TTY: 711) Fax: 877-405-7940	Monday through Friday, 7 a.m. to 10 p.m. and Saturday, 7 a.m. to 5:30 p.m.
Pharmacy appeals	Fax: 877-556-7005	
Claim payment inquiries	800-787-3311	Monday through Friday, 7 a.m. to 7 p.m.
Availity	800-282-4548 (800-AVAILITY)	Monday through Friday, 7 a.m. to 6:30 p.m.; press 0 for live assistance
PPI Customer Service – Confirm/Remedy overpayment as well as inquire/review issues related to financial recoveries.	800-438-7885	Monday through Friday, 7 a.m. to 7 p.m.

Fraud, waste and abuse reporting	
Humana	800-614-4126
Illinois Department of Healthcare and Family Services – Medicaid/Welfare Fraud Hotline	844-453-7283

Important addresses

Humana department	Address
Provider correspondence	Humana P.O. Box 14601 Lexington, KY 40521 4601 Attn: Provider Correspondence
Provider complaints	Humana, Attn: Provider Complaints P.O. Box 14601 Lexington, KY 40521-4601
Member grievances and appeals	Humana Health Plans P.O. Box 14546 Lexington, KY 40512-4546
Claims	Humana Claims Office P.O. Box 14601 Lexington, KY 40512-4601
Quality improvement program	Humana Quality Management Department 321 W. Main St., WFP 20 Louisville, KY 40202
Pharmacy appeals	Humana Appeals P.O. Box 14546 Lexington, KY 40512-2961

Other network information

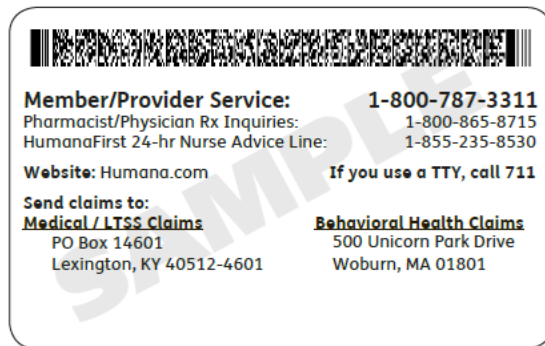
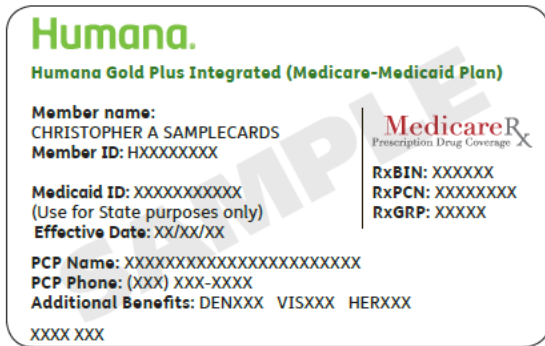
Required networks/ vendor name	Phone number
Beacon – Behavioral health	855-481-7044
MTM Inc. -Non-emergency transportation vendor	855-253-6867

Available web resources:

- Humana Provider Manual – [Humana.com/provider/news/publications](https://www.humana.com/provider/news/publications)
- Humana Prior Authorization List – [Humana.com/PAL](https://www.humana.com/PAL)
- Availity Provider Portal – [Availity.com](https://www.availity.com)
- Humana Long-Term Services and Supports Provider Resource Guide – [Humana.com/ILLTSS](https://www.humana.com/ILLTSS)
- Part D redeterminations – [Humana.com/provider/pharmacy-resources/exceptions-appeals](https://www.humana.com/provider/pharmacy-resources/exceptions-appeals)

Enrollee ID card samples

Please ask enrollees to present their ID card at the time of service.



Please note: These sample IDs comply with state guidelines. They are subject to change without notice.

The following are some of the many clearing houses offering services to healthcare providers. Some clearinghouses and vendors charge a service fee. Contact the clearing house for more information.

Clearinghouse vendor name	Website	Phone number
Availity	Availity.com	800-282-4548
Change Healthcare	ChangeHealthcare.com	866-371-9066
Trizetto®	Trizetto.com	800-969-3666
Waystar	Waystar.com	844-492-9782
SSI Group	TheSSIGroup.com	800-820-4774
Humana payer ID		
Fee-for-service claims (noncapitated)	61101	
Commercial encounter claims (capitated)	61102	
Delegated encounter claims	61105	
Beacon – behavioral health claims	43324	

Annual compliance training

Humana supports physicians and other healthcare providers in their efforts to provide care to patients with Medicaid coverage by offering training materials to help them meet state and federal compliance requirements.

There are a variety of materials available, including:

- Humana Illinois Medicare-Medicaid Provider Orientation
- Humana Illinois Medicare-Medicaid Provider Training
- Health, Safety and Welfare Training
- Cultural Competency
- General Compliance and Fraud, Waste and Abuse Training

More information is available on Humana's website at [Humana.com/ProviderCompliance](https://www.humana.com/providercompliance) by choosing the "Healthcare Provider Training Materials" tab.

Provider compliance training also is available at [Availity.com](https://www.availity.com) in the Humana Payer Space Resource tab.

Eligibility

Potential enrollees must be Medicare-eligible and Medicaid-eligible disabled adults (aged 21 and older). Medicaid-eligible disabled adult designation also includes certain home and community-based waiver enrollees.

PCP assignment

All potential enrollees must have a medical home. They are given a 180-day transition period during which they may maintain a current course of treatment with a provider who is currently out of Humana's network. The 180-day transition period is applicable to all providers. Potential enrollees may select a Humana network PCP earlier than 180 days.

Covered benefits

Humana provides the same covered benefits that potential enrollees would receive when dually enrolled in Original Medicare and state Medicaid programs, plus some extras.

Members of Humana will receive the following benefits:

- \$0 copay for doctor visits and hospital stays
- \$0 copay for other covered healthcare services
- Up to \$30 in certain non-Medicaid covered over-the-counter items each quarter
- Unlimited rides to and from medically necessary appointments, and to the pharmacy right after a doctor's visit
- 30- or 90-day prescriptions can be mailed to the enrollee's home from in-network mail-order pharmacies
- 10 frozen meals home delivered after an overnight stay in a hospital or nursing home
- Additional dental care benefits

Medical copayments

\$0 copays for medically covered services

- Doctor visits
- Hospital stays
- Emergency room (ER) visits
- Prescriptions

Care Management

Humana MMAI enrollees are assigned to a care coordinator (CC) upon enrollment. The CC conducts regular assessments, develops a comprehensive care plan and assists enrollees to access needed services. As part of the care plan development process, CCs request input from providers through an Interdisciplinary Care Team (ICT) meeting. If you would like additional information regarding care coordination services, please contact Humana MMAI Customer Care at 800-787-3311.