

# Medicare Advantage (MA)

## Full and Partial Networks Private Fee-for-service (PFFS)

### Electronic claims filing

#### Humana's MA Full and Partial Networks PFFS plans

Humana's MA full and partial networks PFFS claims can be filed electronically through various clearinghouses. Our preferred clearinghouse is Availity®. The payer ID for claims is **61101**, and the payer ID for encounters is **61102**. Some clearinghouses might charge a service fee. Please contact your clearinghouse for more information.

### Paper claims filing

#### Humana's MA Full and Partial Networks PFFS plans

Please submit your claims electronically whenever possible. Humana receives submissions through Availity at no charge to the healthcare provider; however, you can continue submitting transactions to your existing clearinghouse. These Humana claims will be forwarded to Availity if the clearinghouse is listed for forwarding.

Submit paper claims to:

**Humana's MA Full and Partial Networks PFFS plans**  
c/o Humana Claims Office  
P.O. Box 14601  
Lexington, KY 40512-4601

Humana's MA full and partial networks PFFS plans allow payment for covered services at contracted rates minus the patient's cost share, which typically is a copayment. To facilitate efficient and accurate claims processing, please:

- Include your provider Tax Identification Number, Medicare ID, National Provider Identifier and taxonomy number. Facilities should use the subunit identifier with their facility ID.
- Consider using dedicated Medicare billing staff and/or Medicare editing software.
- Include any documentation that would be required on a Medicare claim.

### Admission preauthorization

Inpatient admissions for Humana Network PFFS plans are not subject to prior authorization requirements; however, notifications are requested for any admission to a hospital or skilled nursing facility. This notification helps the patient use case management and Humana disease management programs upon discharge. Please call **800-523-0023** for admission notification.

**The claims and Customer Care telephone number is 800-4HUMANA (800-448-6262).**

For copies of benefit summaries for any Humana MA plan, visit our website at [Humana.com](http://Humana.com). Do the following:

- Click "Shop for Plans."
- Click "Shop Medicare Advantage Plans."
- Enter the patient's ZIP code and click "Shopplans."
- Find the patient's plan and click "Next."
- Scroll to the "Plan documents" box and find "See plan summary."

**Humana**  
**HUMANA GOLD CHOICE (PFFS)**  
A Medicare Health Plan with Prescription Drug Coverage  
CARD ISSUED: MM/DD/YYYY

**MEMBER NAME**  
**Member ID: HXXXXXXXXX**  
Plan (80840) 9140461101  
**RxBIN:** XXXXXX  
**RxPCN:** XXXXXXXX  
**RxGRP:** XXXXX

**Copayments**  
OFFICE VISIT: \$XX  
SPECIALIST: \$XX  
HOSPITAL EMERGENCY: \$XX

**Network: Full**

**MedicareRx**  
Prescription Drug Coverage  
CMS XXXXX XXX

Depending on the PFFS plan, "Full" or Partial" will follow "Network."