

Humana Healthy Horizons in Florida Behavioral Analysis Provider Quick Guide

Provider relations and other helpful contacts

- For general questions and support, please contact our ABA provider relations mailbox: **ABA@humana.com**.
- For regions A–E please contact Kiesa Arrington at karrington@humana.com or call 901-232-7247.
- For regions F–I please contact Elba Martinez at emartinez1@humana.com or call 754-230-7899.

Call centers and website

- Provider call center: **800-477-6931**, Monday through Friday, 8 a.m 8 p.m, Eastern time
- Member call center: **800-477-6931**, Monday through Friday, 8 a.m 8 p.m, Eastern time
- Pharmacy call center: **800-555-2546**, Monday through Friday, 8 a.m 6 p.m, Eastern time
- Humana Healthy Horizons in Florida Website: Humana.com/healthyFL
- Pharmacy Website: **Humana.com/FLPharmacy**

Behavior analysis coverage policy

Behavior analysis coverage policy (myflorida.com)

Behavior analysis fee schedule

- Humana aligns with the Florida Agency for Health Care Administration (AHCA) approved fee schedule for billable procedure codes and service limitations.
- Please note that specific reimbursement amounts will depend upon your Humana contract and not the amounts listed on the AHCA schedule.
- Link: https://ahca.myflorida.com/medicaid/rules/rule-59g-4.002-provider-reimbursement-schedules-and-billing-codes
 - Click the link to the applicable behavior analysis fee schedule.

Humana Healthy Horizons, in Florida

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan, Inc.

Prior authorization requests

Our prior authorization (PA) list can be found at **Humana.com/PAL**. Except where noted, PA requests for medical services may be initiated:

- Online via **Availity.com** (registration is required)
- By calling Humana's interactive voice response line (IVR) 24 hours a day at **800-523-0023** (Humana customer care representatives are available Monday through Friday, 8 a.m. 8 p.m., Eastern time.)
- Online PA requests are encouraged. Additionally, clinical information for a medical service preauthorization request may be faxed to **813-321-7220**.

Humana clinical contacts

- Inpatient utilization management: 866-856-8974, Monday through Friday, 8 a.m. – 5 p.m., Eastern time
- Outpatient utilization management: **800-322-2758**, Monday through Friday, 8:30 a.m. 5 p.m., Eastern time
- Case management: 800-229-9880, Monday through Friday, 8:30 a.m. 5 p.m., Eastern time
- HumanaBeginnings®: **800-322-2758, ext. 1500290**, Monday through Friday, 8:30 a.m. 5 p.m., Eastern time
- 24-hour nurse advice line: **800-648-8097**, 24 hours a day, seven days a week

Availity provider portal

- Web: Availity Provider Self-Service Portal | Humana and Availity Essentials
- Phone: 800-282-4548, Monday through Friday, 8 a.m. 8 p.m., Eastern time

Claims

Humana Claims Office	Humana Claims Overpayment	Provider Correspondence:
P.O. Box 14601 Lexington, KY 40512	P.O. Box 931655 Atlanta, GA 31193-1655	Humana Inc. 3401 SW 160th Ave. Miramar, FL 33027

Provider complaints

Humana

Attn: Provider Complaints

P.O. Box 14601

Lexington, KY 40521-4601

Provider reconsiderations

Provider Grievance and Appeals

Humana Attn: Provider Reconsiderations

P.O. Box 14546

Lexington, KY 40521-4546

Clearinghouse information

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

- Availity Essentials—preferred long-term care (LTC) Vendor www.Availity.com, 800-282-4548
- Waystar/Zirmed www.zirmed.com, 844-692-9782
- Trizetto www.trizetto.com, 800-556-2231
- The SSI Group www.thessigroup.com, 800-881-2739

Humana Payer IDs

Fee-for-Service claims: 61115

Billing guidance

Submitting behavioral analysis claims to Humana Healthy Horizons:

- Use the CMS-1500 form to submit claims for behavioral analysis services
- Reimbursement for all services is allotted in 15 -minute increments
- Ensure you bill with the appropriate modifier for the services rendered
- Add-on codes must be billed with the corresponding base code

Billing guidance

The below codes are provided for informational purposes only and may change. This should not be considered an all-inclusive list, and the list does not guarantee coverage or reimbursement.

Code	Service	Modifier	Service limitations
97151	Behavior identification – assessment Behavior identification –	TS	Medicaid reimburses a maximum of 24 units per behavior assessment
	reassessment (requires modifier)		Medicaid reimburses a maximum of 18 units per behavior reassessment
97152	Behavior identification – supporting assessment		Medicaid reimburses a maximum of eight units per behavior assessment
97153	Behavior treatment by protocol		Registered Behavior Technician (RBT), a board- certified assistant behavior analyst (BCaBA), or a lead analyst
91754	Group behavior assessment (BA) services by protocol, two clients in group Group BA services by protocol, three clients in group	UN	Maximum six clients per group, service provided by lead analyst, BCaBA, or RBT
	Group BA services by protocol, four clients in group	UQ	
	Group BA services by protocol, five clients in group	UR	
	Group BA services by protocol, six clients in group	US	

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97155	Behavior treatment with protocol modification	HN	Service provided by a lead analyst
	Behavior treatment with protocol modification		Service provided by a BCaBA
97156	Family training by lead analyst	GT	Lead analyst
	Family training via telemedicine	HN	Lead analyst; Florida Medicaid reimburses up to two hours per week
	Family training by assistant		Service performed by a BCaBA
97158	Group BA services with protocol modification, two clients in group	UN	Maximum six clients per group, service provided by lead analyst, BCaBA, or RBT
	Group BA services with protocol modification, two clients in group	UP	
	Group BA services with protocol modification, two clients in group	UQ	
Code	Service	Modifier	Service limitations
97158	Group BA services with protocol modification, two clients in group	UR	
	Group BA services with protocol modification, two clients in group	US	
0362T	Assessment add-on practitioner		Medicaid reimburses a maximum of 16 units for an initial behavior assessment or reassessment; need must be prior authorized and determined to be medically necessary
0373T	Treatment add-on practitioner		Need must be prior authorized and determined to be medically necessary
	Non-emerg	ency trans	portation
Modivo	are non-emergency transportation co	ontact info	rmation
Modivo	are phone number/reservation Line	866-779-	0565
Hours	of operations	Monday t	hrough Friday, 8 a.m. – 5 p.m., Eastern time
Transportation covered		Non-emergency medical transportation: Ambulatory, wheelchair, stretcher van, mass transit	
			include emergency ambulance services)
After-h	ours call line	866-799-	0565
Ride as	Ride assistance		edicaid ride assistance (Where's My Ride?) 0565 , 24 hours a day, seven days a week

Reservations	Reservations need to be made at least 72 hours in advance and no more than 30 days prior to the appointment.
Billing	800-930-9060 virgina.billingoperations@modivcare.com
Escalations	Contact Humana Healthy Horizons

Provider training and education

Humana.com/FLTraining

Provider contracting and credentialing

Provider contracting

- Contracting opportunities: Requesttojoin@humana.com
- Provider updates: Contact your provider contracting representative

Provider credentialing

- Email questions to: Credentialinginquiries@humana.com
- Behavior Analyst Certification Board: www.bacb.com

Provider contracting and credentialing

AHCA provider enrollment

- Agency Provider Enrollment Policy
- Provider enrollment website: https://portal.flmmis.com/flpublic/Provider_ProviderServices/
 Provider_Enrollment/tabid/42/desktopdefault/+/Default.aspx
- Provider enrollment helpline: **800-289-7799**, option 4; Monday through Friday, 8 a.m. 5 p.m., Eastern time
- Provider enrollment references and trainings: https://portal.flmmis.com/FLPublic/Provider_ ProviderServices/Provider_Training/tabId/46/Default.aspx?desktopdefault=%20