

# Home- and Community-Based Services (HCBS) Waiver Providers

Indiana PathWays for Aging  
2025 IHCP Works Annual Seminar



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Senior Provider Engagement Professional



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# HCBS Provider Engagement Team

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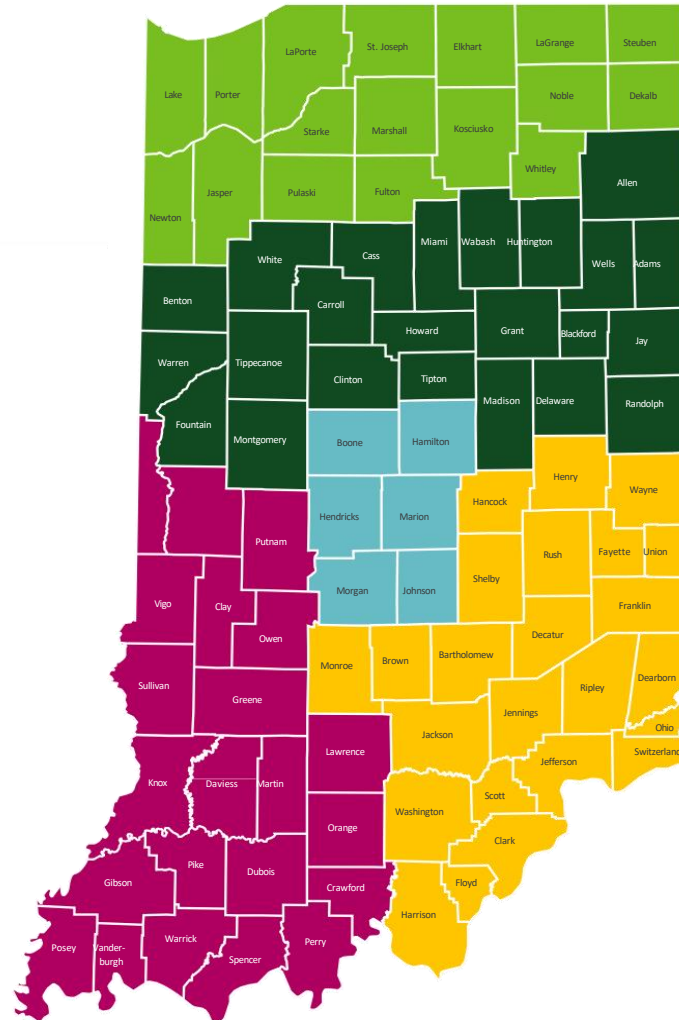
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# HCBS Provider Leadership Team

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# Indiana PathWays For Aging (PathWays) Overview

# PathWays Overview

The PathWays waiver is designed to provide an alternative to nursing facility (NF) admission for adults aged 60 and older who are aged, blind or disabled.

If a member has PathWays coverage and meets NF Level-of-Care (NFLOC), that member may be eligible to receive HCBS/waiver services.

PathWays supports individuals in choosing their own health plan. This plan helps them get the care and support they need so they can thrive in the community.



# PathWays – HCBS

HCBS services provide opportunities for individuals to receive assistance in their own homes or communities, rather than institutional settings.

- Adult Day Services (ADS)
- Adult Family Care (AFC)
- Assisted Living (AL)
- Attendant Care (ATTC)\*
- Caregiver Coaching
- Community Transition
- Home and Community Assistance (HCA)\*
- Home-Delivered Meals
- Home Modifications
- Integrated Health Care Coordination
- Nutritional Supplements
- Personal Emergency Response System (PERS)
- Pest Control
- Respite Care
- Specialized Medical Equipment and Supplies
- Structured Family Caregiving (SFC)
- Transportation\*
- Vehicle Modifications

# PathWays – HCBS Attendant Care and Home and Community Assistance

## **Attendant Care (ATTC)**

- Provides direct, hands-on care to participants for the functional needs with nonskilled activities of daily living (ADLs).
  - Assistance with personal care
  - Assistance with mobility
  - Assistance with waste elimination
  - Assistance with nutrition
  - Assistance with safety

## **Home and Community Assistance (HCA)**

- Provides instrumental activities of daily living (IADL) for participants in their home.
  - Assistance with home chores
  - Assistance with meal planning and preparation
  - Assistance with errands
  - Assistance with bill paying

# PathWays – HCBS Transportation

## Transportation

Non-medical transportation (NMT) is offered in addition to medical transportation. Services are reimbursed under the following 3 types:

- Non-assisted Transportation – The participant does not require mechanical assistance to transfer in and out of the vehicle.
- Assisted Transportation – The participant requires mechanical assistance to transfer into and out of the vehicle.
- ADS Transportation – The participant requires round-trip transportation to access Adult Day Services.

OMPP HCBS Waiver Module

# PathWays – HCBS Transportation Specifics

## Transportation

- NMT is included in AFC, AL, and SFC rates.
- ADS will use the general HCBS transportation billing modifiers & codes.
- ATTC has separate transportation billing modifiers.



# HCBS Certification and Humana Contracting

# HCBS Certification

As of May 2024, the Office of Medicaid Policy and Planning (OMPP) processes HCBS provider certification application for PathWays (including Traumatic Brain Injury, and Health and Wellness) waivers.

## To provide HCBS waiver services in Indiana, providers must:

1. Obtain and/or update certification from OMPP - OMPP Certification Portal
2. Enroll with the Indiana Health Coverage Programs (IHCP) - IHCP Provider Portal
3. Complete the waiver program enrollment process
4. Renew certification(s) every 3 years

**Additional Guidance & Resources can be found here:** Medicaid HCBS Certification & Certification Portal Bulletin

# HCBS Certification – OMPP Settings Rule Site Visits

- The Settings Rule is a law that supports how HCBS services are provided
  - Adult Family Care, Assisted Living, and Adult Day Services
- OMPP determines when additional compliance review is necessary
- Managed Care Entities (MCEs) partner with the State to support certification and recertification requirements
  - 90 calendar days of initial certification or addition of service
  - 90 calendar days of provider's recertification
  - 60 calendar days after being placed on a remediation plan

# Humana Contracting

Once providers have obtained certification through OMPP and IHCP, they are eligible to contract with Humana. It is essential that the contracted services with Humana precisely align with the certifications held from OMPP.

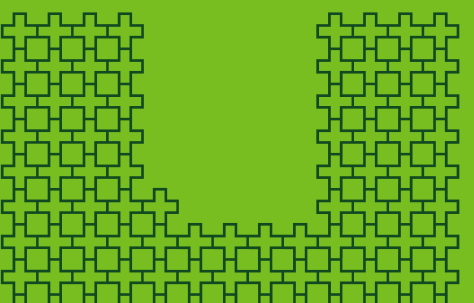
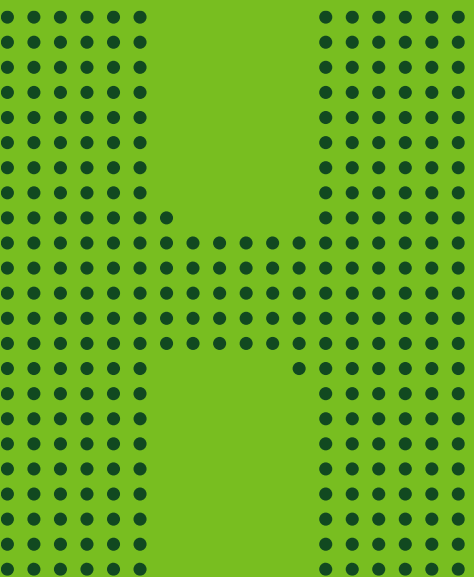
HCBS providers can reach out to [LTSSContracting@humana.com](mailto:LTSSContracting@humana.com) to:

- Complete a contract for services
- Demographic changes – TAX ID, Address(es), Fax number, Phone number, etc.
- Add services/service counties

**\*\*\* Providers will not be reimbursed for services if they are not certified/contracted to deliver those services \*\*\***

[Join Our Network Resource Guide](#)





# Overview of Service Authorization

# Humana Service Authorization



P.O. Box 14601  
Lexington, KY 40512-4601

Date

Provider's Name  
Provider's Address  
Provider Phone:  
Provider Fax:

Member Name:  
Member Address:  
Member Phone:  
RID:  
Member Date of Birth:  
Reference Id:

## Notice of Action

Dear ,

Attached is the approved NOTICE OF ACTION for who Member's Name selected you as a provider of the indicated services under Indiana PathWays for Aging. The summary included here provides you with information you will need for billing.

*Before providing services, Providers must verify that the Member is eligible for Medicaid. The Member must be eligible for full Medicaid coverage under Indiana PathWays for Aging for the provider to receive payment.*

If you have questions or concerns, please contact Member's Name's Care/Service coordinator, CC/SC Name, [INPathWaysLTSSUM@humana.com](mailto:INPathWaysLTSSUM@humana.com), CC/SC Cell Ph #, or Provider Services 866-274-5888 (TTY: 711).

Important Provider Notice: the 21st Century Cures Act directs state Medicaid programs to require personal care services to use an electronic visit verification (EVV) system to document services rendered. The EVV mandate is effective January 1, 2021. For more information visit <https://www.in.gov/medicaid/providers/business-transactions/electronic-visit-verification/>.

Authorized Service Title - Funding source: Indiana PathWays for Aging							
Provider Name:				Provider ID#:			
Billing Code	Mod 1,2,3,4	Start Date	Stop Date	Unit Size	Unit Rate	# of Units	Current Cost

If you have questions, please call us Monday through Friday from 8 a.m. to 8 p.m. Eastern time toll-free at:  
Member Helpline 866-274-5888 (TTY 711).

Sincerely,

CC/SC Name  
Care/Service Coordinator  
CC/SC Cell Ph #  
Humana Healthy Horizons® for Indiana PathWays for Aging

This document contains Protected Health Information which is governed by the Health Insurance Portability and Accountability Act (HIPAA) and may only be disseminated to authorized individuals.

- Any units of service billed beyond what is authorized will result in a claim denial or a future recoupment.
- Providers that use Electronic Visit Verification (EVV) must confirm visits/number of units present in aggregator prior to billing.

# Humana Service Authorization Example

Attendant Care (Agency)-Funding source: Indiana PathWays for Aging										
Provider Name: ABC Group, LLC							Provider ID#: 123456789			
Billing Code	Mod 1	Mod 2	Mod 3	Mod 4	Start Date	Stop Date	Unit Size	Unit Rate	# of Units	Current Cost
S5125	U7	UA			3/1/2025	3/31/2025	0.25 hr	\$8.59	84	\$721.56
S5125	U7	UA			4/1/2025	4/30/2025	0.25 hr	\$8.59	88	\$755.92

# Electronic Visit Verification (EVV)

Providers that use EVV must confirm visits/number of units present in aggregator prior to billing, or they may experience an "86E" claim denial.

- 86E – Claim lines not verified by EVV vendor

## Common "86E" Denial Reasons:

- Visits are not located in the EVV system.
- Units billed exceed the units available in EVV system.
- Visits were updated after the claims were billed to Humana.


State Bulletin: [BT202484](#)

# Verify Member Eligibility

- Providers are required to verify member eligibility on the date of service.
- Due to varying circumstances, a member may have periods of inactive coverage.
- If a member's coverage is inactive at the time services are rendered:
  - Claims will not be reimbursed
  - Providers that fail to verify eligibility are at risk of claims being denied due to member ineligibility or coverage limitations.


# IHCP Portal – Eligibility Example

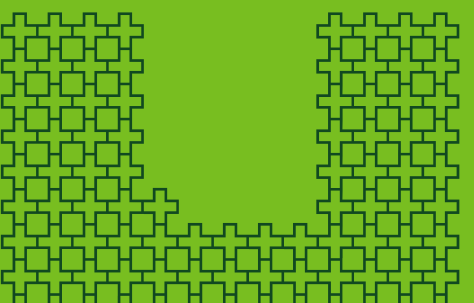
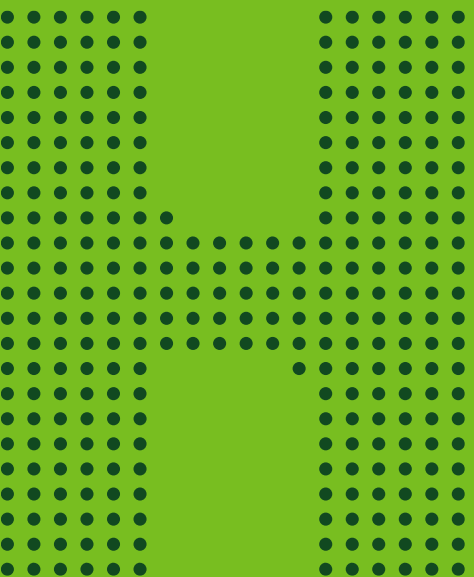
Member **is eligible** for PathWays HCBS Waiver services.

Benefit Details 			
Coverage	Description	Effective Date	End Date
Aged and Disabled HCBS Pathways	Aged and Disabled HCBS Pathways	07/01/2024	07/31/2024
Full Medicaid	Full Medicaid for individuals who are 65 years old, blind, or disabled (FFS or Managed Care)	07/01/2024	07/31/2024
Qualified Medicare Beneficiary	Qualified Medicare Beneficiary - Members for whom co-insurance and deductibles are paid as well as Medicare Part B premiums	07/01/2024	07/31/2024

# IHCP Portal – Non-Eligibility Example

Member is **NOT** eligible for PathWays HCBS Waiver services – ***only Full Medicaid.***

Benefit Details 			
Coverage	Description	Effective Date	End Date
Full Medicaid	Full Medicaid for individuals who are 65 years old, blind, or disabled (FFS or Managed Care)	09/01/2025	09/30/2025
Qualified Medicare Beneficiary	Qualified Medicare Beneficiary - Members for whom co-insurance and deductibles are paid as well as Medicare Part B premiums	09/01/2025	09/30/2025

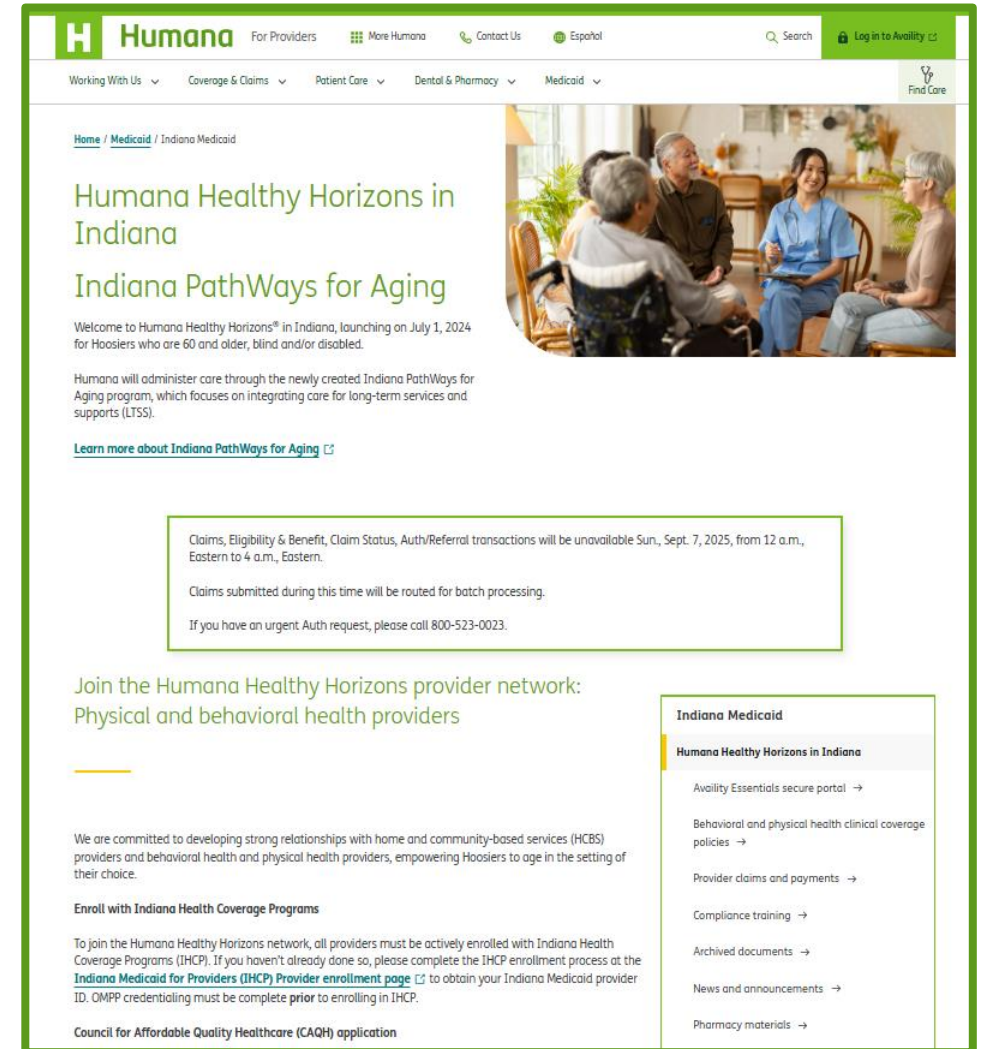


# Humana Website



# Humana Healthy Horizons in Indiana Provider Website

- Weekly/monthly/quarterly provider education opportunities
- In-person/virtual office hours and provider forums
- Contact information for various departments
- Access to latest news and announcements



Humana Healthy Horizons in Indiana Provider website: [Humana.com/HealthyIN](https://Humana.com/HealthyIN)

# Stay Informed: Access Resources and Humana Alerts

The screenshot shows the Humana website header with navigation links: For Providers, More Humana, Contact Us, Español, Search, and Log in to Availity. Below the header is a secondary navigation bar with links: Working With Us, Coverage & Claims, Patient Care, Dental & Pharmacy, Medicaid, and Find Care. The main content area features a section titled "Join the Humana Healthy Horizons provider network: Physical and behavioral health providers". A green arrow points from this section to a sidebar menu titled "Indiana Medicaid" which includes links to "Humana Healthy Horizons in Indiana", "Availity Essentials secure portal", "Behavioral and physical health clinical coverage policies", "Provider claims and payments", "Compliance training", "Archived documents", "News and announcements", "Pharmacy materials", "Prior authorization resources", "Provider resources", "Training resources", and "Contact us". Another green arrow points from the "Enroll with Indiana Health Coverage Programs" section to a box titled "Sign up for news, announcements and alerts for Indiana PathWays for Aging" which includes a "Sign up now" button. The "Enroll with Indiana Health Coverage Programs" section contains text about joining the network, a link to the "Indiana Medicaid for Providers (IHCP) Provider enrollment page", and information about the "Council for Affordable Quality Healthcare (CAQH) application".

**Humana** For Providers More Humana Contact Us Español Search Log in to Availity

Working With Us Coverage & Claims Patient Care Dental & Pharmacy Medicaid Find Care

### Join the Humana Healthy Horizons provider network: Physical and behavioral health providers

We are committed to developing strong relationships with home and community-based services (HCBS) providers and behavioral health and physical health providers, empowering Hoosiers to age in the setting of their choice.

#### Enroll with Indiana Health Coverage Programs

To join the Humana Healthy Horizons network, all providers must be actively enrolled with Indiana Health Coverage Programs (IHCP). If you haven't already done so, please complete the IHCP enrollment process at the [Indiana Medicaid for Providers \(IHCP\) Provider enrollment page](#) to obtain your Indiana Medicaid provider ID. OMPP credentialing must be complete prior to enrolling in IHCP.

#### Council for Affordable Quality Healthcare (CAQH) application

For individual providers, Humana partners with the CAQH to streamline the credentialing process. For individual providers, prior to submitting your request to join Humana's network, you'll need to make sure we can access your CAQH credentialing application. We'll need an up-to-date CAQH application and access to view that application granted to Humana/ChoiceCare® to proceed with your enrollment with Humana Healthy Horizons.

Once you've obtained your Indiana Medicaid provider ID, you can submit your enrollment request to Humana. Enrollment requirements vary according to your provider type; find details on requirements for each provider type in the [provider network resource guide](#).

To grant Humana access:

- Sign in to the [CAQH website](#)
- Select the **authorization** tab
- Confirm that Humana is listed as an authorized health plan; if not, check the box to grant us the access we need to verify your credentials.

#### Complete your enrollment application with Humana

After you've confirmed your enrollment with IHCP and have granted access for Humana to view your CAQH credentialing application, you can complete and submit your enrollment application to verify eligibility for participation in Humana's network.

#### Indiana Medicaid

##### Humana Healthy Horizons in Indiana

- Availity Essentials secure portal →
- Behavioral and physical health clinical coverage policies →
- Provider claims and payments →
- Compliance training →
- Archived documents →
- News and announcements →
- Pharmacy materials →
- Prior authorization resources →
- Provider resources →
- Training resources →
- Contact us →

#### Sign up for news, announcements and alerts for Indiana PathWays for Aging

[Sign up now](#) →

Humana Healthy Horizons in Indiana Provider website: [Humana.com/HealthyIN](https://www.humana.com/HealthyIN)

# Humana Alerts for News and Announcements



Sign up for news, announcements and alerts

Provider/organization name \*

Tax identification number (TIN) \*

Email \*

Submit → [Clear](#)

A sign-up form with a green border. The title is "Sign up for news, announcements and alerts". It contains three input fields: "Provider/organization name \*", "Tax identification number (TIN) \*", and "Email \*". At the bottom are two buttons: "Submit →" and "[Clear](#)".

Register Here: [Sign up for news, announcements, and alerts | Indiana Medicaid Providers](#)



# IHCP Resources

# Additional IHCP Resources – Modules & Bulletins

## Modules:

- [OMPP HCBS Module](#)
- [PathWays Billing Resource Guide](#)
- [Home- and Community-Based Services Billing Guidelines](#)

## Bulletins:

- [BT202411](#) - SFC Billing & Processing - Published 1/30/2024
- [BT202449](#) - Required claim note for specific providers - Published 4/23/2024
- [BT202509](#) - Waiver & Non-Waiver provider billing - Published 1/28/2025

[Sign up for FSSA Updates](#) | [Bulletins & Modules](#)

# Additional IHCP Resources – Useful Links

- [Indiana Medicaid: Providers: IHCP Quick Hits](#)
  - Short informational videos on a variety of topics
- [IHCP Provider Portal](#)
  - IHCP enrollment details, confirm member eligibility, & review various tools



Please take a few minutes to complete the event and session evaluations!



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Healthy Horizons.



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