

Indiana PathWays for Aging Overpayments and Recoupments

2026 IHCP Works Annual Seminar



Agenda

- Introductions
- Overpayments
- Recoupment Process
- Availability Overpayment Tool
- Contacts
- Q&A

Introductions

Stephen Price

Associate Director, Provider Engagement

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Krista Elmore

Senior Claims Research & Resolution

Professional

INMedicaidClaimsResearch@humana.com

Humana Healthy Horizons in Indiana PathWays for Aging Long-Term Services and Supports/Home and Community-Based Services Provider Representatives Map

Region 1

INLTSSProviderRelations T1@humana.com

Katelynn Koedyker - (219) 296-8295

Region 2

INLTSSProviderRelations T2@humana.com

Cierra Rich - (260) 298-4348

Region 3

INLTSSProviderRelations T3@humana.com

Taylor Mitchell - (463) 265-2405

Bria Steele - (317) 677-2693

Region 4

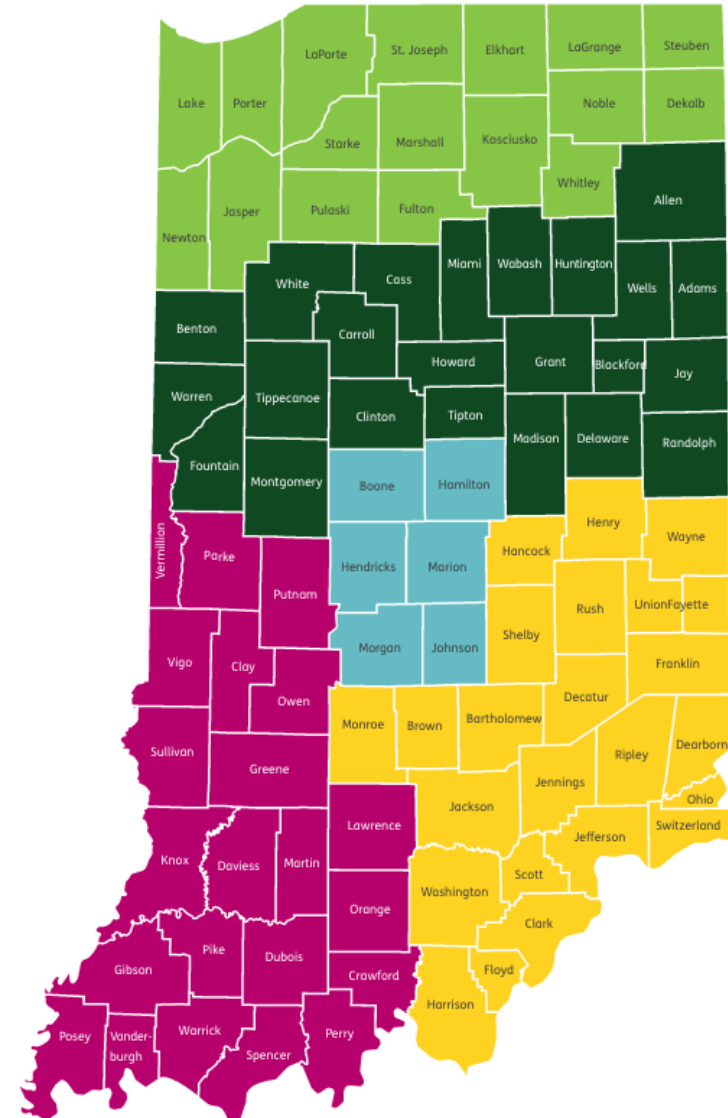
INLTSSProviderRelations T4@humana.com

Mark Eastridge - (812) 697-8583

Region 5

INLTSSProviderRelations T5@humana.com

Kimberly Dunn - (812) 914-3104



Humana Healthy Horizons in Indiana PathWays for Aging
Long-Term Services and Supports/Home and
Community-Based Services Provider Representatives Map

Skilled Nursing Facilities

INLTSSNursingFacilityAssistedLiving@humana.com
Jessie Iden - (574) 275-3573

Assisted Living

INLTSSNursingFacilityAssistedLiving@humana.com
Jessie Iden - (574) 275-3573

Hospice

INLTSSAdultDayHospice@humana.com
Brittani Fox - (219) 216-5588

Adult Day Services

INLTSSAdultDayHospice@humana.com
Kimberly Dunn - (812) 914-3104

Attendant Care/Home and Community Assistance

INLTSSPersonalCareAttendant@humana.com
Cierra Rich - (260) 298-4348
Bria Steele - (317) 677- 2693

Humana Healthy Horizons in Indiana Behavioral Health, Physical Health and Nursing Facility Provider Representatives Map for Indiana PathWays for Aging

Region 1

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Brittani Fox - (219) 216-5588

Region 2

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Hannah Lummis (463) 324-6074

Region 4

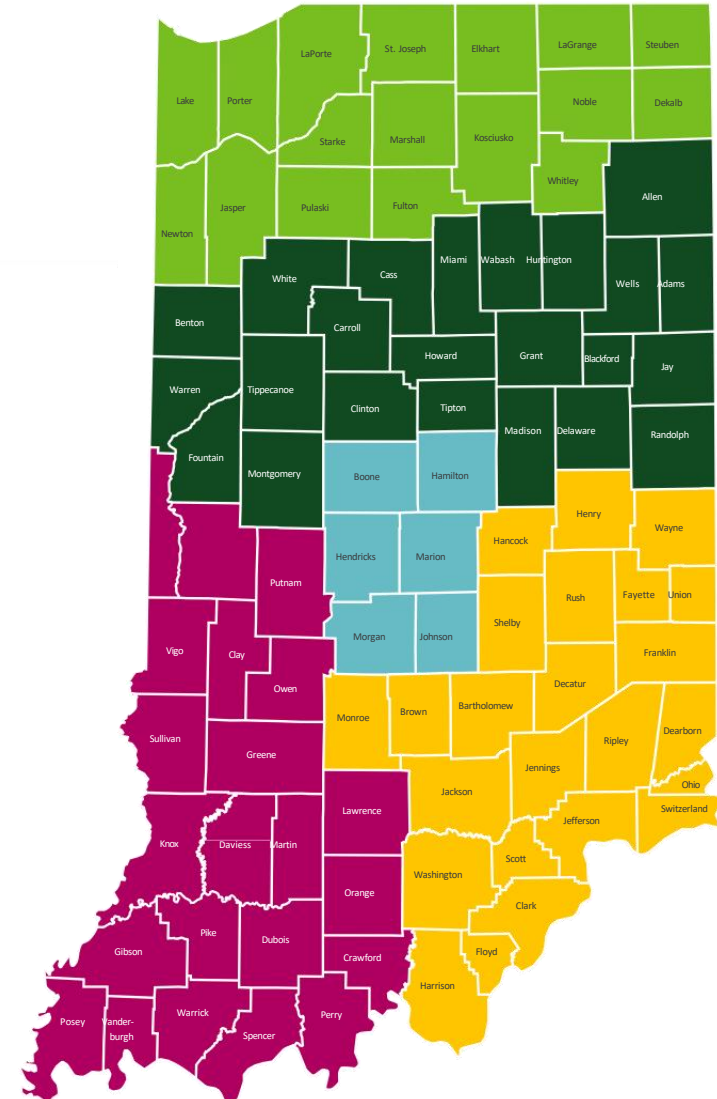
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Mychelle Christian (812) 204-9285

Region 5

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Mychelle Christian (812) 204-9285





Overpayments



Overpayment Overview

At Humana Healthy Horizons, we strive to offer our members high-quality healthcare at affordable rates. To achieve this goal, Humana Provider Payment Integrity (PPI) reviews Humana's claims payments for accuracy and requests refunds if claims are overpaid or paid in error.

Common reasons for overpayments include, but are not limited to:

- An issue regarding the coordination of member benefits
- Retroactive eligibility and enrollments for the member
- Medical record reviews
- Member plan termination
- Subrogation (typically claims related to accidents, injuries, or other third-party liability)
- Duplicate payments
- Medical coding reviews
- Incorrect provider reimbursement
- Fraud, waste and abuse detection

Recoupment Letter

Humana.

<Insert return address>

<Date of letter>

<Recipient name>

<Recipient address>

<Recipient address continued>

<City, state ZIP code>

RE: Refund request — see enclosed chart

Dear <Recipient name>:

Humana strives to offer its members high-quality healthcare at affordable rates. To facilitate this objective, we [review](#) our payments for accuracy. While it is certainly our desire to pay all claims accurately the first time, we occasionally find some claims were paid incorrectly. As part of a recent review, we determined the claims referenced on the enclosed chart were overpaid by \$<overpayment amount>. The reasons for the overpayments are listed on the [chart](#). Please review your files with the enclosed chart.

If you agree with our findings, please send a refund, along with a copy of the chart, on or before the anticipated remit deduct date listed within the chart for each claim, to:

Humana
P.O. Box 931655
Atlanta, GA 31193-1655

If you do not agree with our findings, please follow the guidance found in the Special Messages section below.

If you [already](#) issued a refund check for these claims, please disregard this request and accept our thanks. If not, it is important that we hear from you to resolve this refund request and avoid having the overpaid amount deducted from future payments or referred [to](#) our outside collection agency.

If you prefer, you can call us [at 800-438-7885 \(TTY: 711\)](#). Representatives are available Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

Sincerely,

The Humana Provider Payment Integrity Department

Enclosure: Special Messages, Overpayment chart

Special Messages

Medicare and Commercial [claims](#)

If we do not hear from you, this will signal to us that you agree with our findings, and Humana will start deducting the overpayments from your future payments.

If you do not agree with these findings, wish to dispute this notice or have questions regarding an overpayment, you can manage Humana overpayments electronically with the Availity Essentials™ online overpayment application at www.availity.com/essentials.

To access the overpayments application, log in to Availity Essentials and select Claims & Payments → Overpayments. To get started with Availity Essentials, please visit Humana.com/ProviderSelfService.

Medicaid claims (excluding Kentucky)

If we do not hear from you, this will signal to us that you agree with our findings, and Humana will start deducting the overpayments from your future payments.

If you do not agree with these findings, wish to dispute this notice or have questions regarding an overpayment, you can manage Humana overpayments electronically with the Availity Essentials™ online overpayment application at www.availity.com/essentials.

To access the overpayments application, log in to Availity Essentials and select Claims & Payments → Overpayments. To get started with Availity Essentials, please visit Humana.com/ProviderSelfService.

Medicare regulations 42 C.F.R. §424.44(b) allow for exceptions to the one calendar year time limit for filing Medicare claims. Retroactive Medicare entitlement involving the state Medicaid agencies, where a state Medicaid agency recoups payment from a provider or supplier six months or more after the date the service was furnished to a dually eligible beneficiary, is an allowed exemption. Refer to Chapter 1, subsection 70.7 of the Medicare Claims Processing Manual for qualifying exceptions and associated billing instructions.

Kentucky Medicaid claims

If we do not hear from you, this will signal to us that you agree with our findings, and Humana will begin to remit deduct the overpayments from your future payments.

If you do not agree with these findings, you have the right to appeal. Appeals must be received within 30 calendar days from date of this notice. To submit an appeal, please detail your organization's desire to appeal and include all supporting documentation for consideration. You may submit via:

- Fax: **800-949-2961**
- Mail: Humana Healthy Horizons® in Kentucky
Grievances and Appeals department
P.O. Box 14546
Lexington, KY 40512-4546
- Online: Visit Availity Essentials™ at www.availity.com.
O Go to Claims & Payments

If you have medical records you would like to submit or want to manage Humana overpayments electronically, you can do so at Availity Essentials. You can find the application on the portal under Claims & Payments. To get started with Availity Essentials, please visit Humana.com/ProviderSelfService. If you cannot upload the record(s), you can submit via:

- Fax: **866-305-6655**
- Mail: Humana Medical Records Management
P.O. Box 14465
Lexington, KY 40512-4465

Recoupment Letter Continued

PPI Overpayment Chart: Provider Review

Created <insert date>

Humana internal provider ID number: <Insert Provider ID>

L1 Action From <insert date>

Provider tax ID: <Insert Provider Tax ID>

Control Number <insert number>

Provider Name: <Insert Provider Name>

SUF	REL	Claim number	Date of service	Overpaid amount	Recovery item number	Reason	Source	LOB	MKT	PLT CD
Patient: Medicaid ID: Member Date of Birth: Patient Acct. Number: Payment Type: Check Date: Check Number: Original Paid Amount: Legal Entity: Group Number: Coverage Type: Anticipated Remit Deduct Date: Note: Overpayment Reason(s): <insert reason>										
Provider Total							\$<insert total>	Count <insert count>		



Recoupment Process



Recoupments

Once a claim has been identified as overpaid, Humana will send a written notice of overpayment within 48 hours for each of Humana's products. Humana follows state regulations, provider contract requirements and Centers for Medicare & Medicaid Services (CMS) provisions when processing overpayments and recoupments.

Once an overpayment letter has been received, providers have 60 calendar days to choose between three options:

1. Dispute the overpayment with the Availity Essentials online overpayment application at www.availity.com/essentials
2. Refund the overpaid amount to our designated P.O. Box
3. Allow the overpayment to offset on future claims

Disputing Overpayments

For assistance with these issues, contact the Provider Payment Integrity (PPI) Department or manage requests through Availity.

- Go to [Availity Essentials](#)
- Select Claims & Payments
- Select Dispute Overpayment
- You must provide a description clearly explaining what is being disputed and why

If you do not see this option:

Contact your organization's Availity Essentials administrator

Request access to Claim Status

You may also contact the PPI Department at 800-438-7885 (TTY: 711) for a first-level review

Hours: Monday–Friday, 8 a.m.–8 p.m. ET

Confirmation will be provided within 7 business days; review may take up to 45 business days

If you already have a PPI reference number:

Email HelpPPI@Humana.com for a **second-level review**

Important: Do **not** send **initial requests** to HelpPPI@Humana.com



Refunding Overpayments

If a provider agrees with Humana Healthy Horizon's findings, a refund, along with a copy of the overpayment chart, on or before the anticipated remit deduction date listed can be sent to:

Humana
P.O. Box 931655
Atlanta, GA 31193-1655



Offsetting Overpayments

If a provider would prefer to have overpayments be deducted from future claims, Humana's Provider Payment Integrity team will initiate the offset after the 60-calendar day timeframe has elapsed.

Once an offset has occurred, that will be detailed on remittances where that future payment was used to reconcile the overpayment.

Details can also be found online via the Availity Essentials portal.



Availity Overpayment Tool



Managing Overpayments Online

The overpayment application on the Availity Essentials portal can help you manage overpayments. You can:

- Manage overpayment documentation and maintain case histories electronically.
- Reduce overpayment resolution time by managing overpayment requests from multiple payers.
- Request more information about or dispute an overpayment request.
- Sign up for notifications when you have an overpayment.
- View overpayment inventory in real-time.

The overpayment application is in the Availity Essentials portal under the claims and payments section. If you do not see the application, ask your organization's Availity administrator to grant you the 'Claim Status' role.



Accessing the Overpayment Application

Prerequisites for Accessing the Overpayments application:

- User(s) must be registered in Availity Essentials.
- The **Claims Payment Recovery** role must be assigned to the user(s) responsible for resolving claim overpayments.
- Roles can be assigned by an organization administrator through the 'Manage My Teams' application under their account in Availity Essentials.
- For providers to display in the preference configuration list, add them using 'Manage My Organization.'



Accessing the Overpayment Tool Continued

Once all **prerequisites have been met:**

- In the Availity Essentials secondary navigation bar, select **Claims & Payments | Overpayments**.
- On the Overpayments home page, review the overpayments that display from the payer in your worklist.
- Once the overpayment has been found, the online tool will allow you to make a decision there as well if you prefer to refund the amount or allow for an offset on future payments.



Contacts



Contact Us

Provider Payment Integrity (PPI): **800-438-7885 (TTY: 711)**

- Monday – Friday, 8 a.m. to 8 p.m., Eastern time

When contacting PPI, please be prepared to provide the following information:

- Healthcare provider's name, Tax Identification Number, phone and fax numbers
- Patient's name, member ID, and date of birth
- Claim number and date of service for the claim
- Brief description of request

More Ways to Contact

Provider Payment Integrity Email: HelpPPI@humana.com

- Please carbon copy (CC) your dedicated Provider Engagement Representative to ensure all have visibility and to ensure timely communication
- Please have your PPI reference number readily available

Humana Healthy Horizons Provider Engagement Email Address

- INMedicaidProviderRelations@humana.com

Provider Services - **866-274-5888 (TTY: 711)**

- Monday – Friday, 8 a.m. to 8 p.m., Eastern time



Questions?

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



