

Patient eligibility in provider self-service FAQs

Effective July 24, 2023, providers will no longer be able to obtain basic eligibility details from the call center and must instead use [provider self-service](#) or our automated system at (800) 444-5445. Basic eligibility verification inquiries sent via secure message or chat will also be directed back to self-service methods.

What is considered a basic eligibility verification inquiry?

Basic eligibility details include information available in self-service or our automated IVR system, like benefit and coverage types, sponsor information, effective dates, copay and cost-share information, catastrophic cap, deductibles and Other Health Insurance (OHI) information.

Can providers still call in to discuss other issues related to eligibility?

Yes. Any phone calls that are not considered basic eligibility inquiries will be answered as usual.

Where can I find more information about how to register for a provider self-service account?

Find details [here](#).

What if I already have an account but no longer have the login information?

[Visit](#) self-service. Select, “Forgot User ID” and follow the steps.

What type of eligibility information can be verified in self-service?

Providers can view the patient’s DOB, eligibility status, program/coverage/group type, effective dates and information regarding the patient’s Primary Care Manager (PCM), cat cap and deductible. You can also view sponsor information - name, branch of service, rank and region of enrollment.

Note: If the name of the sponsor and the beneficiary you are verifying differ, this is an indicator the patient may be a family member of the Active Duty Service Member (ADSM).

Can I access provider self-service online from an overseas IP address?

No. Providers and/or third-party agencies contracted by the provider that have overseas IP addresses (a unique address that identifies a device on the internet or a local network) will not have access to Humana Military’s provider self-service, and those eligibility verification inquiries will continue to be performed by calling (800) 444-5445.

What information will I need to verify eligibility when using the IVR automated system via phone?

To access beneficiary eligibility details in IVR, providers must have their TIN or National Provider Identifier (NPI), sponsor ID or 11-digit DoD benefits number, and date of birth (DOB).

Calls originating outside of the United States will use the exit code of the country they are calling from, then dial (502) 318-9986. Please be advised that this phone number is not toll-free, and you will be responsible for any charges for making the call.

NOTE: Overseas IP addresses will also be able to use this automated phone function.

Can secure self-service messaging be used to inquire about basic eligibility details?

No. You will be redirected back to provider self-service or IVR.

Where else can I find more educational information about this topic?

For more information on this topic, see the [Patient eligibility and out-of-pocket costs webinar](#).

For more detailed instruction on how to access this information in provider self-service, see the [Provider eligibility FAQs](#).

For additional information, visit the [Policy Update](#).