Humana
Healthy Horizons®
in Kentucky

Network Notification – Humana Healthy Horizons in Kentucky

Notice date:

To: Humana Healthy Horizons® in Kentucky Provider Network

From: Humana Healthy Horizons in Kentucky

Subject: Medicaid bypass lists for Medicare noncovered codes

Effective date:

The Kentucky Department for Medicaid Services (DMS) developed the Medicaid Bypass Lists for Medicare noncovered codes to allow healthcare providers to bill Medicaid managed care organizations directly without the requirement to provide an Explanation of Benefits or Medicare primary payer information on the claim. Kentucky DMS announces updates to these lists with varying effective dates. Humana Healthy Horizons in Kentucky initiates configuration updates based on the changes described in the list update.

From time to time, the Kentucky Department for Medicaid Services (Kentucky DMS) makes updates to their Medicaid bypass lists for Medicare noncovered codes that may contain retroactive effective dates. Humana Healthy Horizons® in Kentucky does not adjust previously paid claims in accordance with retroactive fee schedule modifications issued by Kentucky DMS.

These Kentucky DMS lists are specific to provider type, claim type, procedure, revenue, diagnosis codes and date range. As Medicare does not typically cover these codes, Medicaid acts as primary payer without the need for proof of Medicare claim processing. Claims submitted that do not meet all bypass requirements are denied when submitted to Humana Healthy Horizons without a required Explanation of Medicare Benefits for appropriate coordination of benefits.

To download copies of the most up to date bypass lists, please select the following websites and save the linked spreadsheets:

- **Provider Type 30** (01/23/2025) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_1_23_2025.xlsx)

- **All Provider Types (Except Provider Type 30)** (01/23/2025)

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- **Provider Type 30** (Jan. 17, 2024) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_Jan_17_2024_5429671.xlsx)
- **All Provider Types** (Jan. 17, 2024) (Except Provider Type 30) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/All_Provider_Types_Jan_17_2024_Except_Provider_Type_30_5429658.xlsx)
- **Provider Type 30** (March 17, 2022) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_Mar_17_22_4733430.xlsx)
- **All Provider Types (Except Provider Type 30)** (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/All_Provider_Types_Except_Provider_Type_30_4733417.xlsx)
- **Provider Type 30** (Oct. 12, 2021) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_Oct1221_4615273.xlsx)
- **All Provider Types (Except Provider Type 30)** (Oct. 12, 2021) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/All_Prv_types_except_prv_type_30_Oct1221_4615208.xlsx)
- **Provider Type 30** (Sept. 8, 2021) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_Sept821_4734002.xlsx)
- **All Provider Types (Except Provider Type 30)** (Sept. 8, 2021) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/All_Provider_Types_Except_Provider_Type_30_Sep821_4733989.xlsx)
- **Provider Type 30** (Dec. 15, 2020) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/Provider_Type_30_Dec1520_3967496.xlsx)
- **All Provider Types (Except Provider Type 30)** (Dec. 15, 2020) (https://aempublish.humana.com/content/dam/finished-pieces/miscellaneous-finished-pieces/medicaid-product/kentucky/provider/859-ky-bypass-documents/All_Provider_Types_Except_PRV_Type_30_Dec1520_3967548.xlsx)

If you have questions regarding this information, please call Provider Services at **800-444-9137**, Monday through Friday, 8 a.m. to 6 p.m., Eastern time.