

## Network Notification—Humana Healthy Horizons in Kentucky

**Notice date:** March 20, 2026  
**To:** Humana Healthy Horizons in Kentucky provider network  
**From:** Humana Healthy Horizons in Kentucky  
**Subject:** Humana coverage policy updates

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Humana Healthy Horizons® in Kentucky is giving notice of the following clinical coverage policies, updated by Humana’s policy team. These policies have been reviewed and approved by the Kentucky Medicaid Utilization Management Committee.

**Kentucky Medicaid retired Humana coverage policies – Effective date: 3/16/2026**

- HUM-0531-024 Pharmacogenomics - Cytochrome P450 Polymorphisms and VKORC1

**Newly approved Humana coverage policies – Effective date: 3/18/2026**

- HUM-2265-001 Amtagvi (lifileucel)

If you have questions about the updated policy list, please email our Provider Relations staff at [KYMCDPR@humana.com](mailto:KYMCDPR@humana.com) or call Provider Services at 800-444-9137, Monday – Friday, 8 a.m. – 6 p.m., Eastern time.

Thank you for the continued care of your Humana Healthy Horizons in Kentucky-covered patients.