

## Network Notification – Humana Healthy Horizons in Kentucky

**Notice date:** June 21, 2022  
**To:** Kentucky Medicaid healthcare providers  
**From:** Humana Healthy Horizons® in Kentucky  
**Subject:** Medicaid bypass lists for Medicare non-covered codes

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The Kentucky Department for Medicaid Services (DMS) developed the Medicaid Bypass Lists for Medicare Non-covered Codes to allow healthcare providers to bill Medicaid managed care organizations directly without first billing Medicare for coordination-of-benefit requirements. Kentucky DMS announces updates to these lists with varying effective dates. Humana Healthy Horizons initiates configuration updates based on the changes described in the list update. Once complete, Humana Healthy Horizons will reprocess claims based on the effective dates published 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 cover these codes, Medicaid acts as primary payer. Claims submitted that do not meet all bypass requirements are denied when submitted to Humana Healthy Horizons in Kentucky without a required Medicare Explanation for Member Benefit (EOMB) for appropriate coordination of benefits.

To download copies of the bypass lists, please click on the following links and save the linked spreadsheets:

- **Provider Type 30 (3/17/2022)**
- **All Provider Types (Except Provider Type 30) (3/17/2022)**
- **Provider Type 30 (10/12/2021)**
- **All Provider Types (Except Provider Type 30) (10/12/2021)**
- **Provider Type 30 (9/8/2021)**
- **All Provider Types (Except Provider Type 30) (9/8/2021)**
- **Provider Type 30 (12/15/2020)**
- **All Provider Types (Except Provider Type 30) (12/15/2020)**

If you have questions regarding this notification, please call provider services at **800-444-9137**. Hours of operation are Monday through Friday, 7 a.m. to 7 p.m., Eastern time.