



Network Notification – Kentucky Medicaid

Notice date: August 11, 2020
To: Kentucky Medicaid healthcare providers
From: Humana Health Plan
Subject: Humana urine drug testing (UDT) policy, effective July 1, 2020
Effective date: July 1, 2020

Humana implemented the Kentucky Department for Medicaid Services' [Urine Drug Testing \(UDT\) Policy](#), effective July 1, 2020. Humana now processes these claims for payment as indicated by the department's policy, per the provider's Humana contract agreement and/or the Humana out-of-network payment policy. Once the enrollee exceeds the benefit limit as established by the department, Humana denies the claim.

Providers may appeal the claim denial. Humana recommends that providers submit medical records as supporting documentation to prove the medical necessity for the service with the appeal request.

Additionally, claims paid for UDT services that exceed the enrollees' benefit are reviewed for recovery. Humana recommends that providers submit medical records as supporting documentation to prove the medical necessity for the service when disputing an overpayment recovery.

If a provider does not agree with the decision on a processed claim, the provider has **180 calendar days** from the date of the original claim submission denial to file an appeal. For more information on appeals, please refer to the [Kentucky Medicaid Provider Manual](#).

Written submission

Providers can submit appeals in writing to:
Humana Provider Correspondence
Grievance and Appeals Department
P.O. Box 14546
Lexington, KY 40512-4546
Fax: 1-800-949-2961

Digital submission

Providers can submit encrypted appeal supporting documentation online via [Availity](#). Providers also can check appeal status via [Availity](#).

If you have questions regarding this notification, please call provider services at 1-800-444-9137. Hours of operation are 7 a.m. to 7 p.m. Eastern time.