

Humana Healthy Horizons in Florida Prior authorization and Notification List (PAL)

Effective date: July 1, 2025

Revision date: August 27, 2025

Humana Healthy Horizons® in Florida PAL		
Category	Details/notes	Codes and comments
Inpatient admissions	Acute hospital	Transplants and planned inpatient medical and surgical admissions
	Acute rehab facility	
	Long-term acute care	
	Skilled nursing facility	
	Mental health, substance use disorder and partial hospital/residential treatment	Access Behavioral Health manages north Florida (region A). Carelton Behavioral Health Manages central and south Florida (regions B, C and E).
Advanced imaging	Computerized tomography (CT) scan	70470, 71270, 74170, 74178
	Magnetic resonance imaging (MRI) scan	72141, 72146, 72148, 72158, 73221, 73721
Behavioral health <i>Managed by Humana</i>	Applied behavioral analysis (ABA) therapy	0362T, 0373T, 97151, 97152, 97153, 97154, 97155, 97156, 97158
Behavioral health <i>Managed by Access Behavioral Health</i>	Neuropsychological testing, psychological testing Managed by Access Behavioral Health	Access Behavioral Health manages north Florida (region A). 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146 Phone authorizations: 866-477-6725, Monday – Friday, 8 a.m. – 5 p.m., Eastern time Email: abhreferral@lifeviewgroup.com

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Behavioral health Phone authorizations: 844-265-7590 A licensed clinician is available 24 hours a day. During regular business hours (Monday – Friday, 8:30 a.m. – 6 p.m., Eastern time).	Electroconvulsive therapy	90870
	Psychological testing	96110, 96112, 96113, 96116, 96121, 96125, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146
	Outpatient behavioral health treatment	97139, 97530, H0019, H0045, H2012, H2015, H2017, H2019, H2020, H2022
	Subacute Inpatient	H0008
	Acute residential substance abuse treatment for adults and adolescents	H2011
	Acute residential treatment	H2018
	Intensive outpatient (IOP)	H0015
	Partial hospitalization	H0035
	Ambulatory detoxification program	S9475
	Crisis intervention	S9485
	Community support services	H2030
	Alcohol and/or drug treatment	H2035
	Case management	T1016
	Targeted case management	T1017
	Other	S5145, T2015
Ancillary services	Nonemergent medical transportation: cross country, air, water and ambulance	A0426, A0428, A0430, A0431, A0435, A0436
Durable medical equipment	Beds and accessories	E0194 One Homecare Solutions manages south Florida regions G, H and I. Humana manages all other regions.
	Bone growth stimulators	E0747, E0748
	Cochlear and auditory brainstem implants	L8614, L8619, 69930
	Continuous glucose monitoring devices and supplies	A9276, A9277, A9278, A9279
	Cranial orthotics	S1040
	High frequency chest compression vest	E0483

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	Negative pressure wound therapy	E2402
	Non-invasive home ventilator	E0466
	Orthotics	L0482, L0484, L0642, L0648, L1833, L3761, L3916, L4210
	Prosthetics	21086, L5301, L5321, L5611, L5647, L5649, L5651, L5671, L5673, L5679, L5681, L5700, L5701, L5704, L5705, L5814, L5940, L5950, L5962, L5964, L5968, L5980, L5981, L5987, L5980, L5981, L5987, L6687, V2623
	Wearable cardiac devices	K0606
	Wheelchairs and scooters	E1002, E1161, E1229, E1234, E2374, K0005, K0008, K0800, K0801, K0812, K0821, K0822, K0823, K0825, K0827, K0835, K0841, K0843, K0849, K0856, K0861, K0862, K0898 One Homecare Solutions manages south Florida regions G, H and I. Humana manages all other regions.
Molecular diagnostic and genetic testing		0062U, 0063U, 0067U, 0242U, 0244U, 0245U, 81162, 81163, 81164, 81165, 81166, 81167, 81171, 81173, 81174, 81175, 81177, 81178, 81179, 81180, 81181, 81182, 81183, 81184, 81185, 81186, 81187, 81188, 81189, 81190, 81204, 81212, 81215, 81216, 81217, 81220, 81222, 81223, 81225, 81226, 81227, 81229, 81233, 81234, 81236, 81237, 81238, 81239, 81249, 81259, 81271, 81274, 81284, 81285, 81286, 81289, 81292, 81294,

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		81295, 81297, 81298, 81300, 81301, 81302, 81305, 81306, 81307, 81308, 81309, 81312, 81317, 81319, 81320, 81329, 81333, 81336, 81343, 81344, 81345, 81349, 81355, 81364, 81402, 81404, 81406, 81407, 81408, 81410, 81411, 81413, 81414, 81415, 81416, 81422, 81425, 81426, 81427, 81430, 81431, 81432, 81434, 81435, 81437, 81439, 81440, 81441, 81443, 81445, 81448, 81450, 81455, 81460, 81465, 81479, 81507, 81518, 81519, 81520, 81521, 81522, 81523, 81535, 81539, 81541, 81599, 86305
Outpatient services	Diagnostic esophagogastroduodenoscopy (EGD) or esophagoscopy (patients 59 and younger only, includes site-of-service evaluation)	43191, 43202
	Electroencephalogram	95812, 95813, 95816, 95819
	Infertility testing and treatment	58350, 58555, 58560, 58660, 58673, S4015
	Physical, occupational and speech therapy	92507, 92508, 92520, 92524, 92526, 92607, 92608, 92609, 92611, 92618, 92621, 92627, 92630, 92633, 95851, 96105, 97010, 97012, 97014, 97016, 97022, 97024, 97026, 97028, 97033, 97034, 97036, 97110, 97112, 97113, 97116, 97150, 97530, 97533, 97537, 97542, 97545, 97546, 97750, 97755, 97760, 97761, 97763, G0129, G0237, G0283, S8990, S9117, S9152, V5362, V5363, V5364
	Routine maternity care	Notification only
Skin and tissue substitutes		Q4101, Q4102, Q4104, Q4106, Q4112, Q4121, Q4128, Q4132,

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		Q4133, Q4137, Q4151, Q4186, Q4187
Surgery	Blepharoplasty	67900, 67901, 67904, 67917, 67950
	Breast procedures	19300, 19303, 19316, 19318, 19325, 19328, 19350, 19361, 19364, 19370, 19371, 19380 Excludes breast reconstruction following medically necessary mastectomy for breast cancer.
	Lipectomy	15838, 15839
	Obesity surgery	43631, 43632, 43633, 43644, 43645, 43648, 43770, 43774, 43775, 43845, 43848, 64590
Chimeric antigen receptor (CAR) T-cell therapy and gene cell therapies		38241, 38999, C9399, J3392, J3393, J3394, J3490, J3590, Q2041, Q2042, Q2056, XW033C7, XW0338A, XW033G7, XW033H7, XW033J7, XW033K7, XW033L7, XW033M7, XW033N7, XW0438A, XW043C7, XW043G7, XW043H7, XW043J7, XW043K7, XW043L7, XW043M7, XW043N7, XW133J8, XW143J8 Humana National Transplant Network requests can be submitted via: • Fax at 502-508-9300 • Telephone at 866-421-5663 • Email to transplant@humana.com
Home health/home infusions		99344, 99375, 99501, 99502, 99503, 99504, 99505, 99506, 99507, 99511, 99601, 99602, G0151, G0152, G0153, G0155, G0157, G0158, G0299, G0300, G0494, S5100, S5110, S5165,

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		S5180, S5181, S9001, S9097, S9098, S9122, S9123, S9124, S9127, S9128, S9129, S9131, S9208, S9209, S9211, S9212, S9213, S9214, T1002, T1004, T1019, T1020, T1021, T1028, T1030, T1031, T1502, T1503 One Homecare Solutions manages south Florida regions G, H and I. Humana manages all other regions.
Transplant		0018M, 0055U, 0087U, 0088U, 0118U, 02WA3QZ, 02WA4QZ, 0319U, 0320U, 0584T, 0585T, 0586T, 0664T, 0665T, 0666T, 0667T, 0668T, 0669T, 0670T, 32850, 32851, 32852, 32853, 32854, 33927, 33928, 33929, 33935, 33945, 38205, 38206, 38230, 38232, 38240, 38243, 44135, 47135, 48160, 48550, 48554, 48556, 50300, 50320, 50340, 50360, 50365, 50370, 50547, 81370, 81371, 81372, 81373, 81374, 81375, 81376, 81377, 81378, 81379, 81380, 81381, 81382, 81383, 81560, 81595, G0341, G0342, G0343, L8698, Q2053, Q2054, Q2055, S2053, S2054, S2060, S2065, S2102, S2142 Humana National Transplant Network requests can be submitted via: • Fax at 502-508-9300 • Telephone at 866-421-5663 • Email to transplant@humana.com

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Ventricular assist devices (VADs)		33975, 33976, 33979, 33981, 33982, 33983 Humana National Transplant Network requests can be submitted via: • Fax at 502-508-9300 • Telephone at 866-421-5663 • Email to transplant@humana.com
Specialty drugs	• Prior authorization is required for specialty drugs listed when delivered in a provider's office, clinic, outpatient or home setting. • To request prior authorization or provide notification, please access the fax forms at Humana's prior authorization for professionally administered drugs webpage.	