



Effective date: July 1, 2024

Revision date: May 22, 2025

Humana Healthy Horizons [®] in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
Nonparticipating providers	Nonemergency services	
Inpatient admissions	Elective inpatient procedures	
	All admissions (hospitals, rehab facilities, long-term acute care, inpatient hospice, transplant, and planned inpatient medical and surgical admissions)	Preauthorization requests for transplants will be reviewed by Humana's National Transplant Network and can be submitted by fax to 502-508-9300 , by phone to 866-421-5663 or by email to transplant@humana.com For obstetrical admission preauthorization and notification clarification, please see the note following this grid. For infants admitted to a NICU or Special Care Nursery, notify Progeny Health by fax to 866-610-2034
	All rehabilitative services	
	Skilled nursing facilities	
Behavioral health services	Inpatient admissions	All inpatient services
	Residential treatment	All residential treatment services
	Partial hospitalization	H0035
	Intensive outpatient programs (IOPs) Substance use disorder (SUD)	H0015
	Therapeutic behavioral health services and day treatment	H2020, H2012
	Assertive community treatment (ACT)	H0040
Cardiology	Cardiac catheterizations	93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93462, 93593, 93594, 93595, 93596, 93597

	Cardiac devices	0571T, 0572T, 0574T, 0715T, 33206, 33207, 33208, 33210, 33211, 33212, 33213, 33214, 33216, 33217, 33221, 33224, 33225, 33227, 33228, 33229, 33230, 33231, 33240, 33244, 33249, 33262, 33263, 33264, 33270, 33271, 33273, 33274, 33285, 33289, 33340, C1713, C1779, C1785, C1786, C1817, C1898, C1899, C2619, C2620, C2621
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Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
<u>Chiropractic services</u>		Please see the Chiropractor Fee Schedule on the Kentucky Cabinet for Health and Family Services (CHFS) Fee Schedule site .
<i>Reviewed by Tivity Health®</i>		
Medical supplies, equipment and accessories (MSEA), previously durable medical equipment (DME) services, rentals and repair Please note that in addition to the items identified here, all MSEA items costing more than \$750 are subject to retro-review. We require a signed clinical record submitted with your claim to perform the retro-review. Claims submitted without clinical records for these services are denied. Denials are only reconsidered through the claim appeal process with pertinent clinical records.	Airway clearance devices	E0482
	Augmentative and alternative communicative systems	E1902, E2500, E2502, E2504, E2506, E2508, E2511, E2512, E2599, L8505, L8510, V5336
	Beds and accessories	E0181, E0184, E0185, E0187, E0193, E0194, E0197, E0199, E0250, E0251, E0255, E0256, E0260, E0261, E0265, E0266, E0270, E0277, E0294, E0295, E0296, E0297, E0300, E0301, E0302, E0303, E0304, E0316, E0328, E0329, E0371, E0372, E0373, E0462, E0912
	Bone growth stimulator	E0747, E0748, E0760
	Cochlear and auditory implants	69930, L8614, L8619, L8627, L8628
	Continuous glucose monitoring devices and supplies	A9277, A9278, E2103, S1030, S1031, S1034
	CPAP/BiPAP	A9279, E0470, E0471, E0472, E0601
	Cranial orthotics	S1040
	Diabetic treatments and supplies	E0784
	Electrical stimulators	
	Heat/cold therapy devices	E0217, E0225, E0236, E0239
	High frequency chest compression vests	E0483
	Lifts	E0630, E0635
	Negative pressure wound therapy	E2402
	Neuromuscular stimulators	E0731, E0744, E0745, E0764, E0770
	Noninvasive home ventilators	E0466

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
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	Other implantable/semi-implantable hearing aids and devices	69710, 69711, L8691, L8694, V2627
	Orthotics	E0942, E0944, E0945, L0456, L0457, L0460, L0462, L0464, L0480, L0482, L0484, L0486, L0488, L0631, L0636, L0637, L0638, L0639, L0640, L0648, L0700, L0710, L0970, L0974, L0976, L0980, L0984, L0999, L1200, L1300, L1310, L1499, L1680, L1685, L1690, L1700, L1710, L1720, L1730, L1755, L1836, L1844, L1845, L1846, L1850, L1851, L1852, L1860, L1902, L2005, L2020, L2034, L2036, L2037, L2038, L2108, L2126, L2128, L2136, L2525, L2627, L2628, L2999, L3050, L3060, L3100, L3202, L3203, L3204, L3300, L3320, L3330, L3340, L3350, L3370, L3380, L3390, L3400, L3410, L3420, L3430, L3440, L3450, L3460, L3465, L3470, L3649, L3710, L3740, L3761, L3762, L3900, L3901, L3904, L3916, L3918, L3925, L3930, L3971, L3981, L3999, L4000, L4010, L4020, L4030, L4040, L4045, L4050, L4055, L4060, L4070, L4080, L4090, L4100, L4110,

		L4130, L4210, L4398, L4631, E1801, E1802, E1805, E1806, E1810, E1811, E1815, E1816, E1818, E1825, E1830
	Prosthetics	L5010, L5020, L5050, L5060, L5100, L5105, L5150, L5160, L5200, L5210, L5220, L5230, L5250, L 5270, L5280, L5301, L5321, L5331, L5341, L5400,

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
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		L5500, L5505, L5510, L5520, L5530, L5535, L5540, L5560, L5570, L5580, L5585, L5590, L5595, L5600, L5610, L5611, L5613, L5614, L5616, L5617, L5639, L5643, L5647, L5649, L5651, L5671, L5673, L5679, L5681, L5683, L5700, L5701, L5702, L5704, L5705, L5707, L5724, L5726, L5728, L5780, L5782, L5785, L5790, L5795, L5814, L5822, L5824, L5826, L5828, L5830, L5840, L5845, L5848, L5856, L5857, L5858, L5859, L5930, L5940, L5950, L5962, L5964, L5966, L5968, L5975, L5976, L5979, L5980, L5981, L5987, L5988, L5990, L5999, L6000, L6020, L6026, L6050, L6055, L6100, L6110, L6120, L6130, L6200, L6205, L6250, L6300, L6310, L6320, L6350, L6360, L6370, L6380, L6382, L6384, L6400, L6450, L6500, L6550, L6570, L6580, L6582, L6584, L6588, L6590, L6621, L6624, L6638, L6686, L6687, L6693, L6696, L6697, L6707, L6709, L6712, L6713, L6714, L6721, L6722, L6881,

		L6882, L6883, L6890, L6900, L6905, L6910, L6915, L6920, L6930, L6935, L6940, L6945, L6950, L6955, L6960, L6965, L6970, L6975, L7007, L7008, L7009, L7040, L7045, L7170, L7180, L7181, L7185, L7186, L7190, L7191, L7259, L7499, L8044, L8499, L8699, V2623, V2627, 21086
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Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
	Pneumatic compression	E0651, E0652
	Respiratory aids and supplies	E0455
	Speech devices	E2510
	Spinal cord stimulators	63650, 63655, 63663, 63664, 63685, 63688, C1816, C1820, C1822, L8679, L8680, L8682, L8685, L8686, L8687, L8688
	Standing systems/devices	E0638
	Unlisted medical supplies, equipment and accessories	A9900, A9999, E1399
	Volume control ventilator	E0465
	Wearable cardiac devices (e.g., LifeVest®)	93228, 93229, 93241, 93242, 93243, 93244, 93245, 93246, 93247, 93248, 93745, K0606, K0607, K0608, K0609
	Wheelchairs and scooters (including power wheelchairs and all accessories)	E0968, E0983, E0986, E1002, E1003, E1004, E1005, E1006, E1007, E1008, E1009, E1010, E1011, E1012, E1015, E1016, E1017, E1035, E1050, E1060, E1070, E1083, E1084, E1085, E1086, E1087, E1088, E1089, E1090, E1092, E1093, E1100, E1110, E1161, E1170, E1172, E1190, E1195, E1200, E1220,

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		E1229, E1231, E1232, E1233, E1234, E1235, E1236, E1237, E1238, E1239, E1240, E1280, E1285, E1290, E1295, E2207, E2213, E2227, E2228, E2298, E2300, E2301, E2360, E2361, E2362, E2363, E2364, E2365, E2366, E2367, E2370, E2373, E2374, E2386, E2387, E2388, E2389, E2390, E2391, E2392, K0002, K0003, K0004, K0005, K0006, K0007, K0008, K0010, K0011, K0012, K0013, K0108, K0800, K0801, K0802, K0806, K0807, K0808, K0812, K0813, K0814, K0815, K0816, K0820, K0821, K0822, K0823, K0824, K0825, K0826, K0827, K0828, K0829, K0830, K0831, K0835, K0836, K0837, K0838, K0839, K0840, K0841, K0842, K0843, K0848, K0849, K0850, K0851, K0852, K0853, K0854, K0855, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0891, K0898

Miscellaneous/ unlisted	Miscellaneous/unlisted	39599, 41899, 42699, 43659, 44238, 45499, 45999, 47379, 48999, 49329, 49659, 51999, 55899, 58578, 58999, 69399, 87999
Plastic surgery/cosmetic	Breast surgery (excludes breast reconstruction following medically necessary mastectomy for breast cancer)	15830, 15832, 15834, 15835, 15836, 15839, 19300, 19305, 19306, 19316, 19318, 19325, 19328, 19350, 19355, 19361, 19364, 19367, 19368, 19369,

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
		19370, 19371, 19380, 19396, C1789, L8600, S2066, S2067, S2068
	Cosmetic and reconstructive services (Examples include blepharoplasty, rhinoplasty, otoplasty and abdominoplasty. Please note that this is not an all-inclusive list.)	15820, 15821, 15822, 15823, 15830, 15847, 17106, 17107, 17108, 30400, 30410, 30420, 30430, 30435, 30450, 30460, 30462, 30468, 30469, 67900, 67901, 67903, 67904, 67906, 67908, 67909, 67911, 67914, 67915, 67916, 67917, 67921, 67922, 67923, 67950, 69300, 69320
Ancillary services	Nonemergent medical transportation (NEMT)	A0090, A0130, A0200, A0426, A0428, A0430, A0431, A0435, A0436, S9960, S9961, T2001, T2003, T2005

	Breast cancer susceptibility proteins (BRCA) 1 and 2 and genetic/molecular diagnostic testing	81162, 81163, 81164, 81165, 81166, 81167, 81168, 81170, 81171, 81172, 81173, 81174, 81175, 81176, 81177, 81178, 81179, 81180, 81181, 81182, 81183, 81184, 81185, 81186, 81187, 81188, 81189, 81190, 81191, 81192, 81193, 81194, 81200, 81201, 81202, 81203, 81204, 81205, 81206, 81207, 81208, 81209, 81210, 81212, 81215, 81216, 81217, 81218, 81219, 81220, 81221, 81222, 81223, 81224, 81225, 81226, 81227, 81228, 81229, 81230, 81231, 81233, 81234, 81235, 81236, 81237, 81238, 81239, 81240, 81241, 81242, 81243, 81244, 81245, 81246, 81247, 81248, 81249, 81250, 81251, 81252, 81253, 81254, 81255, 81256, 81257, 81258, 81259, 81260, 81261, 81262,
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Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
		81263, 81264, 81265, 81266, 81267, 81268, 81269, 81270, 81271, 81272, 81273, 81274, 81275, 81276, 81277, 81278, 81279, 81283, 81284, 81285, 81286, 81287, 81288, 81289, 81290, 81291, 81292, 81293, 81294, 81295, 81296, 81297, 81298, 81299, 81300, 81301, 81302, 81303, 81304, 81305, 81306, 81307, 81308, 81309, 81310, 81311, 81312, 81313, 81314, 81316, 81317, 81318, 81319, 81320, 81321, 81322, 81323, 81324, 81325, 81326, 81327, 81328, 81329, 81330, 81331, 81332, 81333, 81334, 81335, 81336, 81337, 81338, 81339, 81340, 81341, 81342, 81343, 81344, 81345, 81346, 81347, 81348, 81350, 81351, 81352, 81353, 81355, 81357, 81360, 81400, 81401, 81402, 81403, 81404, 81405, 81406, 81407, 81408, 81410, 81411, 81412, 81413, 81414, 81415, 81416, 81417, 81418, 81419, 81422, 81425, 81426, 81427, 81430, 81431, 81432, 81434, 81435, 81437, 81439, 81440, 81441, 81442, 81443, 81445, 81448, 81449, 81450, 81451, 81455, 81456, 81460, 81465, 81470, 81471, 81479, 81490, 81493, 81503, 81504, 81509, 81510, 81511, 81512, 81514, 81518, 81519, 81520, 81521, 81522, 81525, 81529, 81535, 81538, 81539, 81546, 81551, 81554,

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
		81596, 81599, 86305, 0001U, 0003U, 0004M, 0005U, 0006M, 0007M, 0009U, 0012U, 0013U, 0014U, 0017M, 0018U, 0019U, 0021U, 0022U, 0023U, 0026U, 0029U, 0036U, 0037U, 0040U, 0045U, 0046U, 0047U, 0048U, 0049U, 0050U, 0053U, 0055U, 0056U, 0060U, 0062U, 0063U, 0067U, 0070U, 0071U, 0072U, 0073U, 0074U, 0075U, 0076U, 0078U, 0080U, 0084U, 0089U, 0090U, 0101U, 0102U, 0103U, 0105U, 0111U, 0113U, 0120U, 0129U, 0130U, 0131U, 0132U, 0133U, 0134U, 0135U, 0136U, 0137U, 0138U, 0152U, 0153U, 0154U, 0155U, 0156U, 0157U, 0158U, 0159U, 0160U, 0161U, 0162U, 0228U, 0229U, 0230U, 0231U, 0232U, 0233U, 0234U, 0235U, 0236U, 0237U, 0238U, 0239U, 0242U, 0244U, 0245U
	Electroencephalogram (EEG)	95812, 95813, 95816, 95819, 95822
	Diagnostic esophagogastroduodenoscopy or esophagoscopy (For patients younger than 59)	43191, 43193, 43197, 43198, 43202, 43239
	Physical therapy/occupational therapy/speech therapy Reviewed by EviCore	31579, 90901, 90912, 90913, 92507, 92508, 92511, 92520, 92523, 92524, 92526, 92534, 92606, 92607, 92608, 92609, 92611, 92612, 92613, 92614, 92615, 92616, 92617, 92618, 92621, 92626, 92627, 92630, 92633, 95851, 95852, 95992, 96105, 96125, 97010, 97012, 97014, 97016, 97018, 97022,

Humana Healthy Horizons [®] in Kentucky Preauthorization and Notification List		
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		97024, 97026, 97028, 97032, 97033, 97034, 97035, 97036, 97039, 97110, 97112, 97113, 97116, 97124, 97129, 97130, 97139, 97140, 97150, 97161, 97164, 97165, 97168, 97530, 97533, 97535, 97537, 97542, 97545, 97546, 97597, 97598, 97602, 97750, 97755, 97760, 97761, 97763, 97799, G0151, G0152, G0153*, G0157, G0158, G0159, G0160, G0161, G0281, G0282, G0283, G0329, G0451, G2168*, G2169*, S9128, S9152
	Respiratory therapy	G0239
	Bariatric surgery	43631, 43632, 43633, 43634, 43644, 43645, 43770, 43771, 43772, 43773, 43774, 43775, 43842, 43843, 43845, 43846, 43847, 43848, 43886, 43887, 43888
	All home health and home infusions	99344, 99375, 99501, 99502, 99503, 99504, 99505, 99506, 99507, 99511, 99601, 99602, B9002, B9004, B9006, B9998, B9999, G0155, G0299, G0300, G0494, G0495, S5100, S5110, S5165, S5180, S5181, S9001, S9097, S9098, S9122, S9123, S9124, S9127, S9208, S9209, S9211, S9212, S9213, S9214, T1004, T1019, T1020, T1021, T1028, T1030, T1031, T1502, T1503

Advanced imaging services <i>Reviewed by EviCore</i>	Cardiac imaging	C9762, C9763
	Computerized tomography (CT)	0042T, 0633T, 0634T, 0635T, 0636T, 0637T, 0638T, 0710T, 0711T, 0712T, 0713T, 0742T, 70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490, 70491, 70492, 70496, 70498, 71250, 71260, 71270, 71275, 72125, 72126, 72127, 72128, 72129, 72130, 72131, 72132, 72133, 72191, 72192, 72193, 72194, 73200, 73201, 73202, 73206, 73700, 73701, 73702, 73706, 74150, 74160, 74170, 74174, 74175, 74176, 74177, 74178, 74261, 74262, 74263, 75571, 75574, 75635, 76380, 76497, 77078, S8092

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
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	Computed tomography angiography (CTA)	75572, 75573
	Coronary computed tomographic	0623T, 0624T, 0625T, 0626T
	Magnetic resonance angiography (MRA)	70544, 70545, 70546, 70547, 70548, 70549, 71555, 72159, 72198, 73225, 73725, 74185, C8900, C8901, C8902, C8909, C8910, C8911, C8912, C8913, C8914, C8918, C8919, C8920, C8931, C8932, C8933, C8934, C8935, C8936
	Magnetic resonance imaging (MRI)	0609T, 0610T, 0611T, 0612T, 0648T, 0649T, 0697T, 0698T, 70336, 70540, 70542, 70543, 70551, 70552, 70553, 70554, 70555, 71550, 71551, 71552, 72141, 72142, 72146, 72147, 72148, 72149, 72156, 72157, 72158, 72195, 72196, 72197, 73218, 73219, 73220, 73221, 73222, 73223, 73718, 73719, 73720, 73721, 73722, 73723, 73725, 74181, 74182, 74183, 74712, 74713, 75557, 75559, 75561, 75563, 75565, 76390, 76391, 76498, 77021, 77022,

Humana Healthy Horizons [®] in Kentucky Preauthorization and Notification List		
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		77046, 77049, 77084, C8900, C8901, C8902, C8903, C8905, C8906, C8908, C8909, C8911, C8920, S8037, S8042
	Positron emission tomography (PET)	78429, 78430, 78431, 78432, 78433, 78459, 78491, 78492, 78608, 78609, 78811, 78812, 78813, 78814, 78815, 78816, G0219, G0235, G0252, S8085
	Single-photon emission computed tomography (SPECT)	78451, 78452, 78469
	3D rendering	76376, 76377
Other outpatient services	Chimeric antigen receptor (CAR) T-cell therapy	38241, 38999, C9399, J3490, J3590, Q2041, Q2042, Q2054, Q2055, Q2056, XW033C7, XW033G7, XW033H7, XW033J7, XW033K7, XW033L7, XW033M7, XW033N7, XW043C7, XW043G7, XW043H7, XW043J7, XW043K7, XW043L7, XW043M7, XW043N7, XW133J8, XW143J8
	Experimental and emerging technology	
	Prescribed pediatric extended care	T1025, T1026
	Transplant services	02WA3QZ, 02WA4QZ, 0018M, 0087U, 0088U, 0319U, 0329U, 0584T, 0585T, 0586T, 0664T, 0665T, 0666T, 0667T, 0668T, 0669T, 0670T, 32850, 32851, 32852, 32853, 32854, 33927, 33928, 33929, 33935, 33945, 33975, 33976, 33979, 33981, 33982, 38205, 38206, 38230, 38232, 38240, 38241, 38243, 44135, 47133, 47135, 48160, 48550, 48554, 48556, 50300, 50320, 50340, 50360, 50365, 50370, 50547, 81370, 81371, 81372, 81373, 81374, 81375,

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
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		81376, 81377, 81378, 81379, 81380, 81381, 81382, 81383, 81560, 81595, G0341, G0342, G0343, L8698, Q2053, S2053, S2054, S2060, S2065, S2102, S2142
	Private duty nursing (PDN)	T1000
	Vein procedures	0524T, 36465, 36466, 36468, 36470, 36471, 36473, 36474, 36475, 36476, 36478, 36479, 36482, 36483, 37500, 37700, 37718, 37722, 37735, 37760, 37761, 37765, 37766, 37780, 37785, S2202
	Termination of pregnancy (abortion)	01966, 59100, 59812, 59840, 59841, 59850, 59851, 59852, 59855, 59856, 59857
	Epidural injections (outpatient only)	62320, 62321, 62323, 64479, 64480, 64483, 64484, 64999
	Facet injections	0213T, 0214T, 0215T, 0216T, 0217T, 0218T, 64490, 64491, 64492, 64493, 64494, 64495, 64633, 64634, 64635, 64636, 64999
	Sacroiliac joint injections (More than two injections requires prior authorization.)	27096
	Trigger-point injections (More than eight injections requires prior authorization.)	20552, 20553
	Viscosupplemental (musculoskeletal)	Preauthorization required for 20610–20611 when used for viscosupplementation procedures regardless of viscosupplementation agent.
	Radiation therapy	77385, 77386, 77401, 77402, 77407, 77412, 77424, 77425, G6012, G6013, G6015

	Brachytherapy	0394T, 19296, 19297, 19298, 77750, 77761, 77762, 77763, 77767, 77768, 77770, 77771, 77772, 77778, 92974, 0395T, C2616, G0458
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Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
	Neutron beam	77423
	Proton beam therapy	77520, 77522, 77523, 77525
	Stereotactic radiation	32701, 61796, 61797, 61798, 61799, 63620, 77371, 77372, 77373
Surgeries	Foot surgeries: bunionectomy and hammertoe	26535, 26536, 28110, 28240, 28285, 28289, 28291, 28292, 28295, 28296, 28297, 28298, 28299, 28306, 28308, 28310, 28740, 28750, L8641
	Laparoscopic hiatal hernia repair	43280, 43281, 43282
	Neurostimulator	61850, 61860, 61870, 61880, 61885, 61886, 61888, 63650, 63655, 63661, 63662, 63663, 63664, 63685, 63688, 64553, 64555, 64561, 64566, 64568, 64569, 64570, 64575, 64580, 64581, 64585, 64590, 64595, 95970, 95971, 95972, C1823
	Orthopedic surgeries: hip, knee and shoulder arthroplasty	23472, 23473, 23474, 27125, 27130, 27132, 27134, 27137, 27138, 27437, 27438, 27440, 27441, 27442, 27443, 27445, 27446, 27447, 27486, 27487
	Orthopedic surgeries: hip, knee and shoulder arthroscopy	23929, 27299, 27412, 27599, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828, 29850, 29851, 29860, 29861, 29862, 29863, 29866, 29867, 29868, 29870, 29871, 29873, 29874, 29875, 29876, 29877, 29879, 29880, 29881, 29882, 29883, 29884, 29885, 29886, 29887, 29888, 29889, 29914, 29915, 29916, 29999, J7330, S2112, S2300

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
	Pain infusion pump	62324, 62325, 62326, 62327, 62350, 62351, 62360, 62361, 62362, 64999, C1772, C1891, C2626, E0782, E0783, E0785, E0786
	Spinal fusion, decompression, kyphoplasty and vertebroplasty	20999, 22100, 22101, 22102, 22103, 22116, 22206, 22207, 22208, 22210, 22212, 22214, 22216, 22222, 22226, 22510, 22511, 22512, 22513, 22514, 22515, 22526, 22527, 22532, 22533, 22534, 22548, 22551, 22552, 22554, 22556, 22558, 22585, 22586, 22590, 22595, 22600, 22610, 22612, 22614, 22630, 22632, 22633, 22634, 22800, 22802, 22804, 22808, 22810, 22812, 22818, 22819, 22830, 22840, 22841, 22842, 22843, 22844, 22845, 22846, 22847, 22848, 22849, 22853, 22854, 22856, 22857, 22858, 22859, 22860, 22861, 22862, 22867, 22868, 22869, 22870, 22899, 27279, 27280, 62287, 62380, 63001, 63003, 63005, 63011, 63012, 63015, 63016, 63017, 63020, 63030, 63035, 63040, 63042, 63043, 63044, 63045, 63046, 63047, 63048, 63050, 63051, 63055, 63056, 63057, 63064, 63066, 63075, 63076, 63077, 63078, 63081, 63082, 63085, 63086, 63087, 63088, 63090, 63091, 63101, 63102, 63103, 63170, 63172, 63173, 63180, 63182, 63185, 63190, 63191, 63197, 63200, 63250, 63251, 63252, 63265, 63266, 63267, 63268, 63270,

Humana Healthy Horizons® in Kentucky Preauthorization and Notification List		
Category	Details/notes	Codes and comments
		63271, 63272, 63273, 63275, 63276, 63277, 63278, 63280, 63281, 63282, 63283, 63285, 63286, 63287, 63290, 63295, 63300, 63301, 63302, 63303, 63304, 63305, 63306, 63307, 63308, 0095T, 0098T, 0164T, 0165T, 0202T, 0219T, 0220T, 0221T, 0222T, 0274T, 0275T, C1821, C2614, C9757, S2348, S2350, S2351
	Ventricular assist devices (VADs)	0451T, 0452T, 0453T, 0454T, 0455T, 0456T, 0457T, 0458T, 0459T, 0460T, 0461T, 0462T, 0463T, 33975, 33976, 33979, 33981, 33982, 33983 Preauthorization requests for transplants are reviewed by Humana's National Transplant Network and can be submitted by fax to 502-508-9300 , by phone to 866-421-5663 or by email to transplant@humana.com .

For infants admitted to **NICU and Special Care Nursery** notify **Progeny Health**. Notifications can be submitted by fax to 866-610-2034. For **obstetrical admissions**, Humana Healthy Horizons requests notification for admissions that exceed 48 hours for vaginal deliveries and 96 hours for cesarean sections to conduct concurrent review for care coordination and discharge planning.