

Humana Healthy Horizons in Louisiana Prior Authorization and Notification List (PAL)

After reading the applicable prior authorization requirements below, access services, codes and medication by selecting the appropriate link:

[2025 Louisiana Medicaid medical \(physical health\)/behavioral health prior authorization list](#)

[2025 Louisiana Medicaid provider administered medication prior authorization list](#)

The lists describe services and medications that are commonly reviewed and may require additional clinical information. Medications include those delivered in the physician's office, clinic, and outpatient or home setting.

Please note that "prior authorization"—also known as precertification, and preadmission—is a process through which the physician or other healthcare provider is required to obtain advance approval from the plan as to whether an item or service will be covered.

"Notification" refers to the process of the physician or other healthcare provider notifying Humana of the intent to provide an item or service. Humana requests notification to help coordinate care for Humana-covered patients. This process is distinguished from prior authorization. Humana does not issue an approval or denial related to a notification.

Investigational and experimental procedures usually are not covered benefits. Please consult the patient's Certificate of Coverage or contact Humana for confirmation of coverage.

Important notes:

- **Louisiana Medicaid members:**
 - In addition to the information noted above, certain services outlined in the Medicaid PAL may not be applicable for practitioners affiliated with an independent practice association (IPA) via a capitated or delegated arrangement. Please refer to your provider agreement for clarification.
 - Exclusions may change; please refer to [Humana.com/Provider](https://www.humana.com/Provider) for up-to-date information. Choose "Medical authorizations and referrals" and then the appropriate topic.
 - The PAL linked above applies only to **Humana Healthy Horizons® in Louisiana**. It does not apply to Humana commercial, Medicare or other state Medicaid plans.
- **Emergent services do not require a referral or prior authorization.**
- The absence of authorization and/or notification prior to the date of service could result in financial penalties for the practice and reduced benefits for the member, based on the healthcare provider's contract and the member's Certificate of Coverage.

Services or medications provided without prior authorization may be subject to retrospective medical necessity review. We recommend that an individual practitioner making a specific request for services or medications verify benefits and prior authorization requirements with Humana prior to providing services.

- **Except where noted via links on the following pages, prior authorization requests for medical services may be initiated by:**
 - Accessing [Avality Essentials](#) online (registration required)
 - Calling Humana Healthy Horizons in Louisiana at **1-800-448-3810** (available Monday through Friday, 7 a.m. to 7 p.m.)
 - Faxing the prior authorization form to **1-833-974-0059**

- **Except where otherwise noted via links on the following pages, prior authorization requests for behavioral health services may be initiated by:**
 - Calling the Behavioral Health Crisis Line at **1-844-461-2848**

- **Prior authorization requests for medications may be initiated by:**
 - CoverMyMeds (preferred) – requests submitted at www.CoverMyMeds.com
 - Faxing requests to **888-447-3430** (find request forms at Humana.com/medPA)
 - Phone **866-461-7273** (available Monday through Friday, 8 a.m. to 11 p.m. Eastern time)

This list is subject to change with notification. However, it may be modified throughout the year, without notification via the U.S. Postal Service, for additions of new-to-market medications or step-therapy requirements for medications.