

Humana Healthy Horizons® in South Carolina preauthorization and notification list (PAL)

Effective date: Jul. 1, 2025

Revision date: Apr. 1, 2025

Humana Healthy Horizons in South Carolina PAL		
Category	Details/notes	Codes and comments
Ablation	Cardiac ablation/electrophysiology study and ablation for bone, liver, kidney and prostate cancer	20982, 20983, 47370, 47371, 47380, 47381, 47382, 47383, 50250, 50541, 50542, 50592, 50593, 53850, 53852, 53854, 55873, 93650, 93653, 93654, 93656
Behavioral health	Alcohol and/or drug treatment – day treatment/partial hospitalization	H2035
	All residential admissions	All residential admissions
	Applied behavioral analysis (ABA) therapy	0362T, 0373T, 97153, 97154, 97155, 97157, 97158, 97156, H2019
	Assertive community treatment (ACT)	H0040
	Community support services	H0038, H2014, H2017, H2030, H2037, S9482
	Inpatient admissions	All inpatient admissions
	Intensive outpatient program (IOP)	H0015, S9480
	Partial hospitalization	H0035
	Psychological and neuropsychological testing (inclusive of development testing, neurobehavioral status exams and cognitive performance testing)	96116, 96121, 96125, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146
	Transcranial magnetic stimulation (TMS)	90869
Breast procedures	Other breast procedures (excludes breast reconstruction following medically necessary mastectomies for breast cancer)	11920, 11921, 11970, 11971, 19030, 19305, 19306, 19316, 19318, 19325, 19328, 19330, 19340, 19342, 19350, 19355, 19357, 19361, 19364, 19367, 19368, 19369, 19370, 19371, 19380
	Simple mastectomy and gynecomastia surgery	19300, 19303

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Cellular – including chimeric antigen receptor T-cell therapy (CAR T) – genetic, tissue and transplant therapies	Cellular – including CAR T – genetic, tissue and transplant therapies	38999, XW033N7, XW043K7, XW143G8, C9399, J3392, J3393, J3394, J3490, J3590, Q2041, Q2042, Q2053, Q2054, Q2055, Q2056, XS0438A, XW0338A, XW033C7, XW033G7, XW033H7, XW033J7, XW033K7, XW033L7, XW033M7, XW043C7, XW043H7, XW043J7, XW043L7, XW043M7, XW043N7, XW133G8, XW133J8, XW143J8 Preauthorization requests are reviewed by Humana National Transplant Network. You can submit requests by: <ul style="list-style-type: none"> • Fax: 502-508-9300 • Email: transplant@humana.com • Telephone: 866-421-5663 Monday – Friday, 8 a.m. – 5 p.m., Eastern time
Diagnostic/cardiac imaging	Myocardial perfusion imaging single-photon emission computed tomography (MPI SPECT)	78451, 78452
Diagnostic procedures	Capsule endoscopy	91110, 91111
	Diagnostic esophagogastroduodenoscopy (EGD) or esophagoscopy (for patients 59 and younger only; includes site-of-service evaluation)	43191, 43193, 43197, 43198, 43200, 43202, 43235, 43237, 43238, 43239, 43242, 43252, 43253, 43259
	Facility-based sleep studies – polysomnography (PSG)	95807, 95808, 95810, 95811
Durable medical equipment (DME)	Augmentative and alternative communication systems	E2500, E2502, E2504, E2508, E2510, E2512, E2599
	Beds and accessories	E0272, E0277, E0301, E0302, E0303, E0304, E0372, E0912

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Durable medical equipment (DME) <i>(Continued)</i>	Continuous glucose monitoring devices and supplies	A9277, A9278
	Continuous positive airway pressure (CPAP)/bilevel positive airway pressure (BiPAP)	E0470, E0471, E0472, E0601
	Cough-stimulating device	E0482
	Cranial orthotics	S1040
	Heat/cold therapy devices	E0217
	High-frequency chest compression vests	E0483
	Insulin infusion pump	A9274, A9276, E0784, E0787
	Lifts	E0630, E0635
	Neuromuscular stimulators	E0744, E0770
	Noninvasive home ventilators	E0466
Orthotics	E0942, L0456, L0457, L0458, L0460, L0462, L0480, L0482, L0484, L0486, L0624, L0629, L0631, L0632, L0634, L0636, L0637, L0638, L0639, L0640, L0648, L0700, L0810, L0820, L0830, L0859, L0970, L0974, L0976, L0980, L0984, L1000, L1200, L1300, L1310, L1499, L1681, L1685, L1686, L1690, L1720, L1730, L1755, L1834, L1836, L1845, L1846, L1848, L1850, L1852, L1860, L1902, L1907, L1932, L1945, L1950, L1951, L1960, L1970, L2000, L2005, L2010, L2020, L2030, L2034, L2036, L2037, L2038, L2060, L2108, L2126, L2134, L2350, L2526, L2628, L2999, L3202, L3203, L3204, L3370, L3410, L3420, L3430, L3440, L3450, L3460, L3649, L3671, L3710, L3720, L3730, L3740, L3761, L3762, L3763, L3765, L3766, L3900, L3901, L3904, L3905, L3916, L3918, L3925, L3930, L3961, L3967, L3971, L3975, L3976, L3977, L3978, L3981, L3999, L4000, L4010, L4020, L4045, L4050, L4055, L4060, L4070, L4080, L4090, L4110, L4130, L4210, L6380, L6382, L6384,	

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		L9900
	Pneumatic compression	E0651, E0652, E0655, E0656, E0657, E0660, E0667, E0668, E0670, E0675
	Prosthetics	21081, L5000, L5010, L5020, L5050, L5100, L5150, L5160, L5210, L5250, L5301, L5321, L5341, L5400, L5420, L5505, L5520, L5530, L5535, L5540, L5560, L5580, L5595, L5600, L5610, L5611, L5613, L5616, L5618, L5620, L5622, L5624, L5629, L5630, L5631, L5632, L5634, L5636, L5637, L5640, L5642, L5644, L5645, L5646, L5647, L5648, L5649, L5650, L5651, L5652, L5653, L5654, L5655, L5656, L5658, L5665, L5666, L5668, L5670, L5671, L5673, L5676, L5678, L5679, L5681, L5682, L5683, L5684, L5685, L5688, L5690, L5692, L5694, L5695, L5696, L5697, L5698, L5700, L5701, L5703, L5704, L5705, L5706, L5707, L5710, L5711, L5712, L5714, L5716, L5718, L5722, L5724, L5726, L5780, L5781, L5782, L5785, L5790, L5810, L5811, L5812, L5814, L5816, L5822, L5824, L5826, L5828, L5830, L5840, L5845, L5848, L5850, L5910, L5920, L5925, L5930, L5940, L5950, L5962, L5964, L5966, L5970, L5971, L5972, L5974, L5975, L5976, L5978, L5979, L5980, L5981, L5982, L5984, L5985, L5986, L5991, L6000, L6010, L6020, L6050, L6055, L6110, L6120, L6130, L6200, L6205, L6300, L6310, L6320, L6350, L6360, L6370, L6450, L6550, L6570, L6580, L6582, L6584, L6586, L6588, L6590, L6605, L6610, L6611, L6615, L6616, L6620, L6621, L6624, L6625, L6628, L6629, L6630, L6637, L6638, L6640, L6641, L6642, L6645, L6646, L6647, L6648, L6650, L6655, L6660, L6665, L6670, L6672, L6675, L6677, L6680, L6682, L6686, L6687, L6688,

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		L6689, L6690, L6691, L6692, L6694, L6695, L6696, L6697, L6698, L6703, L6706, L6707, L6708, L6709, L6711, L6712, L6713, L6714, L6721, L6722, L6805, L6810, L6883, L6884, L6885, L6890, L6900, L6905, L6910, L6915, L7400, L7402, L7403, L7405, L7510, L8035, L8499, L9900, V2623, V2627
Durable medical equipment (DME) <i>(Continued)</i>	Standing systems/devices	E0637, E0638, E0641, E0642
	Volume control ventilator	E0465
	Wearable/non-wearable cardiac devices (e.g., LifeVest [®])	93228, 93229, 93242, 93244, 93745, 93246, 93248, E0617, K0606
	Wheelchairs and scooters	E0968, E0983, E1002, E1005, E1007, E1008, E1010, E1011, E1012, E1015, E1050, E1060, E1070, E1161, E1229, E1231, E1232, E1233, E1234, E1235, E1236, E1237, E1238, E2207, E2213, E2227, E2228, E2301, E2310, E2311, E2312, E2321, E2322, E2325, E2330, E2331, E2343, E2359, E2360, E2361, E2362, E2363, E2364, E2365, E2366, E2367, E2368, E2369, E2370, E2372, E2373, E2374, E2375, E2376, E2383, E2386, E2387, E2388, E2389, E2390, E2391, E2392, K0007, K0011, K0014, K0108, K0669, K0813, K0814, K0815, K0816, K0820, K0821, K0822, K0823, K0824, K0825, K0827, K0828, K0829, K0835, K0836, K0837, K0841, K0842, K0843, K0848, K0849, K0850, K0851, K0852, K0853, K0856, K0857, K0858, K0859, K0860, K0861, K0862, K0863, K0864, K0868, K0869, K0870, K0871, K0877, K0878, K0879, K0880, K0884, K0885, K0886, K0890, K0898
Emerging technology/new indications for existing technology	Emerging technology/new indications for existing technology	31647, 31648, 31649, 31651, 93264

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Category	Details/notes	Codes and comments
Hearing aids	Hearing aids	V5011, V5020, V5090, V5211, V5212, V5213, V5214, V5215, V5221, V5264, V5275, V5299, 92551, 92552, 92553, 92555, 92556, 92563, 92568, 92570, 92579, 92582, 92583, 92587, 92588, 92590, 92591, 92592, 92593, 92594, 92595, 92601, 92602, 92611, 92620, 92621, 92625, 92650, 92651, 92652, 92653
Home health/home infusion	Home health/home infusion	<p>Preauthorization required after five visits for the following codes:</p> <p>99344, 99501, 99502, 99503, 99504, 99505, 99506, 99507, 99509, 99511, 99512, 99602, S5165, S9001, S9128, S9129, S9131, S9211</p> <p>Preauthorization required regardless of visits:</p> <p>S9123, S9124, S9125, S9127, T1000, T1019, T1021, T1028, T1030, T1031</p>
Infertility testing and treatment	Infertility testing and treatment	89268, 89272, 89280, 89281, 89344, 89346, 89352, 89353, 89354, 89398
Inpatient admissions	Acute hospital (includes inpatient hospice)	*For neonatal intensive care unit (NICU) and obstetrical admission preauthorization and notification clarification, please see the note following this grid.
	Acute rehabilitation facilities	
	Long-term acute care	
	Skilled nursing facilities	
Miscellaneous codes	Miscellaneous codes	81162, 81163, 81164, 81165, 81166, 81167, 81201, 81202, 81203, 81212, 81215, 81216, 81217, 81220, 81228, 81229, 81235, 81240, 81241, 81243, 81252, 81253, 81254, 81256, 81287, 81291, 81302, 81304, 81321, 81322, 81323, 81324, 81325, 81326, 81331, 81374, 81448, 81418, 81451, 81456, 81470, 81479, 81493, 81500, 81503, 81504, 81506, 81509, 81510, 81511, 81512, 81525, 81535, 81536, 81538, 81540, 81546, 81599, 83951, 84433, 86305, 88120, 88121, 88377, S3870

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Nonemergent medical transportation (NEMT)	NEMT	A0090, A0120, A0430, A0431, A0435, A0999
Other services	Skin and tissue substitutes	A2001, A2002, A2005, A2007, A2008, A2013, A2022, A2025, Q4100, Q4112, Q4113, Q4114, Q4133, Q4134, Q4135, Q4136, Q4137, Q4138, Q4139, Q4140, Q4147, Q4148, Q4149, Q4150, Q4151, Q4153, Q4154, Q4155, Q4157, Q4159, Q4161, Q4162, Q4163, Q4164, Q4169, Q4173, Q4174, Q4176, Q4180, Q4181, Q4184, Q4186, Q4187, Q4188, Q4190, Q4191, Q4192, Q4193, Q4194, Q4195, Q4196, Q4199, Q4203, Q4204, Q4205, Q4206, Q4208, Q4212, Q4217, Q4218, Q4219, Q4221, Q4222, Q4225, Q4226, Q4227, Q4229, Q4231, Q4232, Q4234, Q4235, Q4237, Q4238, Q4239, Q4246, Q4247, Q4248, Q4249, Q4250, Q4251, Q4252, Q4253, Q4254, Q4256, Q4257, Q4259, Q4261, Q4262, Q4263, Q4310
	Varicose veins: surgical treatment and sclerotherapy	36465, 36466, 36470, 36471, 36473, 36474, 36482, 36483, 37500, 37700, 37718, 37722, 37735, 37760, 37761, 37765, 37766, 37780, 37785
Pain management	Epidural injections (outpatient only)	62320, 62321, 62323, 64479, 64480, 64483, 64484, 64999
	Facet injections	64490, 64491, 64492, 64493, 64494, 64495, 64633, 64634, 64635, 64636, 64999
	Pain infusion pump	62324, 62325, 62326, 62327, 62350, 62351, 62360, 62361, 62362, 64999
	Sacroiliac (SI) joint injections	27096
	Spinal cord stimulators	63650, 63655, 63663, 63664, 63685, 63688, 64999
	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, 22532, 22533, 22534,

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		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, 22836, 22837, 22838, 22840, 22841, 22842, 22843, 22844, 22845, 22846, 22847, 22848, 22849, 22853, 22854, 22856, 22857, 22858, 22859, 22867, 22868, 22869, 22870, 22899, 27279, 27278, 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, 63185, 63190, 63191, 63197, 63200, 63250, 63251, 63252, 63265, 63266, 63267, 63268, 63270, 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
Pain management <i>(Continued)</i>	Trigger point injections	20552, 20553
Physical, occupational and speech therapy	Physical, occupational and speech therapy	92507, 92508, 92520, 92526, 92606, 92609, 92610, 92611, 95851, 97012, 97016, 97018, 97022, 97024, 97026, 97028, 97032, 97033, 97034, 97035, 97036, 97110, 97112, 97113, 97116, 97124, 97139, 97140, 97150, 97164, 97168, 97530, 97533, 97535, 97537, 97750, 97755, 97760, 97761, 97763, 97799, G0237, S9152
Radiology	Computed tomography (CT) scan	70450, 70460, 70470, 70480, 70481, 70482, 70486, 70487, 70488, 70490,

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		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, 75572, 75573, 75574, 75635, 76125, 76380, 77078
	Magnetic resonance angiogram (MRA)	70544, 70545, 70546, 70547, 70548, 70549, 71555, 72159, 72198, 73225, 73725, 74185
	Magnetic resonance imaging (MRI)	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, 74181, 74182, 74183, 74712, 74713, 75557, 75559, 75561, 75563, 75565, 76390, 76391, 77022, 77046, 77047, 77048, 77049, 77084
	Nuclear medicine	78012, 78013, 78014, 78015, 78016, 78018, 78020, 78070, 78071, 78072, 78075, 78102, 78103, 78104, 78185, 78195, 78201, 78202, 78215, 78216, 78226, 78227, 78230, 78231, 78232, 78258, 78261, 78262, 78264, 78265, 78266, 78278, 78290, 78291, 78300, 78305, 78306, 78315, 78445, 78456, 78457, 78458, 78579, 78580, 78582, 78597, 78598, 78600, 78601, 78605, 78606, 78610, 78630, 78635, 78645, 78650, 78660, 78700, 78701, 78707, 78708, 78709, 78725, 78730, 78740, 78761, 78800, 78801, 78802, 78803, 78804, 78830, 78831, 78832

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Radiology (Continued)	Nuclear stress test	78453, 78454, 78466, 78468, 78469, 78472, 78473, 78481, 78483, 93350, 93351
	Positron emission tomography (PET) scan	78429, 78430, 78459, 78491, 78492, 78608, 78609, 78811, 78812, 78813, 78814, 78815, 78816, A9552
	SPECT scan	78494
Routine maternity care	Routine maternity care	All Notification is requested.
Surgery	Abdominoplasty	15830, 15847
	Cochlear and auditory brainstem implants	69930, L8614, L8615, L8616, L8617, L8618, L8619, L8625
	Gastric pacing	43647, 43648, 43881, 43882
	Gender affirmation	55970, 55980
	Neurostimulators	61863, 61867, 61885, 61886, 61888, 64561, 64566, 64568, 64569, 64570, 64581, 64590
	Obesity surgeries	43631, 43632, 43633, 43634, 43644, 43645, 43770, 43771, 43772, 43773, 43774, 43775, 43842, 43843, 43846, 43847, 43848, 43886, 43887, 43888
	Other implantable or semi-implantable hearing aids and devices	69710, 69711, L8691
	Otoplasty	69300, 69320
Rhinoplasty	30400, 30410, 30420, 30430, 30435, 30450, 30460, 30462, 30468	
Transplant	Transplant surgeries (includes genetic testing)	02WA3QZ, 02WA4QZ, 32850, 32851, 32852, 32853, 32854, 33927, 33928, 33929, 33935, 33945, 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, 81376, 81377, 81378, 81379, 81380, 81381, 81382, 81383, 81560, 81595, 0018M, 0055U, 0087U, 0088U, 0118U, 0319U, 0320U, 0584T, 0585T, 0586T,

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		0664T, 0665T, 0666T, 0667T, 0668T, 0669T, 0670T, G0341, G0342, G0343, L8698, S2053, S2054, S2060, S2065, S2102, S2142, S9975 Preauthorization requests are reviewed by Humana National Transplant Network. You can submit requests by: <ul style="list-style-type: none"> • Fax to 502-508-9300 • Email to transplant@humana.com • Telephone to 866-421-5663 Monday – Friday, 8 a.m. – 5 p.m., Eastern time.
Ventricular assist devices (VADs)	VADs	33975, 33976, 33979, 33981, 33982, 33983
Wound care	Negative pressure wound therapy (NPWT)	97605, 97606, A6550, E2402

* For **neonatal intensive care unit (NICU)** preauthorization and notification, Humana Healthy Horizons expects notification within 48 hours of admission to conduct a concurrent review for care coordination, assess the appropriate level of care and begin discharge planning. For **obstetrical admissions**, Humana Healthy Horizons expects notification for admissions that exceed 48 hours for vaginal deliveries and 96 hours for cesarean section(s) to conduct a concurrent review for care coordination and discharge planning.

Specialty drugs: Preauthorization is required for the following list of specialty drugs when delivered in the physician’s office, clinic, outpatient or home setting. To request preauthorization or provide notification, please access the fax forms at provider.humana.com/pharmacy-resources/prior-authorizations-professionally-administered-drugs.

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