Humana
Healthy Horizons®
in Virginia

October 1, 2026

Re: Humana Healthy Horizons® in Virginia prior authorization list updates

Dear provider or administrator:

Effective **January 1, 2027** Humana Healthy Horizons® in Virginia will update its prior authorization and notification list (PAL). Please have the following clinical information available when requesting prior authorization:

- Member's name, date of birth and Humana member ID number
- Requesting and rendering provider(s) (if applicable) name and National Provider Identifier or Tax Identification Number
- Requesting and rendering provider(s) (if applicable) phone number, email address and fax number
- Member's diagnosis or clinical indication
- Place of treatment
- Ordered test or procedure name and/or Current Procedural Terminology (CPT®) code
- Clinical information that supports the ordered procedure (presenting symptoms, prior treatment, prior diagnostic and/or genetic testing results, family history, genetic history)

You can view the PAL and find information about changes to the list by visiting the Humana Healthy Horizons provider website at Provider prior authorization notification lists. The Humana Healthy Horizons in Virginia PAL is available under the Medicaid tab.

Humana Healthy Horizons updates its list when we add prior authorization requirements and when new medications or technology enter the market. To request a copy of any Humana PAL, please call **844-881-4482 (TTY: 711),** Monday – Friday, 7 a.m. – 7 p.m., Eastern time.

Notice of changes to prior authorization requirements for medical services

New prior authorization requirements for medical services managed by Humana Healthy Horizons (effective January 1, 2027)		
Category	**Details/notes**	**Procedure code(s)**
Behavioral health services	Applied behavior analysis (ABA)/Adaptive behavior treatment (ABT)	97151
Cardiac devices	Cardiac implantable devices (e.g., CardioMEMS pacemakers, leadless pacemakers, left atrial appendage closure [LAAC], defibrillators [implantable and subcutaneous] and cardiac resynchronization therapy)	1050T, 1051T

Cellular (including chimeric antigen receptor T-cell therapy (CAR T)), genetic, tissue and transplant therapies		J3886
Molecular diagnostic/genetic testing		0631U, 0633U, 0634U, 0635U, 0641U 0642U, 0643U, 0644U, 0645U, 0646U, 0647U, 0648U, 0649U, 0650U, 0651U, 0652U, 0653U, 0657U, 0658U, 0659U
Neurostimulators		1027T, 1028T, 1029T

Requests for prior authorization managed by Humana Healthy Horizons can be submitted:

- Online through Availity Essentials™ at www.availity.com (registration required)
- By phone at **844-881-4482 (TTY: 711),** Monday – Friday, 7 a.m. – 7 p.m., Eastern time.
- By fax at **877-486-2621**

Important notes

- Urgent/emergent services do not require referral or prior authorization.
- The term *prior authorization* (i.e., preauthorization, precertification, preadmission), when used in this communication, is defined as a process through which the provider is required to obtain advance authorization from the plan for an item or service to be covered.
- *Notification* refers to the process in which the provider notifies Humana Healthy Horizons of their intent to provide an item or service. Humana Healthy Horizons requests notification to help coordinate care for your patients. This process is distinguished from prior authorization. Humana Healthy Horizons does not issue an approval or a denial related to a notification.
- Providers who participate in an independent practice association (IPA) or other risk network with delegated services are subject to the PAL and should refer to their IPA or risk network for guidance on processing their requests.
- For additional PAL information, please visit **Provider.Humana.com/coverage-claims/prior-authorizations/prior-authorization-lists**.

If you have questions about this information, please call **844-881-4482 (TTY: 711)**, Monday – Friday, 7 a.m. – 7 p.m., Eastern time.

Thank you for the continued care you provide your Humana Healthy Horizons-covered Cardinal Care patients.

Sincerely,

Humana Healthy Horizons in Virginia

Dear physician or administrator:

As part of Humana's ongoing claims process improvement efforts, we continue to update our claims payment systems to better align with correct-coding initiatives, Centers for Medicare & Medicaid Services (CMS) guidelines, national benchmarks and industry standards. **These changes occur throughout the year, with updates posted the first Friday of each month.** Each item notified will indicate the item's implementation date.

To view these changes, visit **https://provider.humana.com/coverage-claims/processing-edits** and select "Search processing edits." General reminders and special announcements can be viewed by selecting "General coding reminders and special announcements" under the "Additional resources" sidebar on the page above.

We update our claim payment systems—primarily claims submitted on a CMS-1500—to better align with American Medical Association (AMA) Current Procedural Terminology (CPT®) code sets, Healthcare Common Procedure Coding System (HCPCS) code sets, International Classification of Diseases (ICD) code sets and CMS guidelines.

You can submit specific questions about code editing through the code-editing questions tool. To access the code-editing questions tool, you must be registered on Humana's website or through Availity Essentials™.

To submit a code editing question on **Humana.com**:

1. If you are not registered for the **Humana.com** secure portal, go to **Humana.com** and choose "Sign in or Register" or contact your primary access administrator.
2. Once signed in, select the "Claims Tools" tab at the top of the page.
3. Select "Code Edit Questions" to access the tool.

To submit a code-editing question on Availity Essentials:

1. If you are not registered for Availity Essentials, please visit www.availity.com and select "REGISTER" to sign up.
2. Once signed in, select "Claims Management" from the links on the left.
3. Select "Research Procedure Code Edits" to access the tool.

If you do not have access to the web and you have questions about this information, or if you require a printed copy of the claims payment changes, please call a Humana Customer Care representative at **800-4HUMANA (448-6262)**, Monday – Friday, 8 a.m. – 8 p.m., Eastern time.

Thank you for your continued care of your Humana-covered patients

Sincerely,

Humana Healthy Horizons in Virginia
Claims Team