

Important information about your plan coverage— prior authorizations



What is prior authorization and how does it work?

The Humana Group Medicare Advantage plan requires your doctor to get prior authorization from Humana for some types of care. Your doctor must get Humana's approval before prescribing specific drugs, performing particular procedures, or ordering certain tests.

You don't need to do anything

It is your provider's responsibility to obtain prior authorizations. There is nothing you need to do.

Why this is necessary

Humana's prior authorization approach supports optimal health, safety and financial wellness, and ensures that Medicare requirements are met.

Here are a few examples of areas where Humana may require prior authorization:

- · Home health
- Inpatient admissions
- Physical or occupational therapy
- Advanced imaging, such as MRI or CT scan
- · Certain medications
- Skilled nursing facilities



More information:

If you have any questions, please call Humana at **866-733-1872 (TTY: 711)** Monday - Friday, 8 a.m. – 9 p.m., Eastern time.



