Claim Attachment Guidelines

HUMANA
Specialty Benefits

Thank you for treating Humana Specialty Benefits patients. Below is a list of procedures and codes for which Humana Specialty benefits typically requires specific information in order to process the claim. Under certain circumstances, additional information may be requested for procedures not listed below. *Keep in mind that not all procedures are covered benefits under all plans administered by Humana Specialty Benefits.* We hope you find this useful to receive your payment quickly and accurately.

Code	Additional information needed
D2332	pre-operative radiographs
D2335	pre-operative radiographs
D2390	pre- operative radiographs
D2420 through D2664	pre- operative radiographs and if the restoration is a replacement: the date of prior insertion and the reason for replacement
D2710 through D2794	pre- operative radiographs and if the restoration is a replacement: the date of prior insertion and the reason for replacement
D2950	pre- operative radiographs
D2952	pre- operative radiographs
D2953	Pre- operative radiographs and a description of the clinical necessity
D2954	Pre- operative radiographs
D2957	Pre- operative radiographs and a description of the clinical necessity
D2960 through D2962	Pre-operative radiographs. If the restoration is a replacement: the date of prior insertion and the reason for replacement
D4210 and D4211	Pre-operative radiographs (not a panoramic film), periodontal charting, and a description of the clinical necessity for the procedure
D4240 through D4268	Pre-operative radiographs (not a panoramic film) and perio charting
D4270 through D4276	perio charting that states the recession reading on the charting and a detailed narrative of necessity
D4341	Pre-operative radiographs (not a panoramic film) and periodontal charting
D4342	Pre-operative radiographs (not a panoramic film) and periodontal charting
D5110 through D5281	Pre-operative complete series of radiographs or panoramic film. If initial placement: tooth/teeth to be extracted and replaced by appliances or date of extraction of most recently extracted tooth to be replaced by appliance. If replacement: date of previous placement and reason for replacement.

Code	Additional information needed
D6205 through D6794	Pre-operative complete series of radiographs or panoramic film. If initial placement: tooth/teeth to be extracted and replaced by appliances or date of extraction of most recently extracted tooth to be replaced by appliance. If replacement: date of previous placement and reason for replacement.
D6970	Pre- operative radiographs
D6972	Pre- operative radiographs
D6973	Pre- operative radiographs
D6976	Pre- operative radiographs and a description of the clinical necessity
D6977	Pre- operative radiographs and a description of the clinical necessity
D7210	Pre- operative radiographs
D7220 through D7241	Pre- operative radiographs and a description of the clinical necessity
D7250	Pre- operative radiographs
D7950	Pre- operative radiographs, a description of the clinical necessity for the procedure, and a description of the procedure or surgical report
D7955	Pre- operative radiographs, a description of the clinical necessity for the procedure, and a description of the procedure or surgical report
D9220	Description of the clinical necessity for the procedure (and anesthesia record if more than 45 minutes of anesthesia or sedation)
D9221	Description of the clinical necessity for the procedure (and anesthesia record if more than 45 minutes of anesthesia or sedation)
D9241	Description of the clinical necessity for the procedure (and anesthesia record if more than 45 minutes of anesthesia or sedation)
D9242	Description of the clinical necessity for the procedure (and anesthesia record if more than 45 minutes of anesthesia or sedation)

Humana Specialty Benefits does not request that radiographs be taken solely for benefit determination purposes. Radiographs should be dated, properly labeled, and of diagnostic quality according to accepted standards of care. Please do not send photocopies. NEA can be used for submitting digital radiographs. While not required, Humana Specialty Benefits would be pleased to accept and review intraoral photographs if you feel that they will assist us in making a benefit determination.

1-800-833-2223 • HumanaDental.com

Current Dental Terminology © American Dental Association

GN-50740-HD 4/09