## Advantage MD (HMO Select)

# Quick Reference Guide

To obtain the most up-to-date information on policies, manuals, directories and other information, providers should review the website on a regular basis: HopkinsHealthPlans.org.

# **Overview & Important Information**

- Advantage MD HMO Select is a Medicare Advantage product administered by Johns Hopkins Health Plans. Advantage MD HMO Select has a closed network and requires members to coordinate their care through a designated primary care provider (PCP) by obtaining a referral for all specialty services from an in-network provider; exceptions include emergency and urgent care services. Advantage MD HMO does not provide outof-network coverage.
- Benefits for Advantage MD HMO Select include lower-cost and easy access to preventative medical services, hospital stays, prescription drugs, preventive dental coverage, and vision care. Advantage MD HMO Select offers value-added benefits such as comprehensive case management programs and post-discharge member resources.
- · This plan is specially designed for Medicareeligible beneficiaries who:
  - Live in Arlington, Fairfax City, and Falls Church City Counties
  - Currently have (or are eligible for) Medicare Part A and Part B
- Medicare Advantage beneficiaries are generally age 65 or older and do not have end-stage renal disease
- Annual Enrollment Period: October 15 – December 7
- Effective Date: January 1, 2024
- If a patient is a member of the Advantage MD HMO Select plan, Medicare must not be billed for covered medical services (with the exception of routine clinical research studies and hospice services)

# **Important Phone Numbers**

**Medical Management** 

844-560-2856 855-704-5296 Fax

**Behavioral** 

**Health Services** 

844-340-2217 844-363-6772 Fax

**Care Management** 

800-557-6916

caremanagement@jhhp.org

**Customer Service** 

877-293-5325

**Pharmacy Services** 

877-293-5325 855-633-7673 Fax

855-206-9203 Fax

**Superior Vision** 

866-819-4298

**DentaQuest** 

844-231-8318

**TruHearing** 877-293-5325 Silver&Fit 877-293-5325

**Provider Relations** 

(Contracts, fee schedules, and demographic changes)

410-762-5385 888-895-4998 410-424-4604 Fax

**Payment Integrity** 

410-424-4971 FWA@jhhp.org

(Claims, benefits and eligibility) Medicare 800-633-4227

> **Social Security** 800-772-1213

Virginia Insurance **Counseling & Assistance** 

Program (VICAP) (Virginia SHIP)

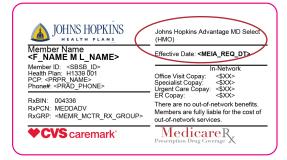
800-552-3402

Virginia Department of Medical Assistance

Services 855-242-8282



## **Member ID Card**





# Prior Authorization Process

#### For Prior Authorization/Medical Review

Submit request with the <u>Prior Authorization</u> Form.

## **Key Referral Information**

Specialty care requires a referral from the member's PCP.

#### **Medical Review**

Review process in which a nurse reviewer or medical director reviews the medical necessity for a procedure scheduled. Information must be faxed with request and clinical documentation.

#### **Preventive Care Visit Benefit**

Advantage MD members are allowed one preventative visit/annual exam per calendar year. Members do not have to wait 366 days from their last preventative visit/annual exam.

Please refer to the Johns Hopkins Prior Authorization Lookup tool (JPAL), located in the <u>Availity provider portal</u>, to check and verify prior authorization requirements for outpatient services and procedures.

## **Claims Submission**

### **Part C Payment Requests**

Advantage MD P.O. Box 3537 Scranton, PA 18505

### **Part D Payment Requests**

Advantage MD c/o Caremark Part D Services P.O. Box 52000 MC 109

Phoenix, AZ 85072

- Claims must be submitted on CMS 1500 or UB-04 forms
- Claims from specialist or ancillary providers should include the referring provider's NPI in Box 17b of the CMS 1500
- Claims must be submitted with a rendering provider's NPI in Box 24J of CMS 1500
- Claims must be submitted within 180 calendar days of the date of service

## **Payment Disputes**

Please fill out <u>the Participating Provider Post</u>
<u>Service Payment Dispute Submission Form</u> and send to:

Hopkins Advantage MD Payment Disputes P.O. Box 3537 Scranton, PA 18505

Fax: 855-206-9206

Payment disputes must be submitted within 90 business days of the date of denial, by fax or mail

# Non-Participating Provider Appeals Requests

Advantage MD Appeals P.O. Box 8777 Elkridge, MD 21075 Fax: 410-424-2806

### For a Fast Appeal

Phone: HMO: 877-293-4998; TTY users may

call 711

Fax: 855-206-9206

Providers are encouraged to submit claims electronically.

EDI Payor ID #66003.

You can switch from paper to electronic payments by calling Change Healthcare at 866-506-2830.