



Johns Hopkins Health Plans Reimbursement Policies Update Provider Notification

The below listed reimbursement policies have been approved by the Johns Hopkins Health Plans Reimbursement Advisory Committee (RAC). These changes and additions are **effective as of Dec. 30, 2023**. Billing and coding guidance provided in Johns Hopkins Health Plans' reimbursement policies are applicable to both in-network and out of network providers, and those health plans specifically noted in the policy. Any exclusions or exceptions will be noted in their respective sections. Full text copies of these policies are available upon request by contacting Provider Relations or on our website at HopkinsHealthPlans.org.

Reimbursement Policy Name	Key Points/Changes	Heath Plans
(RPC.004) National Provider Identifier (NPI)	<ul style="list-style-type: none"> • Policy language updated • Johns Hopkins Health Plans requires that the NPI be used on all claims submitted to the health plan, to identify the ordering provider, the referring provider, and/or prescriber in ordered for claim to be processed. • Medical students, interns or residents who render services, prescribe medications for patients, refer patients to other health care providers, or order test for patients from other health care providers, must identify themselves as the ordering, rendering, or referring provider, and report with taxonomy code 390200000X when submitting the claim. <ul style="list-style-type: none"> ○ Refer to RPC.009- Scope of Practice reimbursement policy for further guidance. • Key Definitions, Background, Coding, and References sections updated and included. 	Advantage MD, Employer Health Programs, Priority Partners, US Family Health Plan
(RPC.009) Scope of Practice	<ul style="list-style-type: none"> • Policy language updated. • In accordance with CMS, Johns Hopkins Health Plans will deny payment for services rendered by providers who self-report with the taxonomy code 390200000X, in Box 24j (servicing provider) on the CMS-1500 or its electronic equivalent. <ul style="list-style-type: none"> ○ Taxonomy code 390200000X must be reported by medical students, interns, and residents who are not yet licensed. ○ Refer to the National Uniform Claim Committee (NUCC) for more information on Health Care Provider Taxonomy code set levels. • It is the provider's responsibility to ensure that any information submitted on the claim is accurate. Erroneous information submitted by the provider can result in claim denial or a delay in payment. • Key Definitions, Background, Coding, and References sections updated and included. 	Advantage MD, Employer Health Programs, Priority Partners, US Family Health Plan
(RPC.011) Physician Assistant	<ul style="list-style-type: none"> • Policy to be retired on 12/30/23 and will be replaced by RPC.036 Advanced Practice Provider Policy. 	Advantage MD, Employer Health Programs, Priority Partners, US Family Health Plan
(RPC.012) Nurse Practitioner	<ul style="list-style-type: none"> • Policy to be retired on 12/30/23 and will be replaced by RPC.036 Advanced Practice Provider Policy. 	Advantage MD, Employer Health Programs, Priority Partners, US Family Health Plan

<p>(RPC.013) Unlisted Codes</p>	<ul style="list-style-type: none"> • Policy language updated. • Johns Hopkins Health Plans allows reimbursement for valid unlisted codes with prior authorization supported by the appropriate documentation. Claims submitted without an authorization or documentation will be denied. • If Johns Hopkins Health Plans determines that an unlisted code submitted can be described by a more appropriate CPT/HCPC code, the claim will be denied. • No additional reimbursement is provided for special techniques/equipment submitted with an unlisted procedure code. • Reporting an unlisted procedure code for the use of robotic or computer assisted surgical navigation does not increase the reimbursement for performing the service. • The appropriate determination of the payment for the unlisted code(s) will be determined by Johns Hopkins Health Plans. • Key Definitions, Background, Coding, and References sections updated and included. 	<p>Advantage MD, Employer Health Programs, Priority Partners, US Family Health Plan</p>
<p>(RPC.036) Advanced Practice Providers</p>	<ul style="list-style-type: none"> • This new policy was created to streamline and combine our Physician Assistant (RPC.011) and the Nurse Practitioner (RPC.012) policies, as both policies will be retired. • Policy will align Johns Hopkins Health Plans with state and federal guidance. • NPs and PA's are required to bill under their own NPI, for the services that they render, if they do not meet the "incident to" criteria to bill under a supervising physician. • PAs and NPs submitting claims for Employer Health Programs, US Family Health Plan and Advantage MD members, will be paid in accordance with CMS reimbursement methodologies, which is 80 percent of the lesser of the actual charge or 85 percent of what a physician is paid under the Medicare Physician Fee Schedule (MPFS). • PAs and NPs who furnish covered assistant-at-surgery services are paid in accordance with our Assistant at Surgery Policy. 	<p>Advantage MD, Employer Health Programs, US Family Health Plan</p> <p>Not applicable to Priority Partners</p>