



PROVIDER NOTICE

Provider Relations Department: 888-895-4998 (Option 4)

New CPT® Codes Requiring Prior Authorization

Health Plans Affected: Advantage MD, Priority Partners

Effective Date: March 6, 2024

Type of Change: Prior Authorization

Explanation of Change:

Effective March 6, 2024, Johns Hopkins Health Plans requires prior authorization for the selected medical procedure and equipment codes listed below for the Advantage MD and Priority Partners health plans. This requirement affects members of all ages enrolled in these plans.

[Quarterly New Codes Requiring Prior Authorization for Advantage MD and Priority Partners Effective March 6, 2024](#)

eviCore prior authorization process for Advantage MD and Priority Partners:

- For codes subject to prior authorization through eviCore, providers should submit prior authorization requests via the eviCore portal through [Availity*](#), the [eviCore portal*](#) directly, or, if the portal cannot be accessed, by calling eviCore at 866-220-3071.

This code list is provided for reference purposes only and may not be all-inclusive. The listing of a code does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member-specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other policies and guidelines may apply.

Please refer to the Johns Hopkins Prior Authorization Lookup tool (JPAL), located in the [Availity*](#) portal, to check and verify prior authorization requirements for outpatient services and procedures. Prior authorization requirements are subject to change.

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