

# PROVIDER NOTICE

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

## **New Prior Authorization Requirements For Certain Provider-Administered Medications**

**Effective Date:** April 1, 2024

**Health Plan(s) Affected:** Priority Partners and Advantage MD

**Type of Change:** Prior Authorization Process

### **Explanation of Change:**

Effective April 1, 2024, Johns Hopkins Health Plans will require prior authorization to determine medical necessity for several provider-administered medications under Priority Partners and Advantage MD. These requirements affect members of all ages.

[Priority Partners Prior Authorization Requirements April 1](#)  
[Advantage MD Prior Authorization Requirements April 1](#)

For certain drug classes, Priority Partners and Advantage MD have preferred drug lists. These preferred drugs are indicated on the “Preferred Medical Injectable Drug List” included at the above link. The comprehensive lists of provider-administered medications that require prior authorization for these health plans are also available on the [Johns Hopkins Health Plans website](#) for your reference.

### **Submitting Medical Injectable Prior Authorization Requests:**

#### **Priority Partners:**

- Providers may submit electronic prior authorization requests through NovoLogix using the Priority Partners [Availity\\*](#) secure provider portal. If Availity cannot be accessed, providers may contact NovoLogix for assistance by calling: 844-345-2803.
- Another option if Availity is unavailable is to complete a Medical Injectable Drug-specific Prior Authorization Form with supportive clinical documentation and fax to Priority Partners at 866-212-4756.

#### **Advantage MD:**

- Providers may submit electronic prior authorization requests through NovoLogix using the Advantage MD [Availity\\*](#) secure provider portal. If Availity cannot be accessed, providers may contact NovoLogix for assistance by calling 844-345-2803.

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