



Johns Hopkins Health Plans Reimbursement Policies

Effective Date: Varies per policy and health plan

Health Plans Affected: Advantage MD, Employer Health Programs (EHP), Priority Partners, US Family Health Plan (USFHP)

Type of Change: Policy Reminders

Explanation of Change: Please review the following reminders of the current policy guidelines listed below:

Reminder - Applicable to all Johns Hopkins Health Plans Reimbursement Policies:

- New or updated policies will be released on or after their effective date, on our website.
- We reserve the right to update, clarify or correct reimbursement policies at any time; updated versions will be released as needed.
- Occasionally, issues or delays may occur in updating configuration, system logic or implementing edits within the claims platform which can affect the timing and application of policy guidance. In such cases, claims will be reprocessed after payment to correct any resulting discrepancies.
- Each health plan administered by Johns Hopkins Health Plans follows a multi-tiered framework of regulatory and contractual obligations, which may take precedence over specific guidance found in our reimbursement policies.

EviCore Laboratory Management Program

We want to remind you about our collaboration with EviCore, as shared in previous provider communications, applicable to both Priority Partners (effective Dec. 1, 2021) and Advantage MD (effective Sept. 1, 2022).

- [Provider Pulse- Fall 2020](#)
- [Provider Pulse-Fall 2021](#)
- [EviCore Lab Management FAQs](#)
- [PRUP185 \(October 2021\)](#)
- [Provider Pulse-Winter 2023](#)

Johns Hopkins Health Plans is working with EviCore, an independent company that provides utilization and authorization management for certain laboratory services for Advantage MD and Priority Partners. EviCore's specialized payment policies determine the reimbursement for these program-related lab services. In cases of conflict, EviCore policies supersede Johns Hopkins Health Plans' laboratory billing guidance where applicable.

Providers can access [EviCore's Clinical Guidelines and Policies](#), through:

- [Availity](#)
- The [EviCore portal](#) directly; or
- Via this [link](#), and select the Laboratory Management icon and enter "Johns Hopkins HealthCare" in the search by health plan field, for additional information.

NCCI and MUE (RPC.014)

Consistent with our previous [Provider Communications](#), Johns Hopkins Health Plans remains aligned with CMS' National Correct Coding Initiative (NCCI) standards for all health plans.

- Submit claims using the most comprehensive code rather than unbundling or separately billing for individual or overlapping services that are considered mutually exclusive, incidental or integral to a covered service, as outlined in our [Reimbursement Policies](#).
- Johns Hopkins Health Plans reserves the right to perform retrospective audits to detect patterns of unbundling or improper coding and reimbursement. These post-payment reviews are designed to identify billing errors that may have bypassed our claim systems during the initial adjudication process.

REFERENCES

- CMS Regulations & Guidance
- COMAR-Maryland Department of Health (MDH)
- CPT® Copyright American Medical Association
- [EviCore by Evernorth Clinical Guidelines](#)
- [JHHP \(Advantage MD\) Coverage Criteria, Medical Policies and Clinical Guidelines](#)
- JHHP Reimbursement Policies
- MDH-Transmittals (maryland.gov)
- MDH Provider Information Site
- National Uniform Billing Committee (UB-04)
- National Uniform Claim Committee CMS-1500 Claim
- NCCI for Medicare | CMS
- NCCI for Medicaid | CMS
- Novitas Solutions- Medicare Administrative Contractor
- TRICARE Manuals