

New CPT Codes Requiring Prior Authorization Effective July 15, 2022

Effective Date: July 15, 2022

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

Type of Change: Prior Authorization

Explanation of Change:

Effective July 15, 2022, JHHC will require prior authorization for selected medical procedure codes for the Johns Hopkins Advantage MD, Johns Hopkins Employer Health Programs (EHP), Priority Partners, and Johns Hopkins USFHP health plans. This requirement affects members of all ages enrolled in these plans.

Review the list of procedure codes requiring prior authorization, effective July 15, 2022.

This 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 <u>HealthLINK</u> portal, to check and verify prior authorization requirements for outpatient services and procedures. Prior authorization requirements are subject to change.

Prior Authorization Process

Submit prior authorization requests to the JHHC Utilization Management (UM) department using the dedicated fax numbers listed below:

- Advantage MD: 855-704-5296
- EHP: 800-261-2421 or 410-424-4480
- Priority Partners: 410-762-5205 or 410-424-4603
- USFHP: 410-424-2602 or 410-424-2603