

PROVIDER NOTICE

Provider Relations Department 1-888-895-4998

Quarterly New Code Review Requiring Prior Authorization for Advantage MD

Effective Date: Nov. 1, 2022

Health Plans Affected: Johns Hopkins Advantage MD

Type of Change: Prior Authorization

Explanation of Change:

Effective Nov. I, 2022, JHHC will require prior authorization for select medical procedure codes for Johns Hopkins Advantage MD.

The <u>list of procedure codes requiring prior authorization</u> is provided for reference purposes only and may not be all inclusive. The prior authorization requirement applies to Advantage MD members of all ages. Providers should submit prior authorization requests via the <u>eviCore portal*</u> through HealthLINK, the eviCore portal directly, or, if the portal cannot be accessed, by calling eviCore at 866-220-3071.

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. **Note:** Prior authorization requirements are subject to change.

*This link is from an external website that is not provided or maintained by or in any way affiliated with JHHC. Please note JHHC does not guarantee the accuracy, relevance, timeliness, or completeness of any information on this external website.