



PROVIDER NOTICE

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

Important Prior Authorization Change in eviCore Musculoskeletal Therapies Program for Advantage MD

Effective Date: Jan. 1, 2024

Health Plans Affected: Advantage MD

Type of Change: Prior authorization process

Explanation of Change:

As previously communicated, Johns Hopkins Health Plans is working with eviCore to adopt the Musculoskeletal (MSK) program for utilization management.

Musculoskeletal (MSK) - Therapies: The eviCore MSK-Therapies program involves prior authorization of physical therapy and occupational therapy.

Important Change Regarding Authorization Requirements: Effective Jan. 1, 2024:

Prior authorization is required from eviCore after the initial evaluation for physical and occupational therapy visits, rather than the current policy of prior authorization after 12 visits for Advantage MD.

If a patient was already in treatment prior to Jan. 1, 2024, please contact eviCore for prior authorization of additional sessions after Jan. 1, 2024.

See the list of [applicable CPT codes](#) for Advantage MD. Prior authorization requests for PT/OT can be submitted through the portal in [HealthLINK](#), faxed to 800-540-2406, or by calling eviCore at 866-220-3071. Please see the eviCore portal for clinical worksheets.

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's 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 [HealthLINK](#) portal, to check and verify preauthorization requirements for outpatient services and procedures.

Note: Prior authorization requirements are subject to change.