



Employer Health Programs (EHP) Quick Reference Guide

To obtain the most up-to-date information on policies, manuals, directories and other information, providers should review the website on a regular basis: www.jhhc.com.

Overview & Important Information

Johns Hopkins Employer Health Programs (EHP), established in 1996, is a self-funded health plan that serves over 55,000 plan members in Maryland, Southern Pennsylvania, and Northern Virginia.

Important Phone Numbers

Medical Management

410-424-4480
1-800-261-2421
410-424-4890 Fax
(Referrals not needing
Medical Review)

Inpatient

410-424-4894 Fax
Initial Inpatient:
410-424-2770 Fax

Outpatient Medical Review

410-762-5205 Fax

Outpatient Urgent Requests

410-424-2707 Fax

DME

410-762-5250 Fax

Case/Disease Management

1-800-557-6916
populationhealth@jhhc.com

Customer Service (Suburban Employees)

1-866-276-7889

Customer Service (Claims, benefits and eligibility)

410-424-4450
1-800-261-2393

Fraud and Abuse

410-424-4996
compliance@jhhc.com

Health Coach Services

410-762-5390
1-800-957-9760
healthcoach@jhhc.com

Cigna PPO Network

[https://www.ehp.org/
news-and-updates/
cigna-network/
866-494-4872](https://www.ehp.org/news-and-updates/cigna-network/)

Pharmacy Services

1-888-819-1043, option 4
410-424-4607 Fax

Provider Relations

(Contracts, fee schedules,
and demographic changes)
410-762-5385
1-888-895-4998
410-424-4604 Fax

Behavioral Health Services

410-424-4476
1-800-261-2429
410-424-4891 Fax

Member ID Card

		JHH/JHSC PPO Plan	Eff. Date: 1/1/2021
Member: Sample name ID#: 00119069*01 Group#: E00092/001 Plan#: 001 Vision: Yes		PCP Name: Sample name PCP phone: (410) 123-4567	
PCP: Designated: \$10 Non-Designated: \$20 Urgent Care Facility: \$25 Emergency Room: \$250		Generic: \$10 Preferred: \$40 Non-Preferred: \$65	Bin: 004336 PCN: ADV Group: RX6795
"S"			

Submit claims to: Johns Hopkins Employer Health Programs - EHP
7231 Parkway Drive, Suite 100 - Electronic Payer ID 52189
Hanover, MD 21076

Website: EHP.org
EHP Customer Service: 1-800-261-2393
Mental Health and Substance Use Disorder: 1-800-261-2429
Pharmacy Information: 1-888-543-4921
Precertification: 1-800-261-2421

To find a provider, please visit <https://www.ehp.org/plan-benefits/medical-care-network/>

Notice: Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.

Providers: Precertification must be obtained for services as specified in the member's plan. For precertification, call the number shown on this card.

CIGNA Eligibility/Benefits/ Precertification : 1-800-261-2393

Benefits are not insured by Cigna or affiliates.

AWAY FROM HOME CARE



Claims & Appeals Submission

Billing Address

Johns Hopkins HealthCare LLC
Attn: EHP Claims
7231 Parkway Dr., Suite 100
Hanover, MD 21076

- Claims must be submitted on CMS 1500 or UB-04 forms
- Claims from specialist or ancillary providers should include the referring provider's NPI in Box 17b of the CMS 1500
- Claims must be submitted with a rendering provider's NPI in Box 24j of CMS 1500
- Claims must be submitted within 180 calendar days of the date of service
- Administrative appeals (timely filing, care not coordinated by PCP, authorization not on file, member not eligible at time of service, incorrect coding) must be submitted within 90 business days of the date of denial

For additional information on EDI (Electronic Data Interchange), please send an email request to edi@jhhc.com. EDI Payor ID #52189.

Referral & Pre-Authorization Process

Submit Request by Fax or Mail

Johns Hopkins HealthCare LLC
Attn: EHP Medical Management
6704 Curtis Court
Glen Burnie, MD 21060
410-762-5205 Fax

Key Referral Information

- Patient/member name*
- Member ID*
- DOB*
- Address
- Referring provider
- Referred services
- Limitations
- Diagnosis/Procedure Codes

**Indicates required fields*

Pre-Authorization

Authorization from the insurance plan for a scheduled service (not requiring additional clinical documentation).

Medical Review

Review process in which a nurse reviewer or medical director reviews the medical necessity for a procedure scheduled. Information must be faxed with request and clinical documentation.

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.

HealthLINK@Hopkins

HealthLINK@Hopkins is a secure, online web portal where providers can check patient eligibility, claims and authorizations status, access plan-specific reports and more.

Register for a HealthLINK@Hopkins account at www.jhhc.com or contact your Network Manager. First time users must register for an account. If you need assistance with registration, contact Provider Relations at 1-888-895-4998.