



Provider Update

This update contains pertinent information about changes that will impact the Johns Hopkins HealthCare provider network.

Clarification for Prior Authorization For Certain Provider-Administered Medications

Effective Date: April 1, 2021

Health Plan(s) Affected: Priority Partners and Johns Hopkins US Family Health Plan (USFHP)

Effective April 1, 2021, Johns Hopkins HealthCare LLC will require prior authorization to determine medical necessity for the following provider-administered medications. Some codes may also require site of service (site of care) prior authorization. Codes that do not have this additional site of service requirement are annotated (impacted procedure codes are listed below). This new requirement affects members of all ages.

Prior authorizations are required as of April 1, 2021 for:

Drug Name	Procedure Code	Priority Partners	USFHP
Givlaari [®]	J0223*	Yes	Yes
Ruxience [®]	Q5119	Yes	No
Ziextenzo [®]	Q5120*	Yes	Yes
Avsola [®]	Q5121	Yes	Yes
Xembify [®]	J1558	Yes	Yes
Vyepti [®]	J3032	Yes	Yes
Asceniv [®]	J1554	Yes	Yes

*NOTE: This code requires medical necessity authorization only (not site of service).

Submitting medical injectable prior authorization requests

- Fax the relevant form along with clinical supporting documentation, via fax to the **JHHC Pharmacy department at 410-424-2801**.
 - Priority Partners: use the [PPMCO Medical Injectable Prior Authorization Form](#)
 - USFHP: use the [USFHP Medical Injectable Prior Authorization Form](#)

Complete lists of HCPCS codes for all specialty medications requiring prior authorization are available on the JHHC website:

- [Priority Partners](#)
- [US Family Health Plan](#)

Please contact the JHHC Provider Relations department at 888-895-4998 with any questions or concerns.