

PROVIDER NOTICE

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

New and Revised Reimbursement Policies Effective Nov. 20, 2023

Effective Date: Nov. 20, 2023

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

Type of Change: Reimbursement

Explanation of Change:

Johns Hopkins Health Plans has released its notification of new and updated reimbursement policies that go into effect Nov. 20, 2023.

(RPC.034) Laboratory Services, Professional – NEW

- This new policy was created to support providers billing Laboratory services, and it aligns Johns Hopkins Health Plans with CMS, CPT and CLIA guidance.
- Claims for laboratory services will not be paid for services that are not reasonable and necessary.
- Johns Hopkins Health Plans requires providers to include their CLIA number on the claim form for all CLIA waived tests.
- QW modifier is used to identify CLIA waived tests and must be submitted in the first modifier field.

(RPC.035) Inpatient Reimbursement Guidance, Facility – NEW

- New policy created to support providers billing inpatient procedures and services.
- Addresses Present on Admission (POA) requirements and Hospital Acquired Conditions/Infections reporting and billing.
- Johns Hopkins Health Plans will reimburse valid claims on the calculated DRG weight only.

(RPC.003) Applied Behavior Analysis (ABA) – Updated

Language updated:

- To provide basic guidance on the authorization, billing and reimbursement for ABA services for participating and nonparticipating providers submitting claims to Johns Hopkins Health Plans.
- Providers must ensure that the documentation in the patient's medical record supports the level of service(s) reported.
- Some state laws do not require that ABA be covered in all contracts; therefore, providers will

need to contact the appropriate provider service department to verify the member's benefits.

- **Priority Partners** - For Autism Spectrum Disorder (ASD), Johns Hopkins Health Plans provides care management services in coordination with our behavioral health vendor, Optum.
- **USFHP**- Johns Hopkins Health Plans follows TRICARE authorization, billing and reimbursement for ABA services for USFHP member claims.

REFERENCES:

- [Clinical Laboratory Improvement Amendments \(CLIA\)](#)
- [Clinical Laboratory Fee Schedule \(CLFS\) Files | CMS](#)
- [CMS Regulations & Guidance](#)
- [COMAR- Maryland Department of Health- Maryland Medicaid Administration](#)
- [Medicare Billing Form CMS-1450 and the 837I Booklet](#)
- [Medicare Claims Processing Manual CH. 1 - General Billing Requirements](#)
- [Medicare Claims Processing Manual CH. 3- Inpatient Hospital Billing](#)
- [Medicare Claims Processing Manual CH. 25- Completing and Processing the Form CMS-1450 Data Set](#)
- [National Uniform Billing Committee \(NUBC\)](#)
- [TRICARE Reimbursement Manual](#)
- [TRICARE Reimbursement Manual Chapter 6 Diagnosis Related Groups \(DRGs\)](#)

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To view the [Johns Hopkins Health Plans Reimbursement Policies](#), please go to:

[**HopkinsHealthPlans.org > For Providers > Policies > Reimbursement Policies**](#)