



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

---

## **Temporary Revisions of Utilization Management Policies in Response to COVID-19 Surge**

**Effective Date:** Immediately

**Health Plans Affected:** Johns Hopkins Advantage MD (AMD), Johns Hopkins Employer Health Programs (EHP), Priority Partners (PPMCO), Johns Hopkins US Family Health Plan (USFHP)

**Type of Change:** Process

**Explanation of Change(s):** Johns Hopkins HealthCare (JHHC) is temporarily revising its utilization management policies and practices to relieve administrative burdens on the Maryland health care system **effective immediately through Feb. 24, 2022.**

### **Inpatient Acute Stay and Acute Inpatient Rehabilitation Authorizations**

- JHHC is waiving prior authorization requirements for admission to inpatient acute care facilities, to acute rehabilitation facilities and for transfers between inpatient acute care facilities to accommodate for capacity management. While notification of admission and submission of initial clinical documentation is still required, and medical necessity review will apply either concurrently or retrospectively, denials will not be issued for late notification.
- In addition, denials will not be issued for failure to submit ongoing concurrent inpatient reviews and acute rehabilitation reviews. All concurrent reviews should be submitted as soon as it is practical to facilitate assistance with discharge planning and post-acute follow-up by our care managers. JHHC will honor retrospective requests for medical necessity review received within 180 days of discharge from the accepting facility. Determination of medical necessity is still required for all inpatient acute and inpatient acute rehabilitation stay days prior to claims submission.
- JHHC is also waiving prior authorization requirements for accepting facility admission related to interhospital transfers. JHHC will honor

retrospective requests for medical necessity review received within 180 days of discharge from the accepting facility. Determination of medical necessity is still required for all acute inpatient days prior to claims submission.

### **Transfers to Post-Acute Care Facilities**

JHHC is waiving prior authorization requirements for admission to in-network skilled nursing facilities (SNF) and transportation to the SNF. Upon receipt of notification of transfer to a SNF, a five-day length of stay will be automatically authorized for members. Post-acute care facilities can communicate notification by fax to 410-424-2703.

### **Skilled Nursing/PT/OT**

JHHC is waiving authorization requirements for the first 12 home health visits provided to members by in-network providers.

### **Home Oxygen**

JHHC is waiving authorization requirements for home oxygen provided to members by in-network providers for the first 90 days.

### **Precertification and Outpatient Authorizations**

All outpatient precertifications, including those for postponed elective surgeries, will remain valid for a period of six months from the original date of authorization, pending member eligibility. It is the responsibility of the provider to contact the JHHC Utilization Management Department and provide a new date of service if the service is rescheduled beyond the six-month approval period.

For questions regarding an authorization status, please call Customer Service:

- EHP, PPMCO, USFHP customer service line 410-424-4480
- JH Advantage MD customer service line 1-844-560-2856

### **Outpatient Imaging Authorizations for USFHP Only**

Effective immediately through Feb. 24, 2022, in order to avoid unnecessary ED utilization solely for purposes of obtaining urgent imaging studies to rule out select potentially serious conditions, Johns Hopkins USFHP will remove prior authorization requirements for the following studies and respective indications:

- Non-contrast Head CT to rule out possible intracranial hemorrhage
- CT Angiogram of Chest to rule out PE in higher probability but stable patient
- CT Chest in follow-up of abnormal chest X-ray to rule out infectious etiology that could require hospitalization
- CT Abdomen/Pelvis (with or without contrast) for patients with acute and/or borderline unstable abdominal pain, to rule out serious conditions including appendicitis, PSBO, complex diverticulitis and renal calculus.

### **Affected Codes:**

70450 CT HEAD/BRAIN W/O DYE  
71250 CT THORAX DX C-

71260 CT THORAX DX C+  
71270 CT THORAX DX C-/C+  
71275 CT ANGIOGRAPHY CHEST  
74150 CT ABDOMEN W/O DYE  
74160 CT ABDOMEN W/DYE  
74170 CT ABDOMEN W/O & W/DYE  
74176 CT ABD & PELVIS W/O CONTRAST  
74177 CT ABD & PELV W/CONTRAST  
74178 CT ABD & PELV 1/> REGNS

**NOTE:** Prior authorization is not required for these codes for EHP; please contact eviCore for prior authorization for Priority Partners and Advantage MD.

### **Utilization Management Fax Numbers**

#### **General:**

- USFHP Inpatient: 410-424-2602
- USFHP Outpatient: 410-424-2603

#### **Priority Partners/Johns Hopkins EHP:**

- Inpatient Initial: 410-424-2770
- Inpatient Concurrent: 410-424-4894
- Non-urgent Outpatient: 410-762-5205
- Urgent Outpatient: 410-424-2707

#### **Johns Hopkins Advantage MD:**

- Inpatient: 844-240-1864
- Outpatient: 855-704-5296

---

*Please contact the JHHC Provider Relations department at 1-888-895-4998 with any questions or concerns.*