



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

New CPT Codes Requiring Prior Authorization Effective January 15, 2022

Effective Date: Jan. 15, 2022

Health Plans Affected: Johns Hopkins Advantage MD, Priority Partners, and Johns Hopkins US Family Health Plan (USFHP)

Type of Change: Prior Authorization Process

Explanation of Change: Effective Jan. 15, 2022, JHHC will require prior authorization for selected medical procedure codes for the Johns Hopkins Advantage MD, Priority Partners, and Johns Hopkins USFHP health plans. This requirement affects members of all ages enrolled in these plans.

[View the list of procedure codes requiring prior authorization.](#)

This list is provided for reference purposes only and may not be all inclusive. 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 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 prior authorization requirements for outpatient services and procedures.

Note: Prior authorization requirements are subject to change.

Prior Authorization Process

Submit prior authorization requests to the JHHC Utilization Management department (UM) via the dedicated fax numbers listed below:

- **Advantage MD:** 855-704-5296
- **Priority Partners:** 410-762-5205 or 410-424-4603
- **USFHP:** 410-424-2602 or 410-424-2603

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