



Overview & Important Information

- Johns Hopkins Advantage MD PPO, Advantage MD Plus PPO, Advantage MD Premier PPO, and Advantage MD Group are Medicare Advantage PPO products administered by Johns Hopkins HealthCare. Members have flexibility when selecting a provider and do not require referrals. Members have coverage both in- and out-of-network.
- Benefits for Johns Hopkins Advantage MD's PPO plans include medical services, hospital stays, and prescription drugs. They also include preventive medical, dental, vision and hearing care. Our Advantage MD Plus, Premier, and Group plans also offer chiropractic and podiatry services beyond Medicare, worldwide emergency and urgent care coverage, acupuncture allowances, and additional benefits beyond Original Medicare.
- These plans are specially designed for Medicare-eligible beneficiaries who live in:
 - Anne Arundel, Baltimore, Baltimore City, Calvert, Carroll, Frederick, Howard, Montgomery, Somerset, Washington, Wicomico, and Worcester counties; Premier: Montgomery County only.
 - Currently have (or are eligible for) Medicare Part A and Part B
- Our Advantage MD Group plan is designed for Medicare-eligible beneficiaries that are qualified retirees of specific contracted companies (to include Johns Hopkins Health System) who live in Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, Pennsylvania, South Carolina, and Virginia
 - Members must currently have (or be eligible for) Medicare Part A and Part B.
- Medicare Advantage beneficiaries are generally age 65 or older and do not have end-stage renal disease
- Annual Enrollment Period: October 15 – December 7
- Effective Date: January 1, 2020
- If a patient is a member of any Advantage MD PPO plans, Medicare must not be billed for covered medical services (with the exception of routine clinical research studies and hospice services)

Important Phone Numbers

Medical Management

844-560-2856
855-704-5296 Fax

Behavioral Health Services

844-340-2217
844-363-6772 Fax

Care Management

800-557-6916
caremanagement@jhhc.com

Customer Service

(Claims, benefits and eligibility)
877-293-5325
855-206-9203 Fax

Pharmacy Services

877-293-5325
855-633-7673 Fax

Superior Vision

866-819-4298

DentaQuest

844-231-8318

TruHearing

877-293-5325

Silver&Fit

877-293-5325

Provider Relations

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

Fraud and Abuse

844-697-4071
MedicareCompliance@jhhc.com

Medicare

800-633-4227

Social Security

800-772-1213




Maryland SHIP


(State Health Insurance Program)
800-243-3425

Maryland Health Connection

(Maryland Medical Assistance Program)
855-342-8572

Member ID Card

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|---|---|----------------------------------|
| ADVANTAGE MD <small>Johns Hopkins Medicine Medicare Plan</small> |  | Johns Hopkins Advantage MD (PPO) |
| Member Name F_NAME M_INIT L_NAME | Effective Date: MEIA_REQ_DT | |
| Member ID: SBSB_ID Health Plan: H3890 001 | In Network | Out-of-Network |
| RxBIN: 004336 | Office Visit Copay: \$XX | \$XX |
| RxPCN: MEDDADV | Specialist Copay: \$XX | \$XX |
| RxGRP: RX_GROUP | Urgent Care Copay: \$XX | \$XX |
| | ER Copay: \$XX | \$XX |
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| ADVANTAGE MD <small>Johns Hopkins Medicine Medicare Plan</small> |  | Customer Service (Members and Providers): 1-877-293-5325 TTY: 711 |
| DO NOT BILL MEDICARE Medicare limiting charges apply. | 24-hour Nurse Chat Line: 1-888-202-8828 | |
| Submit medical claims to: Johns Hopkins Advantage MD PO Box 3537 Scranton, PA 18505 | For non-Medicare covered dental related inquiries, please contact DentaQuest: 1-844-231-8318 | |
| Out-of-network fees may apply; for benefit information visit www.hopkinsmedicare.com or call Customer Service. | Prior Authorization: 1-877-293-5325 Pharmacist Use Only: 1-866-693-4620 | |
| Present this card at the time of service and with every prescription. | | |

Referral & Preauthorization Process

Submit Coverage Decisions (Authorizations) by Fax or Mail

Johns Hopkins Advantage MD
P.O. Box 3538 Scranton, PA 18505
855-206-9203 Fax

For Medical Review Call or Fax

844-560-2856
855-704-5296 Fax

Preauthorization

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. For a list of services that requires preauthorization, refer to the Preauthorization Guidelines at www.jhhc.com



Claims & Appeals Submission

Part C Payment Requests

Johns Hopkins Advantage MD
P.O. Box 3537 Scranton, PA 18505

Part D Payment Requests

Johns Hopkins Advantage MD c/o Caremark
Part D Services
P.O. Box 52000
MC 109
Phoenix, AZ 85072

- 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

Payment Disputes

Johns Hopkins Advantage MD
P.O. Box 3537 Scranton, PA 18505

Payment disputes must be submitted within 90 business days of the date of denial, by mail or calling Customer Service.

Electronic Remittance & EFT

Providers are encouraged to submit claims electronically.

EDI Payor ID #66003.

You can switch from paper to electronic payments by calling Change Healthcare at 866-506-2830.

HealthLINK@Hopkins

HealthLINK@Hopkins is a secure, online 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 888-895-4998.