

# Johns Hopkins Health Plans 2025 Overview

Employer Health Programs (EHP) – All Children’s Hospital (Florida)

Presented by: Johns Hopkins Health Plans Provider Relations Department

Employer Health Programs

MIS1257W12022024

# Agenda

- Welcome
- About Johns Hopkins Health Plans
- Provider Website Review
- EHP Overview
- EHP Updates - New for 2025
- Vendors
- Provider Resources
- Claims and Appeals Submission
- Referral and Prior Authorization Process
- Additional Information and Resources

# Johns Hopkins Health Plans

## Welcome

- Johns Hopkins Health Plans provides health care services for four health plans: Priority Partners, Employer Health Programs (EHP), US Family Health Plan (USFHP) and Advantage MD.

# Johns Hopkins Health Plans Mission & Vision



## **Mission:**

- To optimize the health of individuals, populations, and communities through innovations and science-based solutions that advance the mission of Johns Hopkins Medicine.

## **Vision:**

- Establish Johns Hopkins Health Plans as the leader in the translation of evidence-based solutions into population health programs and products that drive proven results and empower individuals and communities to achieve good health.

# Johns Hopkins Health Plans

## Provider Website

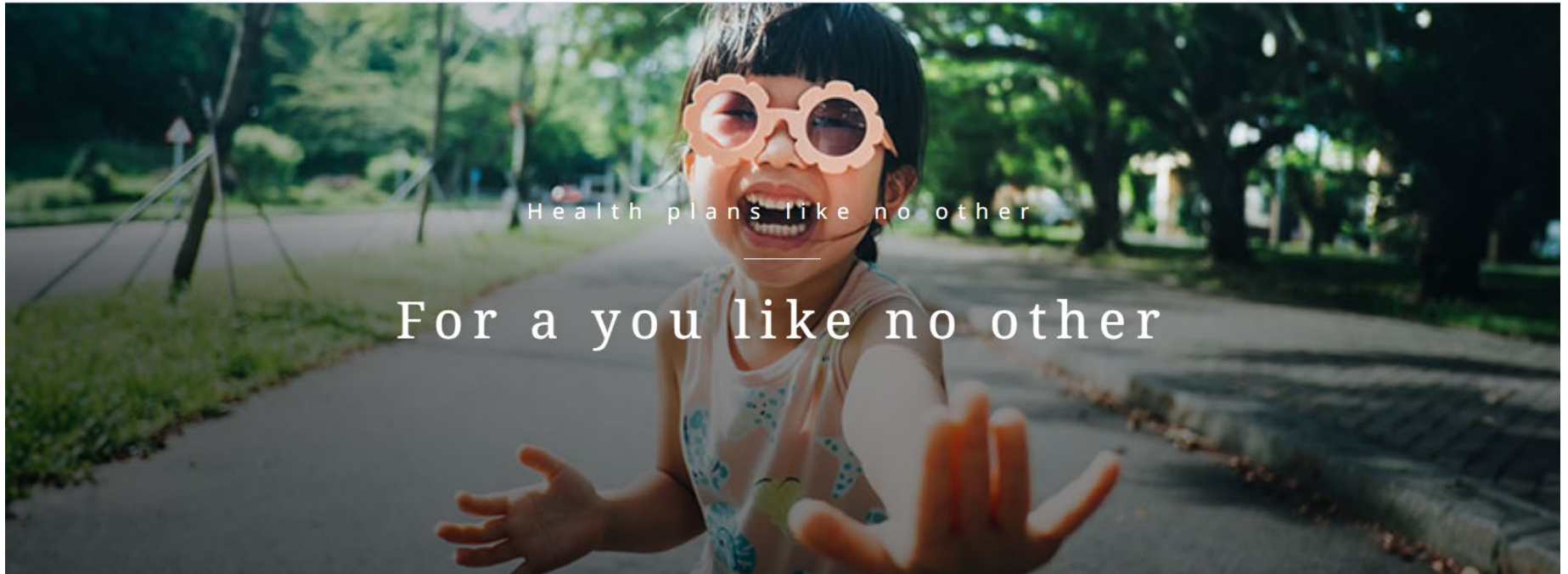


≡ MENU

COVID-19 SEARCH



Johns Hopkins Health Plans



# Johns Hopkins Health Plans

## Provider website includes:

- [Provider Manuals](#)
- [Forms](#) (Provider Dispute, Clinical Appeals, PCP Change Forms etc.)
- [Availity Web Portal](#)
- [Medical Policies](#)
- [Reimbursement Policies](#)
- [Online Provider Directory](#)
- [Resources & Guidelines](#)
- [Communications Repository](#)
- [Provider Education](#)

# Overview: EHP

As a third-party administrator, Employer Health Programs (EHP) provides benefits administration to Johns Hopkins Medicine employers and other strategic partners, serving more than 43,000 members.

With 20,000 health care providers and 30 hospitals in Maryland, Southern Pennsylvania, and Florida, and a nationwide network of nearly 691,000 providers and 3,500 hospitals, EHP self-funded plans are designed to meet the needs of all its members.

# Overview

As EHP members, your patients can take advantage of the following:

- **Prescription coverage:** Prescription drug benefits vary among EHP employer groups. The EHP pharmacy and formulary can be viewed [here](#).
- **Dental care:** Dental benefits vary among EHP employer groups. View the various plans at <https://www.ehp.org/find-a-provider/find-a-dentist/>
- **Visits to urgent care:** Members can find urgent care centers by accessing the [Provider Directory](#) or calling EHP customer service at 800-261-2393.
- **Care management program:** Through our four main service areas of Preventive, Transitional, Complex, and Maternal/Child, we catch members wherever they are on the health continuum. Members can call 800-557-6916 for more information.
- **Pregnancy resources:** Various programs for expectant moms, including Partners with Mom a high risk prenatal case management program and health coaching. Members can call 800-261-2396 ext. 5355 for more information.



# Vision

The vision benefit is administered by Superior Vision ([Superiorvision.com](http://Superiorvision.com))

- Superior National Network
  - Customer Service Number: 800-507-3800
  - Superior Vision Claims Administration  
P.O. Box 967  
Rancho Cordova, CA 95741

\*Wilmer is in network with Superior for eye exams only.

## Vision Services:

- Routine Optometry services: Superior Vision
- Medical Ophthalmology services: EHP network
- Vision eligibility questions: Members should be redirected to their HR or benefits office.

# Employer Health Programs (EHP)

- All Children's Health System, Inc
- Broadway Services, Inc.
- Howard County General Hospital
- Johns Hopkins Bayview Medical Center
- Johns Hopkins Hospital
- Johns Hopkins Health System
- Sibley Memorial Hospital
- Suburban Hospital

**NOTE:** The Schedule of Benefits (SOB) for the above programs can be found on [benefits.ehp.org](https://benefits.ehp.org)

# All Children's Hospital

## All Children's Hospital New Group Number E0030000

- Matches the 2025 PPO and EPO plans: Medical and Rx

## For PPO Plan, EPO Plan and DPC Plan

- The following Cigna providers have been added to EHP Preferred Network payment structure:
  - Bayfront Health System
  - H Lee Moffitt Cancer Center
  - Tampa General
- The following EHP Contracted Providers have been added to the EHP Preferred Network payment structure:
  - Sarasota Memorial Hospital and First Physicians Group of Sarasota

# All Children's Hospital (continued)

- Care at the following Select Pediatric Providers covered at 100% with the exception of Specialty Care Office Visits, Emergency Room/Observation Care, and Medical Advice Messaging (see schedule of benefits for coverage) and sent to Cigna for repricing:
  - Johns Hopkins All Children's Hospital and outpatient locations
  - Johns Hopkins All Children's Specialty Physicians
- The following providers have been added to covered infertility providers and sent to Cigna for repricing:
  - Florida Fertility Institute
  - The Reproductive Medicine Group
- The following provider has been added to covered surgical treatment for morbid obesity provider and sent to Cigna for repricing:
  - Tampa General

# Member ID Cards

**JOHNS HOPKINS HEALTH PLANS**

**Employer Health Programs (EHP)**  
**Johns Hopkins PPO Plan**  
Eff. Date: 01/01/2024

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Member: SAMPLE MEMBER  
ID#: 100000038\*00  
Group #: E0009300/003C  
Plan #: JP5C0000

**CVS caremark**

Generic: \$10      Bin: 004336  
Preferred: \$40      PCN: ADV  
Non-Preferred: \$65      Group: RX6795

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PCP: \$10      Plan Deductible:  
Urgent Care Facility: \$25      Individual \$300      Family \$600  
Emergency Room: \$250      Plan OOP Max (Medical):  
Individual \$3000      Family \$6000

Higher amounts apply for Out-of-Network care.  
For more info, consult your Summary Plan Description.

**cigna**  
Shared Administration  
PPO

Call 800-262-2393 or visit EHP.org

X128562000035

EHP Customer Service: 1-800-261-2393  
Website: EHP.org  
Provider Search: EHP.org/find-a-provider: my.Cigna.com  
Pharmacy Information: 1-888-543-4921  
Mental Health and Substance Use Disorder: 1-800-261-2429

**Notice:** Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.

**Providers:** Precertification must be obtained for services as specified in the member's plan. For precertification, call the number shown on this card.  
EHP Precertification: 1-800-261-2421

**Submit claims to:** Johns Hopkins Employer Health Programs - EHP  
P.O. Box 4227, Scranton, PA 18505  
Electronic Payer ID: 52189

Cigna Eligibility/Benefits/Precertification: 800-261-2393  
Benefits are not insured by Cigna or affiliates.

**MultiPlan**  
Complementary Network

AWAY FROM HOME CARE

- The specific plan is identified in the top right section of the EHP Member ID card
  - [Johns Hopkins EHP PPO](#)
  - [Johns Hopkins EHP EPO](#)
  - [Johns Hopkins EHP DPC](#)
  - [BSI PPO Plan](#)
- Members employees and members with DPC as PCP with the DPC plan (Direct Primary Care) can only see their assigned Johns Hopkins Community Physicians Cigna National Network for EHP Members: National medical coverage inside and outside the state of Maryland through the Cigna PPO Network
  - [Find a Provider | Johns Hopkins Employer Health Programs](#) or call 866-494-4872

# EHP Member ID Cards

## EHP PPO Sample Card:



**Employer Health Programs (EHP)**  
**Johns Hopkins PPO Plan**  
 Eff. Date: 01/01/2024

---

Member: SAMPLE MEMBER  
 ID#: 100000038\*00  
 Group #: E0009300/003C  
 Plan #: JP5C0000



Generic: \$10      Bin: 004336  
 Preferred: \$40      PCN: ADV  
 Non-Preferred: \$65      Group: RX6795

---

PCP: \$10  
 Urgent Care Facility: \$25  
 Emergency Room: \$250

**Plan Deductible:**  
 Individual \$300      Family \$600  
**Plan OOP Max (Medical):**  
 Individual \$3000      Family \$6000





X128562000035

Call 800-262-2393 or visit EHP.org

Higher amounts apply for Out-of-Network care.  
For more info, consult your Summary Plan Description.

EHP Customer Service: 1-800-261-2393  
 Website: EHP.org  
 Provider Search: EHP.org/find-a-provider: my.Cigna.com  
 Pharmacy Information: 1-888-543-4921  
 Mental Health and Substance Use Disorder: 1-800-261-2429

**Notice:** Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.

**Providers:** Precertification must be obtained for services as specified in the member's plan. For precertification, call the number shown on this card.  
**EHP Precertification:** 1-800-261-2421

**Submit claims to:** Johns Hopkins Employer Health Programs - EHP  
 P.O. Box 4227, Scranton, PA 18505  
**Electronic Payer ID:** 52189


**Cigna Eligibility/Benefits/Precertification:** 800-261-2393

Benefits are not insured by Cigna or affiliates.



AWAY FROM HOME CARE


## EHP DPC Plan Sample Card:



**Employer Health Programs (EHP)**  
**Johns Hopkins DPC Plan**  
 Eff. Date: 01/01/2024

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Member: SAMPLE MEMBER  
 ID#: 100000101\*00  
 Group #: E0009200/001C  
 Plan #: JD1C0000





Generic: \$10      Bin: 004336  
 Preferred: \$40      PCN: ADV  
 Non-Preferred: \$65      Group: RX6795

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PCP Name: SAMPLE PCP  
 PCP: DPC: \$0  
 Non DPC: \$10  
 Urgent Care Facility: \$25  
 Emergency Room: \$250

**Plan Deductible:**  
 Individual \$150      Family \$300  
**Plan OOP Max (Medical):**  
 Individual \$1500      Family \$3000





X128777000002

Call 800-262-2393 or visit EHP.org

Higher amounts apply for Out-of-Network care.  
For more info, consult your Summary Plan Description.

EHP Customer Service: 1-800-261-2393  
 Website: EHP.org  
 Provider Search: EHP.org/find-a-provider: my.Cigna.com  
 Pharmacy Information: 1-888-543-4921  
 Mental Health and Substance Use Disorder: 1-800-261-2429


**Notice:** Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.

**Providers:** Precertification must be obtained for services as specified in the member's plan. For precertification, call the number shown on this card.  
**EHP Precertification:** 1-800-261-2421

**Submit claims to:** Johns Hopkins Employer Health Programs - EHP  
 P.O. Box 4227, Scranton, PA 18505  
**Electronic Payer ID:** 52189

**Cigna Eligibility/Benefits/Precertification:** 800-261-2393

Benefits are not insured by Cigna or affiliates.



AWAY FROM HOME CARE

# EHP Member ID Cards

## EHP EPO Sample Card:

		<b>Employer Health Programs (EHP)</b> <b>Johns Hopkins EPO Plan</b> Eff. Date: 01/01/2024	
Member: SAMPLE MEMBER ID#: 100000039*00 Group #: E0009100/001C Plan #: JE1C0000			
PCP: \$20 Urgent Care Facility: \$40 Emergency Room: \$250		Plan Deductible: Individual \$500    Family \$1000 Plan OOP Max (Medical): Individual \$3000    Family \$6000	
Out-of-Network care is not covered except in emergencies. For more info, consult your Summary Plan Description.			
Call 800-262-2393 or visit EHP.org			

X128562000036



<p> <b>EHP Customer Service:</b> 1-800-261-2393  <b>Website:</b> EHP.org  <b>Provider Search:</b> EHP.org/find-a-provider: my.Cigna.com  <b>Pharmacy Information:</b> 1-888-543-4921  <b>Mental Health and Substance Use Disorder:</b> 1-800-261-2429                 </p> <p> <b>Notice:</b> Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.                 </p> <p> <b>Providers:</b> Precertification must be obtained for services as specified in the member's plan. For precertification, call the number shown on this card.  <b>EHP Precertification:</b> 1-800-261-2421                 </p> <p> <b>Submit claims to:</b> Johns Hopkins Employer Health Programs - EHP                  P.O. Box 4227, Scranton, PA 18505  <b>Electronic Payer ID:</b> 52189                 </p> <p> <b>Cigna Eligibility/Benefits/Precertification:</b> 800-261-2393  <b>Benefits are not insured by Cigna or affiliates.</b> </p>		
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# EHP Changes for 2025

- Plan coverage for Ambulatory Surgery Center (POS 24) in-network co-insurance has been increased
  - Plans pay 85% EHP network, 95% Hopkins Preferred Network
- Visit limits for Occupational, Physical and Speech Therapy have been removed
- Home Health have been increased to 180 visits per plan year



# Vendors & Provider Resources

# Availity Essentials: Provider Portal

Availity Essentials is a secure, real-time platform that connects providers with payers to help providers manage medical benefits and insurance claims. With [Availity](#), EHP providers can view:

- Member eligibility requests and benefit information
  - Provider search options include searching by member's first and last name and date of birth
- Electronic claims submission
- Claims status
- Claims payment information
- Electronic submission of prior authorization requests
- JPAL (check prior authorization requirements prior to rendering services)
- Access to eviCore and Novologix portals, electronic submission of payment disputes and clinical appeals for EHP
- Download commonly used forms, find customer service numbers for our plans, review policies and procedures and more.
- Review communications updates and provider education presentations.

# Vendor: Novologix Medical Injectables

Prior authorization will be required for the medical injectable drug codes listed in this link:

- **Codes Requiring Prior Authorization:**
  - [List of applicable codes for EHP.](#)

## How to Request Prior Authorization:

- Providers may submit prior authorization requests electronically by accessing the NovoLogix portal through the [Avality](#) Provider Portal. The Novologix portal must be accessed through [Avality](#) for EHP prior authorization requests.
- Providers may also contact NovoLogix by phone at 844-345-2803.

# Vendor: UpLift Behavioral Health

- EHP members have access to behavioral health providers in the UpLift network, a virtual behavioral health practice that expands access to providers. EHP members can schedule an appointment with a psychiatrist or therapist as soon as the next day, and no further out than two weeks.
- UpLift supplements the existing network of quality behavioral health care providers available to members, adding more therapists and psychiatrists. The UpLift platform also makes finding the right care simple by matching a therapist or psychiatrist according to personalized needs and provider specialties, allowing members to filter searches for different results. While UpLift is primarily virtual, some providers offer in-person appointment options. Member cost shares for UpLift providers are the same as all in-network behavioral health care services.
- Members can self-refer or providers can now refer members to UpLift to locate a provider in the UpLift network. Refer members to [joinUpLift.co](https://joinUpLift.co) to learn more and to find a provider.

# Vendor: PrudentRx

- PrudentRx Program: EHP offers members a program from CVS Health and PrudentRx that will help members save money when they fill eligible specialty medications.
- All medications on the PrudentRx Specialty Drug List are subject to a 30% coinsurance. However, if a member is participating in the PrudentRx program, they will have a \$0 out-of-pocket responsibility for the covered specialty medication prescription.
- Participation in the program includes enrollment in an available manufacturer copay assistance program for the specialty medication being taken. Medications on the PrudentRx Specialty Drug List may only be obtained from Johns Hopkins Outpatient Pharmacies and CVS Specialty Pharmacies.
- Please note the following:
  - The [PrudentRx Specialty Drug List](#) is subject to change, and updated monthly.

# Provider Resource: JPAL

The Johns Hopkins Prior Authorization Lookup tool (JPAL) is a provider resource to check and verify preauthorization requirements for outpatient services and procedures. Located in the [Availty](#) provider portal, JPAL offers a user- friendly way for providers to look up prior authorization requirements.

- Providers can simply click on the JPAL link in [Availty](#) under the “Administration” tab to access this tool.

## JPAL tips:

- Please remember to confirm the authorization requirements of all outpatient procedures via JPAL before delivery of service.
- If prior authorization status is unclear, submit an authorization request to Johns Hopkins Health Plans Utilization Management department.
- Authorizations are not a guarantee of payment.
- Instructions on how to use JPAL are on the [Johns Hopkins Health Plans Provider Education webpage](#) and on [Availty](#).

# Provider Resource: JPAL (continued)

## JPAL features:

- Search by specific procedure code or procedure description.
- Confirm the authorization requirements of all procedures before delivery of service.
- Search results are organized by procedure code, modifiers, procedure description, and individual health plans.
- Clicking on the procedure code link or on any health plan link brings up specific details, such as the rules pertaining to prior authorization for each health plan and access to the applicable medical policy document.

**NOTE:** JPAL is a resource to look up prior authorization requirements only. Authorization requests cannot be submitted through JPAL. Please follow Johns Hopkins Health Plans' current policies and procedures to request prior authorization, which are available on the [Johns Hopkins Health Plans website](#).

# Provider Resource: Online Provider Update Form

If there are any demographic changes in your practice or facility, you are **required** to notify the Provider Relations department:

- Submit digitally via the [Online Digital Provider Information Update Form](#).
- Email to [ProviderChanges@jhhp.org](mailto:ProviderChanges@jhhp.org). This email box is monitored daily to collect and process all provider changes. Please fill out the [Provider Information Update Form](#) (located on the Resources & Guidelines page, under “For All Providers” and then “Forms”) and attach it to the email before sending to Johns Hopkins Health Plans.
- Information on both forms includes changes to telephone numbers, address, suite number and email or fax numbers.
- **Note:** If you are using a Social Security Number in place of a Tax ID, the completed update form must be faxed to 410-762-5302 to ensure identity protection. Do not send digitally or by email.
- W-9 requests should be submitted to: [w9requests@jhhp.org](mailto:w9requests@jhhp.org).
- Any questions about the provider changes reporting process may be directed to Provider Relations at 888-895-4998 (option 4).

\*If you are under a Delegated Credentialing Agreement please follow the process outlined per that agreement.



# Provider Resource: OnDemand

Johns Hopkins OnDemand Virtual Care (powered by Teladoc) gives members access to an urgent care medical visit 24/7 from the comfort of their home, or anywhere they may travel in the United States. Johns Hopkins Health Plans encourage members to utilize their primary care provider when possible, but Johns Hopkins OnDemand Virtual Care is an alternative option to quickly access needed care.

- The Johns Hopkins OnDemand Virtual Care service is as an online telemedicine platform for both adult and pediatric patients. It is available to members through mobile app, computer or tablet.
  - The service is intended for minor care concerns that do not require lab work, such as colds, rashes and pinkeye.
  - The service is not for medical emergencies. If a patient is experiencing a medical emergency, they should call 911 or go to the nearest emergency room.

## OnDemand Virtual Care Process

- Johns Hopkins providers will staff the platform and attempt to perform the virtual visit with the member first. If a Johns Hopkins provider is not available, or if the member is located in a state where the Johns Hopkins provider is not licensed, then a Teladoc-employed provider will see the member virtually.
- The health care provider will join via secure video or phone and assess the member's symptoms, make a diagnosis, recommend next steps and answer any questions the member may have.
- If medications are necessary, the provider will electronically send prescriptions to the member's network pharmacy.
- Telemedicine providers will refer members back to their PCP for follow-up care.

**Please note:** Members can use their providers' telemedicine services, but they cannot request to see their PCP through the Johns Hopkins OnDemand Virtual Care program.

# Claims & Appeals, Prior Authorization

# Claims & Appeals Submission

## Billing Address

Johns Hopkins EHP  
P.O. Box 4227  
Scranton, PA 18505

- 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 & Appeals Submission

- Claims must be submitted within 180 calendar days of the date of service. The [Provider Claims/Payment Dispute Form](#) can be used for these issues.
  - A web version of this form is located in [Avality](#)
- Administrative appeals (timely filing, care not coordinated by PCP, authorization not on file, member not eligible at time of service, incorrect coding) must be submitted within 90 business days of the date of denial. [The Provider Appeal Submission Form](#) can be used for these issues.
- For additional information on EDI (Electronic Data Interchange), please send an email request to [edi@jhhp.org](mailto:edi@jhhp.org). EDI Payor ID **#52189**.

# Facets, PNC/ECHO

- Johns Hopkins Health Plans offers a claims adjudication system, claims payment and remit service, and claims editing system:
- **Facets Claims System**
- **Claims Address for EHP:** P.O. Box 4227, Scranton, PA 18505
- **Electronic Claims Payments and Remittances**
- **IMPORTANT:** PNC/ECHO will provide payments and remittances by virtual card if the provider does not request paper checks or register to receive reimbursement via EFT(see link below to request paper checks).
  - <https://echovcards.com> or register for EFT at <https://enrollments.echohealthinc.com/EFTERADirect/JohnsHopkins/>
  - PNC/ECHO Customer Service can be reached at 888-697-6755 (8 a.m. – 6 p.m. ET), for assistance with EFT enrollment call Enrollment Services at 888-834-3511.

# Referral and Prior Authorization Process

- **Prior authorization.** 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.

To find out which services require a referral, prior authorization or medical review, please visit [Avality](#) and click on the link for the Johns Hopkins Prior Authorization Look-Up Tool (JPAL), which is located under the Administration tab.

# Other Important Information

# Network Appointment Standards

Johns Hopkins Health Plans complies with state regulations designed to help make sure our plans and providers can give members access to care in a timely manner. These state regulations require us to ensure members are offered appointments within the following time frames:

Service	Appointment wait time (not more than):
History & Physical Exam	Ninety (90) calendar days
Routine Health Assessment	Thirty (30) days
Non-urgent (symptomatic)	Seven (7) calendar days
Urgent Care	Twenty-four (24) hours
Emergency Services	Twenty-four (24) hours
Service	Appointment wait time (not more than):
Behavioral Health Routine Initial	Ten (10) business days
Behavioral Health Routine Follow-up	Thirty (30) calendar days
Behavioral Health Urgent	Immediate
Behavioral Health Emergency	Immediate



# Fraud, Waste and Abuse

- Johns Hopkins Health Plans Payment Integrity department wants to inform you of our information processes for reporting Fraud, Waste, and Abuse.
- **Complaints of possible Fraud, Waste, and Abuse can be reported to the Johns Hopkins Health Plans Payment Integrity Department - Fraud, Waste, and Abuse.**
- **By Mail:**  
Payment Integrity Department  
Attention: FWA  
7231 Parkway Drive, Suite 100  
Hanover, MD 21076
- **Phone:** 410-424-4971
- **Fax:** 410-424-2708
- **Email:** [FWA@jhhp.org](mailto:FWA@jhhp.org)

# Healthcare Effectiveness Data and Information Set (HEDIS®)

- HEDIS is a widely used set of health care performance measures that is developed and maintained by the National Committee for Quality Assurance (NCQA). Examples of HEDIS measures are Comprehensive Diabetes Care, Breast Cancer Screening, Controlling Blood Pressure, and Colorectal Cancer Screening.
- For detailed information about HEDIS, please go to the [NCQA website](#) or view our [Quality Measures Tip Sheet](#).

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA)

# Cultural Competency Training

Cultural competency training is a requirement for participating EHP providers in the Johns Hopkins Health Plans network.

As a health care provider contracted by Johns Hopkins Health Plans, our expectation is for you and your staff to gain and continually deepen your knowledge of, and ability to support, the values, beliefs and needs of diverse cultures. This results in effective care and services for all people by taking into account each person's values, experiences and linguistic needs.

By enhancing the cultural competency of your workforce, together, we can:

- Improve the quality of patient-care delivery and health outcomes
- Increase member satisfaction
- Provide greater access to services

HHS offers [A Physician's Practical Guide to Culturally Competent Care](#), a free, online educational program accredited for physicians, physician assistants, and nurse practitioners. This guide is available at the HHS website ([cccm.thinkculturalhealth.hhs.gov](http://cccm.thinkculturalhealth.hhs.gov)).

After completing the training, please upload a copy of your certificate to <https://www.hopkinsmedicine.org/johns-hopkins-health-plans/providers-physicians/resources-guidelines/provider-education/cultural-competency>

# Johns Hopkins Health Plans Communication Services

- Johns Hopkins Health Plans provides free tools and services to people with disabilities to communicate effectively.
- Johns Hopkins Health Plans also provides free language services to people whose primary language isn't English (e.g. qualified interpreters and information written in other languages).
- These services can be obtained by calling the Customer Service number on their member ID card.
- You may also contact Johns Hopkins Medicine International for assistance or submit a member referral to EHP.
  - [Language Assistance Services](#)
  - [Johns Hopkins Medicine Language Services](#)

# 2025 COVID-19 Information

- EHP will pay for the COVID-19 vaccine and its administration (including approved booster doses), without cost sharing, for members enrolled in their plans.

# Important Numbers

## Utilization Management

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

## DME

- 410-762-5250 Fax

## Behavioral Health Services

- 410-424-4476 or 800-261-2429
- 410-424-4891 Fax

## Case/Disease Management

- 800-557-6916
- [caremanagement@jhhp.org](mailto:caremanagement@jhhp.org)
- [compliance@jhhp.org](mailto:compliance@jhhp.org)

## Cigna

- 866-494-4872

## Pharmacy Services

- 888-819-1043, option 4
- 410-424-4607 Fax

# Johns Hopkins Health Plans Customer Service

## Employer Health Programs (EHP) Customer Service

410-424-4450 or 800-261-2393

[ehpcustomerservice@jhhp.org](mailto:ehpcustomerservice@jhhp.org)

**Provider Relations: 888-895-4998  
(option 4)**

**THANK YOU**