

# PROVIDER NOTICE

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

## Medical Policy Change for Site of Service Outpatient Procedures

**Effective Date:** Feb. 1, 2025

**Health Plans Affected:** Priority Partners, US Family Health Plan (USFHP)

**Type of Change:** Medical Policy

**Explanation of Change:**

The Johns Hopkins Health Plans Medical Policy Advisory Committee (MPAC) has approved new changes and additions to our existing medical policies. This change will go into effect Feb. 1, 2025 for Priority Partners and USFHP.

**CMS23.05 Site of Service - Outpatient Surgical Procedures:**

Johns Hopkins Health Plans will require prior authorization for a site of service review of all of the procedure codes listed in the medical policy when performed in an outpatient setting.

This policy provides guidance for site of service redirection of select planned surgical procedures. Member can be redirected to in-network Ambulatory Surgical Center (ASC) when the procedure is appropriate for ASC and there are no medical contraindications.

Updated to include total knee replacement and sigmoidoscopy procedures to be considered for redirection to ASC when appropriate. The following codes were also added to Appendix A of the policy, for members 18 and older.

- **CPT code 27447** - Total knee arthroplasty
- **CPT code 45331** - Sigmoidoscopy, flexible: with biopsy

The codes and references section were reviewed and updated.

**NOTE:** For procedure codes that ALSO require prior authorization for medical necessity review using clinical review criteria specific to the procedure in ANY site of service (outpatient hospital setting, ambulatory surgery center or office), please refer to JPAL, our prior authorization look-up tool.

To view the full descriptions of these policies, please visit the [Medical Policies](#) section of the Johns Hopkins Health Plans website on or after the effective date.