

Please circulate to others and file in your *Provider Manual* for future reference.

August 23, 2010

MEDI-CAL AND HEALTHY FAMILIES PROVIDER MANUAL REVISIONS

Attached you will find our updated versions of CHG's "Services That Do Not Require Prior Authorization" and "Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities". Changes to these lists reflect additional/replacement CPT codes for services already listed and updated address/phone numbers and services for preferred diagnostic facilities. Effective immediately, these lists replace all other versions for our Medi-Cal and Healthy Families programs.

The new "Services That Do Not Require Prior Authorization" and "Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities" listings can also be accessed on-line at www.chgsd.com under Health Care Resources/Referral Request Resources in the Providers section of our website.

We have also included the following updates to our Medi-Cal and Healthy Families provider manual. Please take a moment to review and contact us if you have any questions.

- Introduction
 - Contacting CHG **revised** to include updated employee names and email addresses
- Claims
 - Submitting Claims **revised** to include the National Correct Coding Initiative adopted by the Centers for Medicare & Medicaid Services (CMS)
- Emergency Care
 - Coordinating Urgent and Emergency Care **revised** the scope of the Telephone Advice Nurse
- Member Services
 - Language Assistance Program **revised** to incorporate the Department of Health Care Services new operational requirements and replaces the existing pages for *Language Interpreter Services* and *Communication with Hearing-Impaired Members*
- Primary Care
 - Primary Care Responsibilities **revised** to include "Languages spoken by provider" under Notice of Operational Changes
- Referral and Authorization
 - Requesting Authorization **revised** to include a reminder that *services for Healthy Families members must be rendered prior to the last day of the month in which the member turns 19 years of age.*
 - Services Requiring Prior Authorization **revised** to reflect new or replacement CPT/HCPCS codes and related services
 - Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities **revised** with new or updated addresses, telephone/fax information and scope of service

As always, we thank you for your cooperation!

Please note: this Provider Alert amends the Provider Manual; your Provider Services Agreement is amended accordingly.

2. Contacting CHG

Community Health Group
 740 Bay Boulevard, Chula Vista, CA 91910
 (619) 422-0422 (800) 640-4662
 Fax: (619) 422-5930
 Website: www.chgsd.com

	Phone	Fax	E-mail
Administration			
Information Systems	(619) 498-6413	(619) 476-3818	asombi@chgsd.com
Quality Improvement	(619) 498-6486	(619) 407-4652	cander@chgsd.com
Financial Services			
Financial Solvency	(619) 498-6427	(619) 425-7803	derk@chgsd.com
Capitation Payments	(619) 498-6491	(619) 425-7803	fquiri@chgsd.com
Health Care Services			
Authorization and Referrals	(619) 498-6400 (800) 224-7766	(619) 425-5348 (619) 425-5720	mjazo@chgsd.com
Behavioral Health Services <i>(Healthy Families)</i> United Behavioral Health <i>(Medi-Cal)</i>	(800) 404-3332 (800) 479-3339	(877) 862-7603	gscola@chgsd.com
California Children Services (CCS)	(619) 498-6421	(619) 498-3811	nbaraj@chgsd.com
Case Management	(619) 498-6400 (800) 945-5570	(866) 897-6024	ehutt@chgsd.com
Chief Medical Officer	(619) 498-6593	(619) 407-4648	ehutt@chgsd.com
Community and Preventive Services	(619) 498-6429	(619) 498-3811	emanci@chgsd.com
Pharmacy Services <i>MedImpact</i>	(619) 498-6476 (858) 566-2727 (800) 788-2949	(619) 407-4653 (858) 578-9732	nkoizu@chgsd.com
Operations			
Claims	(619) 498-6456	(619) 425-7803	npinta@chgsd.com
Contracting	(619) 498-6526 (619) 498-6560	(619) 476-3836 (616) 476-3836	dritch@chgsd.com vgonza@chgsd.com
Fraud & Abuse Hotline	(800) 651-4459		fehava@chgsd.com
Marketing	(619) 498-6557	(619) 585-0932	jetorre@chgsd.com
Member Services	(619) 498-6464 (800) 224-7766	(619) 426-9437	jferna@chgsd.com
Provider Relations	(619) 498-6457	(619) 476-3836	vmgonza@chgsd.com
Provider Services	(619) 498-6498	(619) 427-3386	npinta@chgsd.com
Regulatory Affairs/Compliance Officer	(619) 498-6589	(619) 476-3836	fehava@chgsd.com
Telephone Advice Nurse (TAN)	(800) 647-6966	(877) 862-7603 5pm to 8am daily	

Telephone Advice Nurse (TAN)

Our Telephone Advice Nurse (TAN) provides medical advice to members from 5:00 p.m. to 8:00 a.m., 7 days a week. The Telephone Advice Nurse at (800) 647-6966 will:

- Triage member calls, according to established protocols
- Direct the member to the appropriate care facility
- Instruct the patient according to appropriate medical protocols, if home treatment advice is appropriate

The advice may include instructions for the member to call his/her primary care physician's (PCP) office for an appointment. It is expected that these patients will be triaged by the PCP's Case Manager and given same day appointments if medically indicated.



For further information regarding the **Telephone Advice Nurse** program, contact Health Care Services at (619) 498-6400 or (800) 945-5570.

Behavioral Health Services Quick Reference

	Medi-Cal	Healthy Families
Responsible Plan	United Behavioral Health	Community Health Group
Referral	United Behavioral Health's Access and Crisis Line: (800) 479-3339	No referral is necessary Members can self-refer by calling CHG's Behavioral Health Services at (800) 404-3332
Outpatient	Benefits per Medi-Cal guidelines In July 1998, the State of California contractually carved-out specialty mental health services from Medi-Cal managed care plans.	<ul style="list-style-type: none"> • 20 visits per year; outpatient services for conditions relating to serious emotional disturbances (SED) of a child and serious mental illness (SMI) are not limited • Medication management by a psychiatrist
Inpatient	Benefits per Medi-Cal guidelines In July 1998, the State of California contractually carved-out specialty mental health services from Medi-Cal managed care plans.	<ul style="list-style-type: none"> • 30 days per year; inpatient services for conditions relating to serious emotional disturbances (SED) of a child and serious mental illness (SMI), as defined in California Health and Safety Code, Section 1374.72, are not limited
Chemical Dependency Treatment	<ul style="list-style-type: none"> • Outpatient covered by "Drug Medi-Cal" • Inpatient acute medical detoxification covered by CHG 	<ul style="list-style-type: none"> • 20 outpatient visits per year • Hospital-based inpatient acute medical detoxification
Partial Hospitalization	Not a covered benefit	<ul style="list-style-type: none"> • With prior authorization
Pharmacy	<ul style="list-style-type: none"> • Obtained through a CHG contracted pharmacy • Mood stabilizers and antipsychotics provided through Medi-Cal fee-for-service 	<ul style="list-style-type: none"> • Obtained through a CHG contracted pharmacy



Healthy Families members who are determined to be Seriously Emotionally Disturbed (SED) must receive mental health treatment including psychotropic medications from United Behavioral Health. For additional information, contact CHG's Behavioral Health Services at (800) 404-3332.

Billing for Mid-Level Practitioners' Services

If the rendering provider is a mid-level practitioner, include license number of supervising physician.

National Correct Coding Initiative

Providers are required to follow the coding policies established under the National Correct Coding Initiative (NCCI) adopted by the Centers for Medicare and Medicaid Services (CMS). The NCCI promotes national correct coding methodologies to control improper coding leading to inappropriate payment of claims. The coding policies are based on coding conventions defined in the American Medical Association's CPT manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practices, and a review of current coding practices.

CHG follows NCCI coding policies during the claims adjudication process. Additionally, we have implemented NCCI edits within our claim processing system as a general reference tool that explains the rationale for NCCI edits. The purpose of the NCCI edits is to prevent improper payment when incorrect code combinations are reported (i.e., billing code pairs that should not be reported together).

Further information on NCCI policies and edits can be found in the NCCI Coding Policy Manual for Medicare Services.

When to Submit Claims

Primary Care, Specialty, and Ancillary Providers

Claims must be submitted within **120 calendar days** from the date of service. If CHG is a secondary payor, claims must be submitted within **90 days** of the receipt or denial of the primary payment with a copy of the primary payor's EOB.

Hospitals and Skilled Nursing Facilities

Claims must be submitted within **120 calendar days** following the date of discharge or within **120 calendar days** of the date of service unless CHG is secondary payor. If CHG is secondary payor, claims must be submitted within **90 days** of the receipt or denial of the primary payment.

If a hospitalized member incurs an extended length of stay, the hospital should submit interim claims to CHG. These claims must be labeled as "interim claims."



CHG does not have an obligation for claims received more than 120 calendar days after the date of service or date of discharge. The member may not be billed if the provider fails to bill in a timely manner.

Claims Denied by Primary Payors

Claims denied by any primary payor, including the CCS Program, must be submitted to CHG within **90 calendar days** of the denial of the primary payor's EOB.

When CHG is notified of an out-of-area admission, a CHG case manager coordinates the transfer to a contracted facility when the member is medically stable for transfer.

Scope of the Telephone Advice Nurse (TAN)

Within its scope of services, TAN:

- Triage member calls
- Provide members with medical advice
- Provide written notification to CHG of member emergency and urgent care encounters

For information on coordinating **urgent and emergency care**, contact Health Care Services at (619) 498-6400 or (800) 945-5570.

Language Assistance Program

Overview

CHG's language assistance program is dedicated to meeting the language needs of our members. Language assistance services, both clinical and non-clinical, are provided in a culturally competent manner and accessible to all members, including those with limited English proficiency or reading skills, hearing or visual impairment, and diverse cultural and ethnic backgrounds.

Although a majority of CHG staff is bilingual and adequately proficient to provide translation and interpretation services, we also contract with designated agencies to provide limited English proficient members with language assistance services not available through CHG staff. The purpose of the language assistance program is to:

- provide clear communication with members,
- ensure effective interpretation and translation services are easily accessible and available to members in threshold languages, and,
- support appropriate and timely provision of care.

Interpretation services, whether medical or non-medical in nature, are available to all members at all points of contact. Please note that the language assistance program is accessible at no cost to either the member or the provider.

Member Assessment and Education

CHG conducts an annual assessment to review member language needs and demographic profiles. Member language preferences and ethnic diversity are evaluated to determine significant changes in threshold languages. This information is entered into CHG's information system which is available to all staff and providers who interact with CHG members.

We also educate members on accessing language assistance services. We convey the availability of these services via our Evidence of Coverage (EOC), new member welcome calls, contacts with Member Services to request interpreter assistance, or when care is accessed and interpreter services are not readily available through the provider's office.

All requests for interpreter services are coordinated through Member Services. Members with limited English proficiency are encouraged not to bring family, including their minor children, or friends to medical appointments for the sole purpose of providing translation assistance.

Provider Training and Education

During the primary care site certification process, we conduct a needs assessment to determine the type and amount of training providers and staff may need in order to meet the language needs of their prospective members. This assessment is based in part on the demographic area served by the primary care site.

When members report their preferred language, we capture this information and make it available to all CHG providers through our on-line eligibility system.

Requests for interpreter services are coordinated through Member Services. Staff is available 24 hours a day, seven days a week. When there is a need for interpreter service for languages other than those readily available from CHG staff, interpreter services are provided through the use of the Language Line, available 24 hours per day, seven days a week. Training on the availability and use of interpreter services is mandatory for all primary care providers and their staff.

Providers are also required to document any member refusal for interpreter or translation services in the member’s medical record.

✓ Members with limited English proficiency should not be encouraged to bring family, including minor children, or friends to medical appointments for the sole purpose of providing translation assistance.

Access to Telephone Interpreter Services

Language assistance is provided by the appropriate interpreter in a conference call setting. A CHG Member Services representative remains on the line to provide additional service or answer any questions that are translated by the interpreter for the member.

Time	Call	Number
24 hours a day	Member Services	(619) 498-6464 (888) 244-4430

Make your language request to Member Services staff. If staff is unable to provide linguistic help, they will contact a Language Line representative for additional assistance.

Face-to-Face Interpreter Services

CHG can also arrange face-to-face interpreter services. Call Member Services with information regarding the language requested, the date and time of the member’s appointment, and the address where the interpretation will take place.

Communication with Hearing-Impaired Members

CHG is committed to providing hearing-impaired members access to services through:

- Network Interpreting Service, which can arrange an interpreter to accompany a member to a health care appointment
- California Relay Service's Telecommunications Device for the Deaf (TDD).

The California Relay Service (CRS) operates 24 hours a day, seven days a week. Users can make as many calls as desired and talk as long as needed. There is no charge to either the member or provider to use this relay service. All calls made through the CRS are confidential. Member Services coordinates these services.

If providers do not have their own arrangements for interpretation and TDD services, they may contact Member Services at (619) 498-6464 or (800) 224-7766, 24 hours a day, seven days a week. Depending on the type of assistance required, an interpreter will be scheduled or a message will be typed to the member via TDD and the member's response will be verbally relayed.

Training on the availability and proper use of interpreter resources and TDD equipment is mandatory for all primary care providers and their staff.

Communication for Visually-Impaired Members

CHG makes available printed material upon request for members who are visually-impaired. Requests for enlarged print or audio recordings, including those related to grievance procedures and forms or CHG's response, are coordinated through the Braille Institute Universal Media Services at:

The Braille Institute
741 North Vermont Avenue
Los Angeles, CA 90029
Contact: Carol Jimenez, Transcribing Coordinator

All requests for services are coordinated through Member Services

Health Education Materials

We also make available, at no cost to either members or providers, health education materials in several languages and appropriate reading levels.

For further **information** or **assistance with language interpreter services** or **services for hearing or visually-impaired members**, contact Member Services at (619) 498-6464 or (800) 224-7766.

For training on the **use of interpreter services and TDD** equipment, contact Provider Relations at (619) 498-6457.

Notification of Operational Changes

Primary care sites must notify CHG in writing at least 45 days in advance of any operational changes that pertain to:

- Delivery of care
- Address, telephone number, hours of operation
- Physician and non-physician medical practitioner roster updates
- Physician profiles
- Languages spoken by providers
- Contractual status, including closing of panel to new plan members
- Changes in hospital privileges
- Opening additional sites



Please fax all changes to Provider Relations at (619) 476-3836.



If the member's PCP is part of an IPA or medical group, hospital services must be coordinated between CHG and the IPA/medical group. Authorization for **physician services** is generally obtained from the IPA/medical group. Authorization for **facility and facility-related charges** is obtained from CHG.

Pre-Certification of Urgent Requests

Urgent means the services required to prevent serious deterioration of health following the onset of an unforeseen condition or injury; has the potential to become an emergency in the absence of treatment; when the member's condition is such that the member faces an imminent and serious threat to his or her health, including, but not limited to, the potential loss of life, limb or other major bodily function. An urgent request is also any request for medical care or treatment with respect to which the application of the time periods for making non-urgent care determinations:

- Could seriously jeopardize the life or health of the member or the member's ability to regain maximum function, based on the prudent layperson's judgment **or**
- In the opinion of a practitioner with knowledge of the member's medical condition, would subject the member to severe pain that cannot be adequately managed without the care or treatment that is the subject of the request.

Requests for urgent services, **when no automatic approval is received**, must be noted as "Urgent" on faxed requests and are given priority over non-urgent, routine requests. Requests for urgent services must include appropriate supporting medical information, e.g., physician progress notes, lab and x-ray results, and prior specialty consultation reports and are processed within 72 hours of receipt.



Services for Healthy Families members must be rendered prior to the last day of the month in which the member turns 19 years of age.

Emergency Episodes

Prior authorization is not required for emergency medical conditions. However, emergency rooms must notify CHG within 24 hours regarding all members accessing the emergency room.

If the member is found to have a non-emergency condition, emergency room staff coordinates with CHG to redirect the member to his/her primary care site for non-emergency care.

Follow-up to Emergency Care

Follow-up care for an emergency episode is provided through the primary care site.

Emergency room personnel instruct the member to return to his/her PCP for follow-up care. If the member's condition requires a specialty referral, the PCP's office will request authorization and arrange the appointment.

Services That Do Not Require Prior Authorization Medi-Cal and Healthy Families

- If diagnostic services listed below are directed to providers not listed as “Preferred Free-Standing Facilities” on the following pages, **PRIOR AUTHORIZATION IS REQUIRED**.
- Any services including those listed below performed at hospital-based facilities **REQUIRE PRIOR AUTHORIZATION** from CHG.
- For the purpose of this list, Fallbrook Hospital is considered a free-standing facility for outpatient services.
- Services that are deemed “freedom of choice” are denoted by an “F” in the left-hand column below; these services do not require a facility authorization.
- Eligibility/IPA membership must be verified prior to submitting requests for service.
- All other services must be obtained from providers and facilities in CHG’s contracted network with the exception of the following: **freedom of choice, minor consent, preventive health and emergency services**. Services related to **infertility, perinatology or genetics REQUIRE PRIOR AUTHORIZATION**.
- Minor consent and preventive health services **do not require prior authorization** but **must be obtained from a contracted plan provider**.
- All **routine** lab services (**including pre-op for elective surgery**) must be referred to Quest Diagnostics and **DO NOT REQUIRE PRIOR AUTHORIZATION. PRIOR AUTHORIZATION IS REQUIRED** if not performed by Quest Diagnostics.

✓ Services for Healthy Families members must be rendered prior to the last day of the month in which the member turns 19 years of age.


Codes	Description	Line of Business
F 11976	Insertion/removal of implantable contraceptive capsules	M, HF
19100, 19102, 10021-10022, 77031	Stereotactic breast biopsy	M, HF
45330	Screening flexible sigmoidoscopy (if age 50 or over)	M
45378, 45380	Colonoscopy (if age 50 or over)	M
F 55250	Vasectomy <i>Sterilization consent form required</i>	M
56420	I & D of Bartholin cyst or abscess <i>In-office procedure only</i>	M, HF
56501	Trichloroacetic acid/cryotherapy for vulva warts	M, HF
56515	Excision of vulvar and peri-rectal condyloma	M, HF
57061	Destruction of vaginal lesion(s); simple, any method	M, HF
57452-57454	Colposcopy with and without biopsy	M, HF
57460	LEEP <i>Facility requires prior authorization</i>	M, HF
57500	Cervical polypectomy/biopsy	M, HF
57510-57511	Cryocautery of cervix, initial or repeat	M, HF
58100	Endometrial biopsy	M, HF
58120	Uterine D & C (Non-Obstetrical) <i>Facility requires prior authorization</i>	M, HF
F 58300-58301, X1522, X1532, J7300, J7302	IUD insertion and removal	M, HF

Codes	Description	Line of Business
F 58600-58611, 58615, 58670-58671, 586700, Z1208, Z1210	Tubal ligation <i>Sterilization consent form required</i>	M
59000, 76946	Amniocentesis, any method, Ultrasonic guidance for amniocentesis	M, HF
59025	Fetal non-stress test (NST) <i>Facility authorization not required</i>	M, HF
59400, 76805(x1), Z1032, Z1034(x8), Z1036(x1), Z1038(x1)	Basic obstetrical care per ACOG guidelines	M, HF
59409, 59514	Vaginal delivery, C-section (professional only)	M, HF
59510	Routine OB care including C-Section	M, HF
59812	Treatment of miscarriage; any trimester	M
59820-59821	Uterine D & C for treatment of missed abortion, completed surgically	M, HF
59840-59841, 59850-59851	Abortion (including RU-486) <i>Performed at contracted facility</i>	M
74240-74241, 74245-74247, 74249	UGI Series	M, HF
74270	Barium Enema	M, HF
74400	IVP	M, HF
77051-77059, G0202	Mammogram	M, HF
76536	Ultrasound, Thyroid	M, HF
76645	Ultrasound, Breast	M, HF
76700-76705	Ultrasound, Abdominal	M, HF
76770-76775	Ultrasound, Retroperitoneal, complete	M, HF
76805, 76810, 76815-76816	Ultrasound OB, OB of a multiple gestation pregnancy after 1st trimester, Ultrasound limited, OB Ultrasound (gestational age, heart beat, placental location, fetal position, Echo PG uterus B-scan with image documentation)	M, HF
76817, 76830	Ultrasound, Transvaginal	M, HF
76856-76857	Ultrasound, Pelvic	M, HF
76870	Ultrasound, Scrotum	M, HF
76872	Ultrasound, Prostate	M, HF
76942	Ultrasonic guidance needle biopsy	M, HF
78730	Urinary bladder residual study	M, HF
	Plain Film X-Rays; 1-4 views for Head, Chest, Spine and Pelvis, Abdomen, Upper/Lower Extremities	M, HF
80055, 80074, 80076, 85025, 86592, 86762, 86850, 86900-86901, 87340	OB Labs- All outpatient lab services must be referred to Quest Diagnostic Patient Service Center	M, HF
81025	Pregnancy testing and counseling	M, HF
82143	Amniotic fluid scan (spectrophotometric)	M, HF
82803	Arterial blood gas	M, HF
86359-86361	T-cell (consider CCS clinical criteria)	M, HF
F 86592	Syphilis Test	M, HF
F GC: 86631-86632, 87081, 87210, 87810	Lab tests necessary as part of decision making process for choice of contraceptive methods	M, HF
F 86689, 86701-86703, 87390-87391, 99202-99203	Screening, testing, and counseling of at-risk individuals for HIV and referral for treatment	M, HF
86803	Hepatitis C Antibody	M, HF
F 87485-87492	Chlamydia	M, HF
F 87528-87539	Herpes or HIV (consider CCS clinical criteria)	M, HF
F 87590-87592	Neisseria gonorrhea	M, HF
F 87621	HPV DNA Assay	M, HF
88141-88167, Q0091	Cytopathology / PAP, Screen pap smear to QUEST	M, HF
88300-88309	Level I-Level VI surgical pathology; biopsy All SPECIMENS FROM IN-OFFICE PROCEDURES GO TO QUEST	M, HF
90384-90386, X6098	Rhogam full dose; mini dose	M, HF
93000	Routine EKG with at least 12 leads; interpretation/report (Adults only)	M

Codes	Description	Line of Business
93880, 93882	Carotid Doppler	M, HF
94760	Noninvasive ear or pulse oximetry for oxygen saturation; single reading	M, HF
97810-97811, 97813-97814	Acupuncture	HF
98940-98943	Chiropractic manipulative treatment	HF
F 99201-99204	Diagnosis and treatment of STDs if medically indicated	M, HF
F 99201-99204	Provision of contraceptive pills/devices/supplies	M, HF
99201-99204, 99242-99243	History & Physical examination – OB/GYN	M, HF
99201-99204, 99242-99244	Endocrinology consultation with a diagnosis of diabetes (Adults only)	M
99211-99215	Follow up care visits for OB/GYN services	M, HF
99238, 99460, 99462-99463	Normal newborn care in hospital	M, HF
99404, 99412	Health education	M, HF
A7005, A7011, A7015	Administration Kit, Nebulizer Tubing and Nebulizer Mask	M, HF
E0100, E0105	Cane	M, HF
E0114	Crutches – Limit 1 pair of crutches in 6 month period	M, HF
E0135, E0143	Walker <i>from LifeCare Solutions ONLY</i>	M, HF
E0155 (wheel attachment); E0156 (seat attachment)	Walker wheels attachment, rigid pick-up walker, pair/seat attachment <i>from LifeCare Solutions ONLY</i>	M, HF
E0163	Commode (Adults only) <i>from LifeCare Solutions ONLY</i>	M
E0244	Raised toilet seat (Adults only) <i>from LifeCare Solutions ONLY</i>	M
E0245	Tub Stool or Bench <i>from LifeCare Solutions ONLY</i>	M, HF
E0944, L8300	Pelvic Belt (vulvar support)	M, HF
F J1055, X6051	Medroxyprogesterone 150mg (Depo-Provera for contraception)	M, HF
L0120	Neck Collar, flexible, non-adjustable	M, HF
L0630	Lumbar Support/Maternity Support	M, HF
L1810, L1820, L1830	Knee Brace	M, HF
L3908	Wrist Splint	M, HF
L4350-L4360	Cam Walker (orthos may dispense w/visit)	M, HF
Z6200-Z6210, Z6300-Z6308 Z6400-Z6414, Z6500	Basic Obstetrical, nutritional, health education, and psychosocial services as defined by CCR, Title 22, sections 51348 and 51348.1 (CPSP services)	M
Z7500	OB assessment for premature labor <i>Facility authorization not required</i>	M, HF
Z7514	OB observation, O/P (R & B, less than 24-hour stay) <i>Facility authorization not required</i>	M, HF

F = Freedom of Choice
M = Medi-Cal HF = Healthy Families

In order to assure that services from LifeCare Solutions for CHG members are processed timely, contact LifeCare Solutions at (858) 565-1800 (customer service). The following must be faxed to LifeCare Solutions at (858) 565-9223: **Patient Rx, address and phone number along with Authorization # for equipment orders as required. Equipment will only be delivered if these requirements are met.**

 **Medi-Cal and Healthy Families** members requiring normal routine eye care, exams and glasses should contact VSP Member Services at (800) 877-7195.

San Diego County Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities

The following facilities are available for diagnostic services in **San Diego County**.

Area of County	Available Provider	Address and Phone Number	Services Provided
North Coastal	Carlsbad Imaging Center	3144 El Camino Real, Suite 100 Carlsbad, CA 92008 T: (760) 730-3536 F: (760) 720-4833	MRI, CT, Ultrasound, X-Ray, DEXA
	Cassidy Medical Group	145 Thunder Drive Vista, CA 92083 T: (760) 630-5485 F: (760) 630-2515	X-Ray, Mammogram
	Encinitas MRI Center	345 Saxony Road, Suite 100 Encinitas, CA 92024 T: (760) 436-4155 F: (760) 436-4034	MRI, CT
	Imaging Healthcare Specialists	477 North El Camino Real, Suite A-102 Encinitas, CA 92024 T: (760) 452-7150 F: (760) 632-5389	MRI, CT, Interventional Radiology, Pain Management, Ultrasound, DEXA, X-Ray
	Imaging Healthcare Specialists	317 14 th Street, Suite 195 Del Mar, CA 92014 T: (858) 720-9294 F: (858) 362-7581	X-Ray
	Imaging Healthcare Specialists	1200 Garden View Road, Suite 110 Encinitas, CA 92024 T: (760) 632-9729 F: (760) 452-7100	PET/CT, Ultrasound, Digital Mammogram, Nuclear Medicine
	Imaging Healthcare Specialists	3601 Vista Way, Building A, Suite 101 Oceanside, CA 92056 T: (760) 631-7505 F: (760) 631-7506	Open MRI, CT, Mammography, Ultrasound, X-Ray
	Imaging Healthcare Specialists	4150 Regents Park Row, Suite 195 La Jolla, CA 92037 T: (858) 622-6464 F: (858) 622-6460	Open MRI, CT, Cardiac CT, Mammogram, Ultrasound
	Imaging Healthcare Specialists	3601 Vista Way, Building A, Suite 101 Oceanside, CA 92056 T: (760) 631-7505 F: (760) 631-7506	MRI, CT, Ultrasound, Digital Mammogram, X-Ray
	InnerVision Wellness Imaging	6185 Paseo Del Norte, Suite 110 Carlsbad, CA 92009 T: (760) 804-9929 F: (760) 804-9939	CT, CT Cardiac Angiography
	Regents Imaging	3909 Waring Road, Suite C Oceanside, CA 92056 T: (760) 630-0014 F: (760) 630-0015	MRI, CT
	Regents MRI	4130 La Jolla Village Drive, Suite 101 La Jolla, CA 92037 T: (858) 200-3300 F: (858) 200-3301	MRI
	North Inland	Tri-City PETCT	902 Sycamore Avenue, Suite 120 Vista, CA 92081 T: (760) 599-9940 F: (949) 242-5594
Advanced MRI & CT of Escondido		255 North Elm Street, Suite 102 Escondido, CA 92025 T: (760) 743-3873 F: (760) 743-3874	MRI, CT
Escondido Imaging Center		355 East Grand Avenue, Suite 3 Escondido, CA 92025 T: (760) 480-6519 F: (760) 480-1012	High Field MRI, Open MRI, MRA, CT, CTA
Gateway Radiology Center		15725 Pomerado Road, Suite 101 Poway, CA 92064 T: (858) 485-6500 F: (858) 485-6542	X-Ray, Ultrasound, Mammogram, Fluoroscopy, Image-guided Pain Management
Imaging Healthcare Specialists		12620 Monte Vista Road, Suite A Poway, CA 92064 T: (858) 487-9729 F: (858) 487-4764	MRI, CT, Ultrasound, Digital Mammogram, DEXA, X-Ray

North Inland -Continued-	Parkway Radiology Center	488 East Valley Parkway, Suite #404 Escondido, CA 92025 T: (760) 739-5400 F: (760) 739-8440	X-Ray, Ultrasound, Mammogram, Stereotactic Breast Biopsy
	Pomerado Imaging	15725 Pomerado Road, Suite 109 Poway, CA 92064 T: (858) 485-6094 F: (858) 485-6059	High Field MRI, Open MRI, MRA, CT, CTA
	Pomerado Imaging	15615 Pomerado Road Poway, CA 92064 T: (858) 485-6094 F: (858) 485-6059	MRI
Central	Imaging Healthcare Specialists	3366 Fifth Avenue San Diego, CA 92103 T: (619) 295-9729 F: (619) 295-2549	MRI, Open MRI, CT, Interventional Radiology, Pain Management, DEXA
	Imaging Healthcare Specialists	2466 First Avenue San Diego, CA 92101 T: (619) 849-6777 F: (619) 239-3667	MRI, CT, PET, Ultrasound, Digital Mammogram, X-Ray Stereotactic Biopsy, DEXA
	Imaging Healthcare Specialists	7625 Mesa College Drive, Suite 103 San Diego, CA 92111 T: (858) 268-4430 F: (858) 573-2266	Open MRI
	San Diego Imaging	7910 Frost Street, Suite 100 San Diego, CA 92123 T: (858) 634-5900 F: (858) 634-5990	MRI, CT, CCTA, MR/CT, Mammogram, Fluoroscopy, X- Ray, Ultrasound, DEXA, PET
	Sharp & Children's MRI Center	7901 Frost Street San Diego, CA 92123 T: (858) 939-4550 F: (858) 939-4596	MRI, CT
	Sharp & Children's MRI Center	7910 Frost Street, Suite 110 San Diego, CA 92123 T: (858) 939-4550 F: (858) 939-4596	MRI
	Sharp & Children's MRI Center	3075 Health Center Drive San Diego, CA 92123 T: (858) 939-4550 F: (858) 939-4596	MRI
	XDI Ultrasound	1915 Adams Avenue San Diego, CA 92116 T: (619) 546-8005 F: (619) 546-8007	Ultrasound
East	Grossmont Imaging – Fletcher Parkway	8881 Fletcher Parkway, Suite 102 La Mesa, CA 91942 T: (619) 461-1830 F: (619) 797-1484	MRI, CT, Ultrasound, Mammogram
	Grossmont Imaging – Santee	9640 Mission Gorge Road, Suite H Santee, CA 92071 T: (619) 258-8552 F: (619) 258-8553	MRI, CT, Ultrasound
	Imaging Healthcare Specialists	6386 Alvarado Court, Suite 107 San Diego, CA 92120 T: (619) 229-2299 F: (619) 229-2288	MRI, Open MRI, CT, Ultrasound, Digital Mammogram, Stereotactic Biopsy, DEXA, X-Ray
	Western Diagnostic Imaging Center	1663 Greenfield Drive El Cajon, CA 92021 T: (619) 588-2077 F: (619) 588-6662	DEXA, Vascular Doppler, X- Ray, Mammogram, Ultrasound
South	Imaging Healthcare Specialists	333 H Street, Suite 1095 Chula Vista, CA 91910 T: (619) 409-9119 F: (619) 409-9109	MRI, Open MRI, CT, Ultrasound, Digital Mammogram, DEXA
	San Diego Imaging – Chula Vista	765 Medical Center Court Chula Vista, CA 91911 T: (619) 397-6577 F: (619) 397-5182	MRI, CT, Ultrasound, DEXA
	San Diego Imaging – Chula Vista	860 Kuhn Drive, Suite 100 Chula Vista, CA 91914 T: (619) 397-6577 F: (619) 482-1892	MRI, Ultrasound

<p>South -Continued-</p>	<p>Western Diagnostic Imaging Center</p>	<p>1635 Third Avenue, Suite G Chula Vista, CA 91911 T: (619) 409-6939 F: (619) 409-6949</p>	<p>DEXA, Vascular Doppler, X-Ray, Mammogram, Ultrasound, EKG, 2D Echo</p>
	<p>XDI Medical Diagnostic Imaging</p>	<p>404 Mile of Cars Way, Suite D National City, CA 91950 T: (619) 477-4934 F: (619) 477-1592</p>	<p>MRI, CT, Ultrasound, Doppler, DEXA, Mammogram, X-Ray</p>



Providers who are contracted with an IPA must refer members to IPA-contracted facilities.

Southern Riverside County Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities

The following facilities are available for diagnostic services in **Southern Riverside County**.

Area of County	Available Provider	Address and Phone Number	Services Provided
Corona	Corona Advanced Imaging Center	886 Magnolia Avenue, Suite 101 Corona, CA 92879 T: (951) 340-4823 F: (951) 340-9673	MRI, CT, Ultrasound, Fluoroscopy, General Radiology
	Corona Advanced Imaging Center	175 East Ninth Street Corona, CA 92879 T: (951) 340-0312 F: (951) 582-9805	Ultrasound, Fluoroscopy, Digital Mammogram, Digital X-Ray
Hemet	California Imaging & Diagnostics Medical Group	850 E. Latham Avenue, Suite 101 Hemet, CA 92543 T: (951) 929-9688 F: (951) 766-1269	MRI, CT, X-Ray, Ultrasound, Mammogram, DEXA
	Hemet Valley Imaging Medical Group	1001 East Latham Avenue, Suite G Hemet, CA 92543 T: (951) 658-9243 F: (951) 765-5415	CT, Ultrasound, Mammogram, General Radiology
Murrieta	California Imaging & Diagnostics Medical Group	25470 Medical Center Drive, Suite 101 Murrieta, CA 92562 T: (951) 816-3268 F: (951) 894-1842	MRI, CT, Ultrasound, Mammogram, X-Ray
	Imaging Healthcare Specialists	25150 Hancock Avenue, Suite 105 Murrieta, CA 92562 T: (951) 600-4848 F: (951) 600-4849	MRI, CT, Ultrasound, Digital Mammography
	Temecula Valley Advanced Imaging	25395 Hancock Avenue, Suite 110 Murrieta, CA 92562 T: (951) 696-4230 F: (951) 696-4240	MRI, CT, PET CT, Nuclear Medicine
	Breast Care Center of Temecula Valley	25395 Hancock Avenue, Suite 200 Murrieta, CA 92562 T: (951) 600-2839 F: (951) 698-2354	Mammogram, Ultrasound, Stereotactic Guided Biopsies, Ultrasound Guided Biopsies, DEXA
Sun City	California Imaging & Diagnostics Medical Group	26870 Cherry Hills Boulevard Sun City, CA 92586 T: (951) 246-8553 F: (951) 672-1887	Mammogram, Ultrasound, CT, X-Ray
	Temecula Valley Imaging Center	26926 Cherry Hill Boulevard, Suite A Sun City, CA 92586 T: (951) 679-7476 F: (951) 679-7310	General Radiology
Temecula	California Imaging & Diagnostics Medical Group	44274 George Cushman Ct , Suite 108 Temecula, CA 92592 T: (951) 677-3192 F: (951) 677-7839	CT, Ultrasound, DEXA, Mammogram, X-Ray, Nuclear Medicine, Fluoroscopy
	Temecula Valley Imaging Center	27699 Jefferson Avenue, Suite 110 Temecula, CA 92590 T: (951) 699-7161 F: (951) 699-0241	MRI, CT, Ultrasound, Mammogram, General Radiology, Fluoroscopy, Nuclear Medicine
	Temecula Valley Imaging Center	28780 Single Oak Drive, Suite 155 Temecula, CA 92590 T: (951) 694-6052 F: (951) 694-6272	X-Ray
Wildomar	California Imaging & Diagnostics Medical Group	36450 Inland Valley Drive, Suite 106 Wildomar, CA 92595 T: (951) 834-9280 F: (951) 834-9500	MRI, Ultrasound
	Temecula Valley Imaging Center Medical Group – Wildomar	36320 Inland Valley Drive, Suite 303 Wildomar, CA 92595 T: (951) 461-0596 F: (951) 461-0293	General Radiology



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