

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

April 28, 2011

11-02

CORRECTION

MEDI-CAL AND HEALTHY FAMILIES PROVIDER MANUAL REVISION

Please note there was an error on **Provider Alert #11-01** issued on April 20, 2011. The “Services That Do Not Require Prior Authorization” is corrected as follows:

- Under Ultrasound, OB, the correct codes are 76801, 76805, 76810 and 76815-76816.
- Under Ophthalmology annual exams for diabetic patients, the following codes have been added: 92002-92004. **Please note:** Services are limited to adult members age 21 and over.

This Provider Alert amends the Community Health Group *Provider Manual* and, subsequently, your Provider Services Agreement. As always, we thank you for your cooperation.

Effective immediately, the attached list replaces all other versions for CHG’s Medi-Cal and Healthy Families program.

The new “Services That Do Not Require Prior Authorization” and “Preferred Providers for Radiological Diagnostic Services at Free-Standing Facilities” listings can also be viewed on-line at www.chgsd.com/providers under Health Care Resources/Referral Request Resources.