Culinary Health Fund

PPO Provider Newsletter



Issue 48 / April 5, 2023

PPO Radiology Providers

Please be advised that effective April 1, 2023, <u>Desert Radiologists will no longer be in the Culinary</u> <u>Health Fund network</u>. Please refer patients to one of our PPO Radiology providers:



SimonMed Imaging

Walk-in x-rays are available at all SimonMed locations.

To schedule an appointment:

& Call: **702-433-6934** (exclusive phone line for Culinary patients).

Online: https://www.simonmed.com/online-scheduling/



Pueblo Medical Imaging

Referrals and appointments are required. PMI does **not** accept walk-ins.

To schedule an appointment: & Call: **702-**<u>228-</u>0031

Online: www.pmilv.com



Steinberg Diagnostic Medical Imaging

Referrals and appointment are required for all SDMI visits. They do **not** accept walk-ins.

Providers must also send SDMI the electronic referral before you can make an appointment. Be sure to ask your provider how long it will take.

To make an appointment:

& Call 702-732-6000 Online: https://www.sdmi-lv.com/

PPO Quick Guide

Attached to the April Provider Newsletter is an updated copy of our PPO Quick Guide.

This is an at-a-glance reference for main phone numbers and co-pay information, as well as a list of all services requiring Prior Authorization

Charges to Eligible Persons

The Culinary Health Fund would like to remind you that as a Culinary network provider, <u>you may not charge for the</u> <u>completion of forms</u> (i.e., FMLA, Loss of Time, Disability, etc) for Culinary participants; this is in accordance with **Article III, Section E of your Preferred Provider Agreement**. Patients may still be responsible for any copays incurred for forms completed during an office visit.

Updated Provider Manuals have been given to all Culinary network providers and the electronic version is available on our website at:

https://www.culinaryhealthfund.org/library/.

In this manual, page 10 also reiterates that charging for the completion of such forms is in breach of your Preferred Provider Agreement.

Also, Providers may not charge Culinary participants for medically necessary covered services except for the collection of copayments, coinsurance and/or deductibles.

If you have any questions regarding this issue, please contact Provider Services at 702-892-7313, option two or healthcareservices@culinaryhealthfund.org.

Inactive Providers – Mar. 2023

The following is a list of providers* that are **no longer active** as a Plan Provider on the Culinary Health Fund provider network:

LAST NAME	FIRST NAME	TITLE	SPECIALTY
Hardy	Joseph	MD	Gen/Fam Practice
Lubritz	Joel	MD	Ear, Nose and Throat
Pollath	Tracy	PAC	Gen/Fam Practice
Tian	Sisi	MD	Ear, Nose and Throat
Tsai	Edward	DO	Gen/Fam Practice
Wingfield	Carol	APRN	Gen/Fam Practice
*List undeted monthly			

*List updated monthly

PPO Quick Guide

Important Telephone Numbers



Revised: 3/28/2023

Important lelephone Numbers		
Culinary Heal	th Fund www.cul	inaryhealthfund.org
Mon-Fri 7:30a	m to 6pm	702-733-9938
		e)702-892-7313, #2
		702-650-4417
		702-691-5665
	h Solutions (NHS) .nevadahealthsolut	ions.org/production/login.jsp
Mon-Fri, 8:00a	m to 5:00pm	
Harmony He	althcare	www.harmonyhc.com
Behavioral He	alth Benefits	
24 hours a da	y/ 7 days a week <u>.</u>	702-251-8000
Rapid Respor	ise	702-788-9875
OptumRx Pr www.optumrx	escription Service	S
24 hours a da	y/ 7 days a week <u></u>	866-611-5960
OptumRx Hor	ne Delivery	800-791-7658
Steinberg Dia	agnostic Medical I	maging
sdmi-lv.com		702-732-6000
SimonMed In	naging	
simonmed.co	m	702-433-6934
Pueblo Medio	al Imaging	
simonmed.co	m	702-433-6934
Clinical Path	ology Laboratories	s (CPL)
www.cpllabs.c	om	702-795-4900
Cooperative (CACP)	Association of Cl	hiropractic Physicians
Mon-Fri, 9:00	am to 5pm	702-365-5981
Nevada Dent	al Benefits	
Mon-Fri, 8am	to 5:30pm	702-478-2014
Zelis / ePaym	ent	
www.zelispay		855-774-4392
		702-736-4466
		702-382-4940
		702-970-7166
		702-489-2288
		702-951-6900
		702-366-1111
		866-883-1188
byrain Health	uale	800-552-2633

EyeMed

Mon-Sat, 5am to 8pm; Sun 8am-5pm_____866-800-5457

PREVENTIVE SERVICES (DO NOT REQUIRE A COPAY)				
 Immunizations for Adults and Children Well Baby/Child Exams Wellness/Physical Exams Colonoscopy/Sigmoidoscopy (up to age 74) Mammogram Dexascan Nutritional Counseling Smoking Cessation Low Dose CT Scan 				
SERVICE DESCRIPTION	COPAY			
Office Visit - PCP (FP, IM, PEDS, OB/GYN)	\$15 per visit			
Office Visit - Ophthalmologist or Optometrist	\$20 per visit			
Office Visit - Specialist	\$30 per visit			
Urgent Care Visit	\$40 per visit			
Chiropractor	\$15 per visit			
Acupuncture	\$15 per visit; 12 visits/year			
Injection	No Copay			
Hearing and Speech Exam	No Copay			
Allergy Testing/Immunotherapy	No Copay			
IV Treatment	No Copay			
Pulmonary Treatment	No Copay			
X-ray/US (in select physician offices)	\$30 per visit			
MRI/CAT Scan (in select physician offices)	\$125 per visit			
PET Scan (in select physician offices)	\$225 per visit			
Lab (Only if tests are processed at Clinical Pathology Laboratories)	No Copay			
All other Physician Office procedures	No Copay			
Culinary Pharmacy I & II	No Copay			
Tier 1 - Generic Drugs	\$10			
Tier 2 - Formulary Drugs	\$20			
Tier 3 - Non-Formulary Drugs	\$35			
X-Ray/US at PPO Radiology Facility	\$20 per visit			
MRI/CAT Scan at PPO Rad. Facility	\$125 per visit			
PET Scan at PPO Radiology Facility	\$175 per visit			
Ambulatory Surgery Center Outpatient Surgery at Hospital	\$150 per visit \$250 per visit			

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Mon-Fri, 9am to 5pm	702-896-7378
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Prosthetic & Orthotic Appliance Providers:

Brace It	702-478-5848
Prosthetic Centers of Excellence	702-384-1410

Services Requiring Prior Authorization

	IN OFFICE (PLACE OF SERVICE 11)	
CUSTOM COMPRESSION	AUTHORIZATION REQUIRED	
	*LIMITED TO FUND CONTRACTED PROVIDERS NO AUTHORIZATION REQUIRED WHEN PERFORMED BY COHEN, CURTIS, FARZIN, MEOZ AND SCHWARTZ	
CYBER KNIFE	(TIN: 27223260)	
DME*	Durable medical equipment items that are over \$500 require authorization (whether it is a rental or purchase, to include oxygen equipment over \$500, i.e. oxygen concentrators) *LIMITED TO FUND CONTRACTED PROVIDERS	
HEMATOLOGY/ONCOLOGY SERVICES	ALL HEMATOLOGY/ONCOLOGY NOT PROVIDED BY COMPREHENSIVE CANCER CENTERS OF NEVADA REQUIRES PRIOR AUTHORIZATION	
HOME EEG MONITORING	AUTHORIZATION REQUIRED	
HYPERBARIC TREATMENT	AUTHORIZATION REQUIRED	
LABORATORY SERVICES	CLINICAL PATHOLOGY LABORATORIES IS THE CULINARY HEALTH FUND'S EXCLUSIVE LABORATORY PROVIDER AND MUST BE USED FOR ALL OUTPATIENT LABORATORY SERVICES	
LABORATORY - ALL GENETIC TESTING*	AUTHORIZATION REQUIRED *LIMITED TO FUND CONTRACTED PROVIDERS	
OFFICE ADMINISTERED DRUGS	DRUGS INDICATED REQUIRE AUTHORIZATION: Biologics and Implantable Hormone Replacement Therapy PLEASE CALL HEALTHCARE SERVICES AT (702) 892-7313 IF YOU HAVE QUESTIONS REGARDING COVERAGE OF A SPECIFIC DRUG	
ORTHOTIC & PROSTHETIC APPLIANCES*	Orthotic & Prosthetic Appliances that are over \$500 require authorization *LIMITED TO FUND CONTRACTED PROVIDERS	
RADIOLOGY SERVICES	Services performed by a PPO Freestanding Radiology Facility do not require prior authorization	
	For Radiology Services NOT performed at a PPO Freestanding Radiology Facility authorization is required for: CT, Discography, Fetal Biophysical Profiles, MRI, PET Scans	
SLEEP STUDIES	NOCTURNA IS THE CULINARY HEALTH FUND'S EXCLUSIVE SLEEP STUDY PROVIDER Requires authorization and must be ordered by a Cardiologist, ENT, Neurologist, Pulmonologist or Culinary Health Center - Primary Care	
SURGERY	AUTHORIZATION REQUIRED FOR CERTAIN PROCEDURES.	
VARICOSE VEINS	AUTHORIZATION REQUIRED - LIMITED TO SELECT SPECIALTIES	
TMJ PROCEDURES	AUTHORIZATION REQUIRED	
	HOME HEALTH AND HOME INFUSION SERVICES (PLACE OF SERVICE 12)	
	AUTHORIZATION REQUIRED	
	INPATIENT (PLACE OF SERVICE 21, 31, 61)	
ALL INPATIENT ADMISS	IONS REQUIRE AUTHORIZATION, INCLUDING ELECTIVE ADMISSIONS AND THOSE RESULTING FROM ER OR OBSERVATION STAY	
	OUTPATIENT HOSPITAL (PLACE OF SERVICE 22)	
HYPERBARIC & WOUND CARE TREATMENT	AUTHORIZATION REQUIRED	
RADIOLOGY SERVICES	Services performed by a PPO Freestanding Radiology Facility do not require prior authorization	
	For Radiology Services NOT performed at a PPO Freestanding Radiology Facility authorization is required for: CT, Discography, Fetal Biophysical Profiles, MRI, PET Scans	
SLEEP STUDIES	Requires authorization and must be ordered by a Cardiologist, ENT, Neurologist, Pulmonologist or Culinary Health Center - Primary Care	
SURGERY & INVASIVE DIAGNOSTIC PROCEDURES	AUTHORIZATION REQUIRED (Exception: Colonoscopy and EGD procedures do not require prior authorization)	
	AMBULATORY SURGERY CENTER (PLACE OF SERVICE 24)	
AUTHORIZA	ATION REQUIRED (Exception: Colonoscopy and EGD procedures do not require prior authorization)	
	DIALYSIS CENTER (PLACE OF SERVICE 65)	
	AUTHORIZATION NOT REQUIRED FOR CONTRACTED FACILITIES	
CLINICAL PATHOLOGY	INDEPENDENT LABORATORY (PLACE OF SERVICE 81) LABORATORIES IS THE CULINARY HEALTH FUND'S EXCLUSIVE LABORATORY PROVIDER AND MUST BE USED	
ALL GENETIC TESTING	FOR ALL OUTPATIENT LABORATORY SERVICES AUTHORIZATION REQUIRED	
	HAVIORAL HEALTH (BH) SERVICES (PLACE OF SERVICE 51, 52, 53, 54, 55, 56, 57)	
INPATIENT & OUTPATIENT BH SERVICES	All behavioral health services require authorization through Harmony Healthcare (702) 251-8000	
	TRANSPLANT SERVICES	