

Provider Network Update



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New and Not So New News

Culinary Health Fund Website Facelift

On June 1st, the new website went live. We've made it more user friendly for both the Providers and the Participants. You will find the most up to date information, important forms and documents as well as previous notifications that have been sent out. Please take a few moments to log on and navigate around the website at www.culinaryhealthfund.org. We think you will like what you see.

Fees for Forms is a "NO NO"

Did you know that by charging for forms such as: "Completion of Disability, Loss of Time, or Return to Work", you are breaching the terms of your Preferred Provider Agreement? As a Culinary Health Fund provider, your contract specifically states that you are not to charge Culinary participants for completing any type of forms related to disability, loss of time, returning to work, etc. For further clarification, refer to Article III, Charges to Eligible Persons section of your contract or you can also find this information found on page 10 of the Provider Manual. For your convenience, the Provider Manual is now available on the Culinary Health Fund website.

Pharmacy News

Pain Medication Update

The Drug Enforcement Administration (DEA) published its final rule on July 2, 2014 placing Tramadol into schedule IV of the federal Controlled Substances Act (CSA). Currently, Tramadol is a controlled substance in eleven states. The following products will be affected by this change: Ultram (Tramadol), Ultram ER (Tramadol ER), Conzip (extended release Tramadol capsules), and Ultracet (Tramadol/acetaminophen).



The DEA and FDA cited concerns about increased abuse of Tramadol as a basis for the need to schedule the drug. There are concerns that the DEA has underestimated the modifications that the supply chain will need to make to policies and procedures to comply with Tramadol scheduling, especially since this is a drug that has been marketed as a non-controlled substance under federal law for almost 20 years.

What does this mean for the provider? As of August 18, 2014, all medications containing Tramadol will only be allowed to have 5 refills (or 6 fills total) and the prescription will only be good for 6 months from the date it was written.

Online Refills

Did you know that Culinary Health Fund participants can now order their Culinary pharmacy refills online? In an effort to "get the word out", please remind our participants that they can save time at the Culinary pharmacy by logging on to the Culinary Health Fund website at www.culinaryhealthfund.org, follow the links to the Pharmacy section, put in the pertinent information and go pick up the prescription when notified it is ready.

Extended Pharmacy Hours

To better serve the Culinary Health Fund community, the Culinary Pharmacy has extended its hours of operation. New hours are as follows:

Monday

Friday 7:00 am – 6:00 pm

Saturday

7:00 am – 2:00 pm

Closed on Sundays and all major holidays.



Specialty Pharmacy

Since April 1, 2013 BriovaRx™ has been the specialty pharmacy for the Culinary Health Fund. BriovaRx™ works hard to ensure every participant gets the expert, personalized support necessary to manage their complex conditions and prescribed medications. They will coordinate the efforts of all providers to keep treatment comfortable, efficient and successful.

They provide thorough education on all medications they offer, including injection teaching and proactive refill reminders. Fast, free home delivery is also available to assist patient adherence to treatment without disruption or delay.

Effective July 2, 2014, IVIG services were added to BriovaRX™. Patients who were receiving treatment with Biofusion were transitioned without disruption to care.

BriovaRx™ will maintain close contact with Culinary Health Fund providers from start to finish, keeping you informed of your participants' progress. They will help to navigate the prior authorization process. **If you have questions, please contact BriovaRx™ directly at (800) 850-9122.**

Program Updates

(NEW) - Culinary HEALTHier U Program is now available for Culinary participants and their eligible dependents! If your Culinary patient qualifies, all you need to do is refer him/her to a contracted nutritionist/dietitian who will help them make better food choices as well as maintain a healthy weight. To learn more about the HEALTHier U Program and benefits call the Advocacy Line at (702) 691-5665.

Culinary Kids HEALTHier U Program is a Pediatric Weight Management Program medically supervised through Children's Heart Center. This exclusive 12 week exercise and nutrition pediatric program is available to children 7-18 yrs old; however, nutritional counseling is offered to children as young as 2 yrs old. Support groups for families along with community resources and projects are just some of the services offered within this program.

You can also view and print all referral forms from the Culinary Health Fund website www.culinaryhealthfund.org (Providers-Programs/Services).

Healthy Pregnancy Plus - A healthy baby starts with a healthy pregnancy



The Culinary Health Fund knows that a healthy baby starts with a healthy pregnancy. We are focused on helping pregnant participants and their babies achieve optimal health beginning in the first trimester. In support of this goal, the Healthy Pregnancy Plus Program is designed to help your patients understand the importance of taking care of their health and receiving prenatal care during their pregnancy. Healthy Pregnancy Plus provides help with breastfeeding and offers support group classes for the new moms to be!

****Bonus Incentive: Eligible participants and PPO providers can receive \$100 for participation in the Healthy Pregnancy Plus Program if the following criteria have been met:**

- Participant must see a PPO doctor during the first twelve weeks of pregnancy and have kept all of their prenatal appointments.
- Physicians must complete the Healthy Pregnancy Plus form and High-Risk Questionnaire/Check list. This information must be faxed within 15 days of the first visit to the OB/GYN. Fax directly to: (702) 691-5620
- For any questions regarding this program, please contact Provider Services line at (702) 892-7313 option 2.

If you have a Culinary member that may be of high risk, please refer to our exclusive Perinatology group:



(NEW) - Breastfeeding Classes

The Culinary Health Fund is now offering 4 Breastfeeding classes and 4 support groups a month at the Culinary campus (3 English and 1 Spanish for both classes and support groups – numbers will be increased as needed). The support groups offer new moms or moms to be the chance to meet other pregnant moms and talk about their success and struggles with breastfeeding.

Participants will be provided with a free **Ameda Electronic Double Breast pump** and other gifts!! **Call the Advocacy line at (702) 691-5665.**

Culinary Care Assistance Program (EAP)

Personal problems can affect the lives of employees both at home and at work. The Culinary Care Assistance Program is here to help Culinary participants and their eligible dependents. This confidential program is free and services are provided by Harmony Healthcare 24 hours a day, 7 days a week. Harmony Healthcare has staff able to assist eligible participants with psychological disorders, gambling addictions, substance abuse, financial difficulties and marriage and family issues to name a few. Bilingual services are also available. **To refer a Culinary participant, please contact Harmony Healthcare at: (702) 251-8000 or (800) 363-4874 or via the internet at www.harmonyhc.com.**

Diabetes Classes

The Culinary Health Fund offers English and Spanish classes once per month. Classes are held at the Culinary campus as well as several different locations around the city. The Culinary Pharmacy also provides participants with free diabetes medication and supplies.



Participants can call to register for a class or a diabetic foot check at (702) 691-5665. **For more information refer to the Culinary website at www.culinaryhealthfund.org.**

“Call it Quits”



In an effort to encourage culinary participants to live a healthier lifestyle by quitting smoking, the Culinary Health Fund has partnered with the American Lung Association and is offering a 7 week program. The program offers the following convenient options to making quitting easier:

- Counseling in person, over the telephone, online and group meetings
- Prescription smoking medication (physician must prescribe)

Recommendation by a health care provider to quit smoking is one of the most powerful motivators for quitting smoking and is a key component of a successful smoking cessation program. You can refer a Culinary participant by completing a referral form and faxing it to the Culinary Advocacy Department at (702) 691-5620. Referral forms can be found and printed from our website www.culinaryhealthfund.org under Providers – Programs/Services.

Claims Corner

Payspan – PaySpan is a payment solution for our providers wishing to receive their claims payments as electronic fund transfer transactions (EFT). Online access to Explanation of Payments is also available when providers register for this service. Recently, PaySpan’s functionality was upgraded to include the capability to serve providers who bill on a universal billing claim form (UB04). To sign up for this convenient service, please contact PaySpan’s Provider Services Hotline at (877) 331-7154 Monday through Friday, 7am to 9pm Eastern Time.

Updates for the 1500 Claim Form

In preparation for the implementation of ICD-10, the National Uniform Claim Committee in conjunction with the American Medical Association, updated the 1500 Claim Form. Key changes to the form include the following:

- Additional fields in boxes 14 and 15 to accommodate the use of 3 byte qualifiers to describe the first date of present illness, injury, pregnancy or dates related to the patient’s treatment.
- Additional field in box 17 to accommodate the use of 2 byte qualifiers to describe the referring provider or other source for services.
- Additional fields in box 21 to indicate if the claim contains ICD-9 or IDC-10 diagnoses
- Additional fields in box 21 to accommodate the reporting of up to 12 diagnoses

CMS required exclusive use and submission of claims on the new form effective April 1, 2014. More information about the new requirements and ICD-10 is available at www.CMS.gov.

Filing Deadline for HCFA Version 08/05 Claim Forms

The Centers for Medicare & Medicaid Services approved a new CMS-1500 form (02/12) to replace the previous CMS form (08/05). We are currently accepting both forms and will continue to do so until 12/31/14. **As of 1/1/15, Culinary Health Fund will only accept CMS-1500 form version 02/12.**

Questions About Submitting an Appeal or a Corrected Claim?

Culinary Health Fund has a dedicated department to handle Provider Reconsideration Requests; these may include appeals, disputes in payment, corrected claim submissions and medical record requests.

How Does it Work? If you feel a claim was processed in error – as a Culinary Health Fund provider you have 180 days from the date a claim was processed in which to submit a Provider Reconsideration Request.

The Provider Reconsideration Request form can be obtained on our website and you can contact their department by using any of the following:

Mailing Address:

Culinary Health Fund Provider Reconsiderations
P.O. Box 44216
Las Vegas, NV 89116

Phone: (702) 691-5625

Fax: (702) 216-9525

Billing for Preventive Services

The required guidelines to billing Preventative Services for Culinary participants and their eligible dependents can be found on the following table.

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COMPREHENSIVE PREVENTIVE EVAL AND MANAGMENT SERVICES	CPT/HCPC CODES TO BILL:
Preventive office visits for well baby, well child and well adult including well woman. These visits include: - An age and gender appropriate history -Physical examination -Counseling/anticipatory guidance -Risk factor reduction interventions -The ordering of appropriate immunization(s) and laboratory/screening procedures	99381-99387 (New Patient) 99391-99397 (Established Patient) 99461 (Initial Newborn Care)
CONTRACEPTIVE SERVICES	CPT/HCPC CODES TO BILL:
Professional services for insertion/removal of IUDs, implants, fitting diaphragm or cervical cap	58300, A4261, A4266, S4981
Birth control/Contraceptive counseling	99401 if counseling is not done at Well Woman visit
IUD devices (Mirena, ParaGard, Skyla)	J7300, J7301, J7302
Implants (Implanon, Nexplanon)	J7307
Injection (Depot medroxyprogesterone acetate)	J1050 and 96372
Surgical sterilization procedures for women	58565, 58600, 58605, 58611, 58615, 58670, 58671
ROUTINE IMMUNIZATIONS and ADMINISTRATION OF VACCINES	
<p>There are three immunization schedules on the website of the Centers for Disease Control (CDC). These represent the routine immunization services that are currently designated as preventive care by the PPACA regulations.</p> <p>The schedules below can be found at www.cdc.gov/vaccines/schedules/index.html.</p>	
IMMUNIZATIONS	CPT/HCPC CODES TO BILL:
Diphtheria, tetanus toxoids and acellular pertussis (DTaP)(Tdap)(Td) Haemophilus influenzae type b conjugate (Hib) Hepatitis A (HepA) Hepatitis B (HepB) Human papillomavirus (HPV) age and gender criteria apply Influenza (Flu) Measles, mumps and rubella (MMR) Meningococcal (MCV) Pneumococcal (pneumonia) Poliovirus (IPV) Rotavirus Varicella (chickenpox) Zoster	<p>These codes can be billed alone or in conjunction with an applicable Preventive Evaluation and Management Service (99381-99397)</p> <p>Administration codes: 90471 - 90474, G0008-G0010</p> <p>Vaccine codes: 90632-90636, 90644-90650, 90655-90658, 90661, 90670, 90672, 90680, 90681, 90685-90688, 90696, 90698, 90700, 90702, 90707, 90710, 90713-90716, 90721, 90723, 90732-90734, 90736, 90743, 90744, 90746, 90748</p>

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PREVENTIVE SCREENINGS AND INDIVIDUAL COUNSELING OPTIONS	CPT/HCPC CODES TO BILL:
Abdominal aortic aneurysm screening by ultrasound (men, age 65-75, who have ever smoked) limited to once/lifetime	G0389
Autism screening at 9, 18 and 30 months	G0451
Breastfeeding counseling, support, equipment and supplies	Please refer patient to the Fund's Healthy Pregnancy Plus program Call (702) 691-5665 for more information
Colorectal cancer screening Sigmoidoscopy or Colonoscopy (ages 50-74)	G0104, G0105, G0106, G0120, G0121 45330 - 45345, 45378 - 45392
Diet/nutritional counseling and behavioral intervention for obesity or chronic disease risk	99401 for screening not done at Wellness visit* <i>*Additional counseling and intervention must be referred to Healthier U - a Fund sponsored program that utilizes PPO Dieticians and Nutritionists Call (702) 691-5665 for more information</i>
Mammography (women, age 35 and older)	Must be performed at Desert Radiologists To schedule an appointment call (702) 759-8700
Osteoporosis screening (women age 65 & older)	Must be performed at Desert Radiologists To schedule an appointment call (702) 759-8700
Tobacco use and cessation	99401 for screening not done at Wellness visit* Please refer to the Fund's Program with the American Lung Association Call (702) 691-5665 for more information
ALL OF THE ABOVE PREVENTIVE SERVICES ARE COVERED AT 100% BY THE CULINARY HEALTH FUND PLEASE DO NOT CHARGE THE PARTICIPANT OR THEIR DEPENDENT(S) A COPAY	

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CO-PAY Grid

(Highlighted Changes are Effective 1/1/15)

BENEFIT	IN-NETWORK	OUT-OF-NETWORK
Deductible	NONE	NONE
Out-of-Pocket Maximum	\$6,350 Single/ \$12,700 Family	NONE

HOSPITAL INPATIENT FACILITY – NON MATERNITY		
Medical/Surgical	\$250 co-pay per admit	\$2,000 co-pay per admit, then 40% co-insurance
Skilled Nursing Facility	\$250 co-pay per admit (60 DAY LIMIT)	NOT COVERED
LTAC & Rehabilitation	\$250 co-pay per admit (60 DAY LIMIT)	NOT COVERED
23 Hour Observation	\$250 co-pay per admit	\$2,000 co-pay per admit, then 40% co-insurance
HOSPITAL INPATIENT FACILITY - MATERNITY		
Maternity	\$250 co-pay per admit	NOT COVERED
Birthing Center	25% co-insurance	NOT COVERED

MENTAL HEALTH & ADDICTION		
Inpatient Hospital Admission	\$250 co-pay per admit	\$2,000 co-pay per admit, then 40% co-insurance
Partial Hospital Admission	\$250 co-pay per admit	NOT COVERED
Residential Treatment	\$250 co-pay per admit	NOT COVERED
Intensive Outpatient Program	\$250 co-pay per admit	NOT COVERED
Outpatient Visits	\$15 co-pay (NO CO-PAY FIRST 5 VISITS)	NOT COVERED

HOSPITAL OUTPATIENT FACILITY		
Emergency Room	\$350 co-pay	\$350 CO-PAY
Surgery	\$250 co-pay	NOT COVERED
Cardio/Pulmonary Rehabilitation (after discharge from an inpatient Hospital)	\$40 co-pay (30 VISIT LIMIT)	NOT COVERED
Diabetic Education	NO CO-PAY	NOT COVERED
Dialysis	NO CO-PAY	NOT COVERED
Lab/Pathology (for Hospital-based preoperative/diagnostic services only)	\$15 co-pay	NOT COVERED
PT/OT/ST (after discharge from an inpatient Hospital)	\$30 co-pay (30 VISIT LIMIT)	NOT COVERED
Radiology - General	\$45 co-pay per visit	NOT COVERED
Radiology - CT/MRA/MRI	\$125 co-pay per visit	NOT COVERED
Radiology - PET/PET CT	\$225 co-pay per visit	NOT COVERED
Interventional and Diagnostic Radiology Services which are performed in a surgical area or cath lab	\$250 co-pay per visit	NOT COVERED
Other	25% co-insurance	NOT COVERED

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NON HOSPITAL FREE STANDING FACILITY		
Surgery	\$150 co-pay	NOT COVERED
Cardio/Pulmonary Rehabilitation	\$30 co-pay (30 VISIT LIMIT)	NOT COVERED
Dialysis	NO CO-PAY	NOT COVERED
Lab/Pathology	NO CO-PAY	NOT COVERED
Radiology - General	\$20 co-pay per visit	NOT COVERED
Radiology - CT/MRA/MRI	\$125 co-pay per visit	NOT COVERED
Radiology - PET/PET CT	\$175 co-pay per visit	NOT COVERED
Interventional Radiology Services	\$150 co-pay per visit	NOT COVERED
Physical Therapy - Post Surgery	\$0 co-pay (30 VISITS PER EVENT)	NOT COVERED
Physical Therapy	\$0 co-pay	NOT COVERED
Occupational Therapy/Speech Therapy	\$20 co-pay (30 VISIT LIMIT)	NOT COVERED
Sleep Study	\$125 co-pay	NOT COVERED

PROFESSIONAL SERVICES		
Inpatient services	NO CO-PAY	NOT COVERED
Office Visit - PCP	\$15 co-pay per visit	NOT COVERED
Office Visit – Ophthalmologist or Optometrist	\$20 co-pay per visit	NOT COVERED
Office Visit - Specialist	\$30 co-pay per visit	NOT COVERED
Chiropractor	\$25 co-pay per visit	NOT COVERED
Urgent Care Visit	\$40 co-pay per visit includes all covered services	NOT COVERED
Allergy Testing/Immunotherapy	NO CO-PAY	NOT COVERED
Chemotherapy	NO CO-PAY	NOT COVERED
Dialysis Management	NO CO-PAY	NOT COVERED
Hearing and Speech Testing	NO CO-PAY	NOT COVERED
Lab/Pathology	NO CO-PAY	NOT COVERED
Injections	NO CO-PAY	NOT COVERED
IV Treatment	NO CO-PAY	NOT COVERED
Nerve conduction studies	NO CO-PAY	NOT COVERED
Pulmonary Test	NO CO-PAY	NOT COVERED
Pulmonary Treatment	NO CO-PAY	NOT COVERED
Radiation therapy	NO CO-PAY	NOT COVERED
Radiology - General (in select physician offices)	\$30 co-pay per visit	NOT COVERED
Radiology - CT/MRA/MRI (in select physician offices)	\$125 co-pay per visit	NOT COVERED
Radiology - PET/ PET CT (in select physician offices)	\$225 co-pay per visit	NOT COVERED
Sleep Study	\$125 co-pay	NOT COVERED
Surgery in office	NO CO-PAY	NOT COVERED
All other Physician office procedures	NO CO-PAY	NOT COVERED

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PREVENTIVE SERVICES		
Immunizations for Adults & Children	NO CO-PAY	NOT COVERED
Well Baby/Child Exams	NO CO-PAY	NOT COVERED
Well Woman Exams	NO CO-PAY	NOT COVERED
Wellness/Physical Exams	NO CO-PAY	NOT COVERED
Colonoscopy/Sigmoidoscopy	NO CO-PAY (AGES 50-74)	NOT COVERED
Screening Mammography	NO CO-PAY (FEMALE, AGE 35 & OLDER)	NOT COVERED
Dexascan	NO CO-PAY (FEMALE, AGE 60 & OLDER)	NOT COVERED
Nutritional Counseling	NO CO-PAY (26 ANNUAL VISITS)	NOT COVERED

PRESCRIPTION DRUGS		
Culinary Pharmacy (select medications available)	NO CO-PAY	NOT COVERED
Tier 1 - Generic	\$10 co-pay	NOT COVERED
Tier 2 - Formulary	\$30 co-pay	NOT COVERED
Tier 3 - Non Formulary	\$50 co-pay	NOT COVERED

OTHER		
Ambulance	25% CO-INSURANCE FOR GROUND AMBULANCE - \$500 CO-PAY FOR AIR AMBULANCE	
Compression Stockings	\$22 co-pay per pair (3 PAIR PER YEAR)	NOT COVERED
Diabetic Shoes	\$55 co-pay per pair (2 PAIR PER YEAR)	NOT COVERED
Diabetic Supplies	NO CO-PAY	NOT COVERED
DME & Medical Supplies	10% co-insurance	NOT COVERED
Glasses/Contact Lenses	\$150 maximum benefit every 2 years	NOT COVERED
Hearing Aids	\$300 maximum benefit every 5 years	
Home Health	NO CO-PAY (60 VISIT LIMIT)	NOT COVERED
Home Infusion Therapy	NO CO-PAY	NOT COVERED
Hospice - Inpatient and Outpatient	NO CO-PAY	NOT COVERED
Mastectomy Bra	\$12 co-pay per item (\$350 MAX PER YEAR)	NOT COVERED
Orthotic Shoe Inserts - Non Diabetic	\$10 per pair co-pay (1 PAIR OR 2 INSERTS EVERY 5 YEARS)	NOT COVERED
Prosthetic & Orthotic Appliances	10% co-insurance	NOT COVERED



Prior Authorization Process

As of January 1, 2014, Nevada Health Solutions (NHS) has been providing utilization management for all services requiring prior authorization.

Nevada Health Solutions services include the following:

On-site Concurrent Review
Concurrent Review
Prospective Review
Retrospective Review
Out of Area Review
First Level Appeals

Hours of operation are Monday through Friday, 8:00 am to 5:00 pm

Mailing Address

Nevada Health Solutions
Attn: Customer Service
PO Box 61440
Las Vegas, NV 89160

Website Address:

www.nevadahealthsolutions.org

To start a request for authorization, you have three options:

1. **Call: (702) 216-1653 or toll free at (855) 392-0778**
2. **Fax: (702) 691-5614**
3. **Website:**
<https://providers.nevadahealthsolutions.org:8443/AcuExchange/Login.jsp>

PLEASE BE ADVISED THAT THE CULINARY HEALTH FUND DOES NOT HAVE OUT OF AREA/NETWORK BENEFITS AND REQUIRES ALL PROVIDERS TO REFER TO IN-NETWORK PROVIDERS. FOR A CURRENT LIST OF PROVIDERS PLEASE GO TO: www.CulinaryHealthFund.org OR CALL CUSTOMER SERVICE AT (702) 733-9938.

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Services Requiring Prior Authorization

For Prior Authorization please contact **NEVADA HEALTH SOLUTIONS:**

Via phone (702) 216-1653 or toll free (855) 392-0778

Via fax (702) 691-5614

Via web portal at <http://www.nevadahealthsolutions.org>

PLEASE BE ADVISED THAT THE CULINARY HEALTH FUND DOES NOT HAVE OUT OF AREA/NETWORK BENEFITS AND REQUIRES ALL PROVIDERS TO REFER TO IN-NETWORK PROVIDERS. FOR A CURRENT LIST OF PROVIDERS PLEASE GO TO: www.CulinaryHealthFund.org OR CALL CUSTOMER SERVICE AT 702-733-9938

IN OFFICE (PLACE OF SERVICE 11)	
CUSTOM COMPRESSION STOCKINGS*	Authorization required *LIMITED TO FUND CONTRACTED PROVIDERS
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.
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
OFFICE ADMINISTERED DRUGS	DRUGS INDICATED BELOW REQUIRE AUTHORIZATION: Avastin - Limited to Ophthalmology Botox - Limited to Neurology and Ophthalmology Biologics - Limited to Gastroenterology and Rheumatology Impantable Hormone Replacement Therapy - Limited to Urology
ORTHOTIC & PROSTHETIC APPLIANCES*	Authorization required *LIMITED TO FUND CONTRACTED PROVIDERS
RADIOLOGY SERVICES	DESERT RADIOLOGISTS IS THE CULINARY HEALTH FUND'S EXCLUSIVE RADIOLOGY SERVICES PROVIDER. SERVICES PERFORMED AT DESERT RADIOLOGISTS DO NOT REQUIRE AUTHORIZATION WITH THE EXCEPTION OF PET SCANS.
	For Radiology Services NOT performed at Desert Radiologists authorization is required for: CT/CTA, Discography, Obstetrical Ultrasounds and Fetal Biophysical Profiles, MRI/MRA, PET Scans

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IN OFFICE (PLACE OF SERVICE 11) – CONTINUED	
SLEEP STUDIES	All requests for sleep studies require authorization and must be ordered by a Neurologist, Pulmonologist or ENT
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 ADMISSIONS REQUIRE AUTHORIZATION, INCLUDING ELECTIVE ADMISSIONS AND THOSE RESULTING FROM ER OR OBSERVATION STAY	
OBSERVATION (PLACE OF SERVICE 22)	
ALL OBSERVATION ADMISSIONS REQUIRE AUTHORIZATION	
OUTPATIENT HOSPITAL (PLACE OF SERVICE 22)	
HYPERBARIC TREATMENT	Authorization required
RADIOLOGY SERVICES	DESERT RADIOLOGISTS IS THE CULINARY HEALTH FUND'S EXCLUSIVE RADIOLOGY SERVICES PROVIDER. SERVICES PERFORMED AT DESERT RADIOLOGISTS DO NOT REQUIRE AUTHORIZATION WITH THE EXCEPTION OF PET SCANS.
	For Radiology Services not performed at Desert Radiologists authorization is required for: CT/CTA, Discography, Fetal Biophysical Profiles, MRI/MRA, PET Scans
SLEEP STUDIES	All requests for sleep studies require authorization and must be ordered by a Neurologist, Pulmonologist or ENT
SURGERY & INVASIVE DIAGNOSTIC PROCEDURES	AUTHORIZATION REQUIRED FOR ALL OUTPATIENT SURGERY OR INVASIVE PROCEDURES PERFORMED IN SURGERY AREA
AMBULATORY SURGERY CENTER (PLACE OF SERVICE 24)	
AUTHORIZATION REQUIRED FOR ALL OUTPATIENT SURGERY OR PROCEDURES	
INDEPENDENT LABORATORY (PLACE OF SERVICE 81)	
CLINICAL PATHOLOGY LABORATORIES IS THE CULINARY HEALTH FUND'S EXCLUSIVE LABORATORY PROVIDER AND MUST BE USED FOR ALL OUTPATIENT LABORATORY SERVICES	
ALL GENETIC TESTING	Authorization required
BEHAVIORAL HEALTH SERVICES (PLACE OF SERVICE 51, 52, 53, 54, 55, 56, 57)	
INPATIENT & OUTPATIENT BEHAVIORAL HEALTH SERVICES	All behavioral health services require authorization - Harmony Healthcare (702) 251-8000
TRANSPLANT SERVICES	
AUTHORIZATION IS REQUIRED FOR ALL TRANSPLANT SERVICES INCLUDING CONSULTS	

This table is only a general guideline to Culinary Health Fund's prior authorization requirements. This list may be updated from time to time. It is the provider's responsibility to check for updates. If the procedure billed is not the procedure approved, there may be no payment and the patient is not liable. The presence or absence of a procedure code and/or service on this list does not determine benefits or coverage for your patient. Verification of benefits and eligibility should be obtained by calling Customer Service at (702) 733-9938.

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CULINARY HEALTH FUND EXCLUSIVE PROVIDERS	
DURABLE MEDICAL EQUIPMENT	Apria Healthcare: (702) 736-4466
	Bennett Medical: (702) 382-4940
	Gabel Distributors: (702) 489-2288
	Preferred Homecare: (702) 951-6900
	THC of Nevada: (702) 796-1016
LABORATORY SERVICES	Clinical Pathology Laboratories: (702) 795-4906
PROSTHETIC AND ORTHOTIC APPLIANCES	Precision Orthotics & Prosthetics: (702) 243-7671
	Prosthetic Centers of Excellence: (702) 384-1410
RADIOLOGY SERVICES	Desert Radiologists: (702) 387-6900

Contact Your Healthcare Services Team ☺

By e-mail:

healthcareservices@culinaryhealthfund.org

By phone:

(702) 892-7313 (Option 2)

Directly:

Kimberly Esau

(702) 892-7309

kesau@culinaryhealthfund.org

Mary McGill

(702) 691-5690

mmcgill@culinaryhealthfund.org

Melanie Jensen

(702) 691-5681

mjensen@culinaryhealthfund.org

Lucia James

(702) 691-5698

ljames@culinaryhealthfund.org