

May 6, 2009

Dear Physician/Provider:

Enclosed please find important information regarding changes to the Health Care District of Palm Beach County's Provider Handbook. Please add this bulletin to your current handbook. If you need any assistance, contact your Provider Representative at (561) 659-1002.

Sincerely,

Provider Services Department

Enclosure



Physician/Provider Bulletin

Subject: Vestibular Testing	
Plan: Coordinated Care – Option 1	Bulletin Date: 5/06/2009
Bulletin Number: 09-010	Effective Date: 5/11/2009

The purpose of this bulletin is to inform all participating providers of updates to the Health Care District Provider Handbook.

Vestibular Testing (2009 CPT codes 92541 through 92548)

Effective M ay 11, 200 9, Vestibu lar Test ing will require pr ecertification for review of medical necessity.

These serv ices will o nly be reim bursed when provided by neurologists, otolaryngologists and certified audiologists.

Codes will be reim bursed according to current CPT coding and practice guidelines.

Requests for precertification should include supporting docum entation of medical necessity and be faxed to our Utilization Management Department at 561-835-8606.

If you have questions regarding this provider bulletin, please contact your Provider Representative at (561) 659-1002.

Please insert this bulletin into your Provider Handbook. The policies a nd procedures in this bulletin supersed e any related policies and procedures within the handbook.