

## Provider Bulletin

Subject:	Professional Services: Authorization not required		
Plan:	Coordinated Care Option 1	Bulletin Date:	December 30, 2015
Bulletin Number:	15-013	Effective Date:	Immediately

The purpose of this bulletin is to remind participating providers of specialties and/or professional services that do not require authorization when rendered in the office setting by a participating provider:

- *OB/GYN*
- *PERINATOLOGY*
- *PULMONOLOGY*
- *PODIATRY*
- *DERMATOLOGY*
- *ENDOCRINOLOGY*
- *HEMATOLOGY/ONCOLOGY*
- *GASTROENTEROLOGY*
- *RHEUMATOLOGY*
- *NEPHROLOGY*
- INFECTIOUS DISEASE
- OPTOMETRY (limited to one visit per year)
- NEUROLOGY
- OTOLARYNGOLOGY
- THERAPY (physical, occupational and speech) \*combined limit of 30 treatments per calendar year.

Please review the benefit exclusion list on our website [www.hcdpb.org](http://www.hcdpb.org) of non-covered services

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

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Please insert this bulletin into your Provider Handbook. The policies and procedures in this bulletin supersede any related policies and procedures within the handbook.