## **UCI Health**

# Gavin Herbert Eye Institute

OPHTHALMOLOGY SERVICES
NEW PATIENT REFERRAL

**Thank you for your referral.** This form is important to us for a few reasons. It allows us to register, contact and schedule an appointment for your patient effectively and efficiently and it ensures we receive the diagnosis and ICD-10 code(s) so your patient is scheduled with the appropriate sub-specialty. Most importantly, this form allows us to correspond accordingly and return your patient to your care.

To ensure timely processing, please complete this form and submit it with the applicable items listed on the second page to our ophthalmology referral team's fax number (855) 376-5057

Date of referral:	Referring physician/Group:	
Office Address:	City:	Zip:
Phone: Fax	Email:	
PATIENT INFORMATION (please print)		
Last: First	: Date of birth (	Sex: ☐ M ☐ F
Address:	City:	Zip:
	Email:Ca	
Insurance:	Policy#	
	pefore we can schedule. Please see back-side fo	
<b>PRIORITY</b> If urgent (<72 hours), plo	ease call our office for the patient to be sche	eduled quickly.
	·	· ·
Diagnosis:	ICD-10:	
Cataracts, Cornea, External	Pediatric Ophthalmology	Retina and Vitreous
Disease and Refractive	and Strabismus	☐ Andrew Browne, MD, PhD
☐ Soroosh Behshad, MD	Charlotte Gore, MD	☐ Baruch Kuppermann, MD, PhD
☐ Marjan Farid, MD	Donny Suh, MD	☐ Stephanie Y. Lu, MD
☐ Sumit (Sam) Garg, MD	Stephen Prepas, MD	☐ Mitul Mehta, MD
☐ Sanjay Kedhar, MD	☐ First Available	☐ Kapil Mishra, MD
☐ Olivia Lee, MD	Neuro-Ophthalmology	☐ Mohammed Riazi, MD
☐ Matthew Wade, MD	☐ R. Wade Crow, MD	☐ First Available
☐ First Available	Lilangi Ediriwickrema, MD	Here to the
Comprehensive and Catavasta	Kimberly Gokoffski, MD, PhD	Uveitis
Comprehensive and Cataracts	☐ Vivek Patel, MD	☐ Sanjay R. Kedhar, MD
☐ Alpa Patel, MD	☐ Samuel Spiegel, MD	☐ Olivia Lee, MD
Glaucoma and Cataracts	☐ First Available	☐ First Available
☐ Austin Fox, MD		Low Vision
☐ Ken Lin, MD	Oculoplastics/Orbit Surgery	☐ Karen Lin, OD
<ul><li>□ Sameh Mosaed, MD</li><li>□ Andrew Smith</li><li>□ First Available</li></ul>	Lilangi Ediriwickrema, MD	
	☐ Seanna Grob, MD	Pediatric Optometry
	Jeremiah Tao, MD	☐ Annabelle Storch, OD
	☐ First Available	Kimberly Walker, OD
	Ocular Oncology ☐ Kapil Mishra, MD	

For updated PDF Referral forms: https://ophthalmology.uci.edu/refer-patient

380 W. Central Ave, Ste 400 Brea, CA 92821 | 949-824-2020

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## **Referral Requirements**

To expedite appointment scheduling we highly recommend using UCI Health's online referral portal. However, if you prefer, you can fax your referral to (855) 376-5057.

Additionally, the following is required before we o	contact the patient to schedule.
Complete patient demographic information.	
Insurance information; copy of patient's medical insurance care	d(s) front and back.
Benefits ID Card (BIC) number and Client ID number (CIN) – For	Medi-Cal Health Plans
HMO Patients - Place of Service (POS)	
<ul> <li>Orange Office - Choose POS 22 "On Campus Hospital." Please be seen in our Orange office unless patient also has Medicare</li> </ul>	• • • • • • • • • • • • • • • • • • • •
• Irvine or Brea Office - Choose POS 19 "Off Campus Hospita	<b>l</b> "
For HMO patients, the following CPT codes are required with tl	he applicable diagnosis:
<ul> <li>Cataract - 99204, 92136, 92025, 92134</li> </ul>	<ul> <li>Oculoplastics Orbit - 99205 or 99204, 92083, 92133</li> </ul>
<ul> <li>Keratoconus - 99204, 92025</li> </ul>	<ul> <li>Oculoplastics Ptosis/Droopy Lids - 99204, 92083</li> </ul>
<ul> <li>Corneal Transplant/Edema - 99204, 92025, 92286</li> </ul>	<ul> <li>Nasolacrimal Duct Obstruction/Tearing - 99204, 68810</li> </ul>
<ul> <li>Corneal Ulcer - 99204, 65430</li> </ul>	<ul> <li>Pediatrics - 99204, 92060</li> </ul>
<ul> <li>Conjunctival Tumor - 99204, 92132, 92285</li> </ul>	<ul> <li>Retina - 99204, 92134, 92201, 92202</li> </ul>
<ul> <li>Pterygium - 99204, 92025</li> </ul>	<ul> <li>Strabismus - 99204, 92060</li> </ul>
<ul> <li>Glaucoma - 99204, 92083, 92133, 76514, 92020</li> </ul>	<ul> <li>Uveitis - 99205, 92134, 92250, 92235, 92202</li> </ul>
<ul> <li>Neuro- 99205 or 99245, 92083, 92133, 92060</li> </ul>	<ul> <li>Low Vision - 99205, 92081</li> </ul>
<ul> <li>Ocular Oncology - 99204, 92134, 92250, 92235, 92240, 76512</li> </ul>	2
Cal Optima patients - please add code <b>Z7500</b>	
Medicare Advantage Plans -please add code G0463	
Medical Records - please include last visit progress note and ar	ny history of diagnostic testing (if relevant)

#### Resources

For updated referral information please go to ophthalmology.uci.edu/refer-patient

**UCI Health Referral Portal -** allows you and your office personnel to see real-time updates on the status of your request and provides a secure platform to send all of the necessary documents.

**Referral Center (714) 456-7001** - please contact if you have any questions regarding submitting a referral or to check status on a referral.

**Medical Records** - UCI Health now provides free read-only access to our EMR (Epic) to community providers to access patient medical records, including labs results, and more. To request access email <u>ucihealthbd@hs.uci.edu</u>.

**Luis Delgado, Director of Business Development** - Contact for any questions, immediate concerns or other assistance. **Ph (949) 824-0305, Email: Luisd2@hs.uci.edu.**