

**TO:** ALL PRIMARY CARE PHYSICIANS  
**FROM:** JACK RUBIN, M.D. CEO & PRESIDENT, DOCTORS CHOICE MEDICAL GROUP (DCMG)  
**SUBJECT:** **DIRECT REFFERRAL/AUTO AUTORIZATIONS**  
**DATE:** MARCH 2, 2015  
**CC:** MSO INC. OF SOUTHERN CALIFORNIA STAFF

Dear Primary Care Physician:

Doctors Choice Medical Group has approved the following DIRECT REFERRAL/AUTO AUTHORIZATIONS for all Doctors Choice Medical Group members/patients:

<b>Category/CPT Codes and Description (Authorization Expiration <u>90</u> Days)</b>	
<b><u>X-Rays</u></b>	
· 73560-73660 Radiography: Lower Leg, Ankle, and Foot	· 73090-73140 Radiography: Forearm and Hand
· 70030-70390 Radiography: Head, Neck, Orofacial Structures	· 73000-73085 Radiography: Shoulder and Upper Arm
<b>Except: 70170, 70992, 70336, 70350, 70355, 70371, 70373, 70390</b>	· 73500-73550 Radiography: Pelvic Region and Thigh
	· 71010-71130 Radiography: Thorax (Chest)
<b><u>Outpatient Visits</u></b>	
	· 99201-99203; 99211-99214 Outpatient and Other Visits
	· 99241-99244 Consultations: Office and Outpatient
<b><u>DXA Scan</u></b>	
	· 77080-77081 Dual-Energy X-ray Absorptiometry (DXA)
<b><u>Mammography</u></b>	
	· 77053-77057 Radiography: Breast
<b><u>Ultrasound</u></b>	
	· 76813-76817 Ultrasound: Other Fetal Evaluations
	· 76536-76800 76536-76800 Ultrasound: Neck, Thorax, Abdomen, and Spine
	· 76830-76873 76830-76873 Ultrasound: Male and Female Genitalia o <b>Except 76831</b>
<b><u>Vaccines</u></b>	
	· 90732 Pneumococcal Vaccine
	· 90653, 90654, 90656, 90660-90662, 90672-90673, 90686, 90688 Influenza Vaccine

If you have any questions, please contact Ruby Grainger at Office - (626) 656-2704 or Cell at (818) 325-9505.

Thank you for your attention and cooperation,

Jack Rubin, M.D., *CEO & President*