

**REFERRAL FORM B – Specialist**

**TRACKING NUMBER  
IPA USE ONLY**

**Golden Physicians Medical Group Inc.**  
Fax: (760) 631-7602 Phone: (760) 330-9620

Date of Referral Request: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Member Request**

**Routine**

**Urgent**

**Emergent**

Patient Name: (First, Last) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone: \_\_\_\_\_

Health Plan: \_\_\_\_\_ Patient ID#: \_\_\_\_\_

**Referred To:** \_\_\_\_\_ **ICD-10:** \_\_\_\_\_

**Specialty Type:** \_\_\_\_\_

**Referred By:** \_\_\_\_\_ **Diagnoses:** \_\_\_\_\_

**REQUESTING  
PROVIDER OFFICE  
CONTACT NAME**

**PCP's Name :** \_\_\_\_\_

Provider Phone: \_\_\_\_\_

Provider Fax: \_\_\_\_\_

**SIGNATURE OF Physician:**

(MANDATORY – WILL NOT BE PROCESSED WITHOUT MD SIGNATURE ) \_\_\_\_\_

|   |                      |
|---|----------------------|
| <b>Procedures/services requested:</b> _____ | CPT CODE: _____      |
| _____                                       | CPT CODE: _____      |
| _____                                       | CPT CODE: _____      |
| _____                                       | CPT CODE: _____      |
| <b>Reason for REFERRAL:</b> _____           | <b>Attachment(s)</b> |
| _____                                       | Notes: _____         |
| _____                                       | Lab: _____           |
| _____                                       | EKG/EEG: _____       |
| _____                                       | X-Ray: _____         |
| _____                                       | Other: _____         |

Place of Service:  Office  Out-Patient \_\_\_\_\_  In-Patient \_\_\_\_\_

**FOR USE BY GOLDEN PHYSICIANS MEDICAL GROUP INC. UM STAFF ONLY**

Authorize Date: \_\_\_\_\_  Pending Date: \_\_\_\_\_  Modified Date: \_\_\_\_\_

Denied Date: \_\_\_\_\_  Not a covered benefit.  T P L

Comments/Remarks: \_\_\_\_\_

**UM Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date PCP Notified:** \_\_\_\_\_ **◇Please notify member today of referral status.**