

Tulsa Spine & Specialty Hospital

SLEEP MEDICINE REFERRAL FORM

- Complete all sections then fax this form with copy of patient's insurance card, front/back and clinical notes.
Michael Newnam, MD NPI: 1851355812 // Tulsa Spine and Specialty Hospital NPI: 1033185293
- Please don't hesitate to call, fax or email for patient updates, questions etc. pz@zoellnermedicalgroup.com

Phone: 918.324.3100 Fax: 918.324.3102 or Fax: 918.949.9929

Patient Name: _____ DOB _____ Male Female
 Address: _____ city/state/zip _____
 SSN#: _____ Email Address _____ @ _____
 Telephone: mobile/home/work: _____ mobile/home/work _____ mobile/home/work _____
 Emergency Contact: _____ Phone#: _____ Relationship: _____

Provider Name (PRINT): _____ NPI: _____
 Provider Signature: _____ Date: _____
 Office Number: _____ Office Fax: _____
 Contact Name: _____ Special Instructions: _____

Primary and Secondary Insurance (if applicable)

Insurance Name: _____ ID#: _____
 Group#: _____ Name of Subscriber: _____
 Insurance Phone# _____

Secondary Insurance (if applicable)

Insurance Name: _____ ID#: _____
 Group#: _____ Name of Subscriber: _____
 Insurance Phone# _____

Procedure Ordered (one or more must be checked in order to process the referral)

Sleep Consultations By: Michael Newnam, MD and staff with Oklahoma Heart Institute offices in: Tulsa, Owasso and Cushing, OK OFFICE: 918-592-0999

- Consultation with Sleep Specialist
 pre study post study no preference (default)



Split Night* PSG (½night diagnostic, ½ night therapy-most commonly ordered study. *must qualify) (95811)

- Diagnostic PSG only (95810)
- Pediatric PSG with ETCO2 monitoring (95810)
- CPAP/Bi-level Titration, Previous Sleep Study Req. (95811)
- Multiple Sleep Latency Test (MSLT-95805)- Sleep for Narcolepsy or Level of Sleepiness
- Home Testing Device (HTD) (95806/G0399)

Tulsa Spine & Specialty Hospital

Dear Provider,

Thank you for choosing us to take care of your sleep diagnostic needs. Our friendly staff looks forward to helping you.

Please don't hesitate to reach out to us with any questions, and we can help guide you through the referral process to ensure that your patient is scheduled as soon as possible.

Helpful reminders: some commercial insurances such as United Health Care, Blue Cross Blue Shield Federal, Aetna, and Cigna require authorizations and may take up to 15-30 business days to make a decision. Humana also requires authorizations, but those referrals must be initiated by the referring provider.

You can send directly for a specialist referral with Dr. Michael Newnam at Oklahoma Heart Institute, or you can send for a sleep study directly. If you are sending directly for a sleep study please see the following notes.



Please be sure to include the following with your sleep study referral:

DOCUMENTATION NEEDED FOR A SLEEP STUDY:

1. SIGNED AND DATED REFERRAL/RX FROM ORDERING PROVIDER
2. SIGNED AND DATED RECENT CHART NOTES THAT STATE THAT THE PATIENT IS REFERRED FOR A SLEEP STUDY
3. UPDATED PATIENT DEMOGRAPHICS
4. COPY OF THE FRONT AND BACK OF INSURANCE CARDS

FOR SOONERCARE PATIENTS UNDER THE AGE OF 21:

1. ALL OF THE ABOVE
2. FULL ORAL AND PHARYNGEAL EXAM INCLUDING MALLAMPATI SCORE
3. EPWORTH SLEEPINESS SCALE

We are able to schedule Medicare patients right away, however, please keep in mind that the patients must have a sleep study within 90 days of their signed referrals.

Thank you again for your referral.

Philip Zoellner
Chief Operating Officer
Zoellner Medical Group, Inc.

pz@zoellnermedicalgroup.com

Phone: 918.324.3100 Fax: 918.324.3102 Mobile/Text: 918-289-4244



Zoellner Medical Group