

AVMED SPECIALISTS/ SPECIALTIES REQUIRING MEDICARE REFERRAL

Specialty Description	Referral Required
Aerospace Medicine	Yes
Allergy & Immunology	Yes
Anesthesia Pain Management	Yes
Adult Congenital Heart Disease	Yes
Bariatrics	Yes
Brain Injury Medicine	Yes
Cardiovascular Disease	Yes
Clinical Cardiac Electrophysiology	Yes
Clinical Neurophysiology	Yes
Colorectal Surgery	Yes
Endocrinology	Yes
Forensic Psychiatry	Yes
Gastroenterology	Yes
General Surgery	Yes
Gynecologic Oncology	Yes
Gynecology	Yes
Hand Surgery	Yes
Hematology	Yes
Hospice & Palliative Care	Yes
Immunology	Yes
Infectious Disease	Yes
Interventional Cardiology	Yes
Interventional Radiology	Yes
Maternal Fetal Medicine	Yes
Medical Microbiology (Office Location)	Yes
Medical Toxicology (Office Location)	Yes
Nephrology	Yes
Neurodevelopmental Disabilities	Yes
Neurology	Yes
Neuromusculoskeletal Medicine	Yes
Neuroradiology (Office Location)	Yes

Specialty Description	Referral Required
Neurosurgery	Yes
Neurotology	Yes
Nuclear Medicine (Office Location)	Yes
Occupational Medicine - MD	Yes
Oncology, Medical	Yes
Ophthalmology	Yes
Orthopedic Surgery	Yes
Otolaryngology	Yes
Physical Medicine and Rehabilitation	Yes
Plastic Surgery	Yes
Plastic Surgery of the Head & Neck	Yes
Psychosomatic Medicine	Yes
Pulmonary Disease	Yes
Radiation Oncology	Yes
Radiology (Office Location)	Yes
Reproductive Endocrinology	Yes
Rheumatology	Yes
Sleep Medicine	Yes
Spinal Cord Injury Medicine	Yes
Sports Medicine	Yes
Surgery - Oral & Maxillofacial (D&M Affils)	Yes
Surgery - Thoracic/Cardiovascular	Yes
Surgery - Vascular	Yes
Surgical Oncology	Yes
Thoracic Surgery	Yes
Transplant Hepatology	Yes
Undersea & Hyperbaric Medicine	Yes
Urogynecology	Yes
Urologic Oncology	Yes
Vascular Medicine	Yes
Vascular Neurology	Yes

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Specialty Description	Referral Required
Addiction Psychiatry	No
Adolescent Medicine (Family Practice)	No
Adolescent Medicine (Pediatric)	No
Advanced Heart Failure and Transplant Cardiology	No
Allergy & Immunology (Pediatric)	No
Anesthesiology	No
Blood Banking / Transfusion Medicine	No
Cardio-Thoracic Surgery (Pediatric)	No
Cardiovascular Disease (Pediatric)	No
Chemical Pathology	No
Child & Adolescent Psychiatry	No
Child Abuse Pediatrics	No
Chiropractor	No
Clinical & Laboratory Dermatological Immunology	No
Clinical & Laboratory Immunology	No
Clinical Biochemical Genetics	No
Clinical Cytogenetics	No
Clinical Molecular Genetics	No
Critical Care	No
Critical Care (Pediatric)	No
Cytopathology	No
Dental Public Health	No
Dentist (D&M Affils)	No
Dentistry, Pediatric (D&M Affils)	No
Dermatology	No
Dermatology (Pediatric)	No
Dermatopathology	No
Developmental Behavioral Pediatrics	No
Dieticians	No
EKG Reader Only	No
For Use on GE Records Only	No
Emergency Medicine	No
Emergency Medicine (Pediatric)	No
Endocrinology (Pediatrics)	No
Endodontist	No
Forensic Pathology	No
Gastroenterology (Pediatric)	No
Genetics	No
Geriatric Psychiatry	No
Infectious Disease (Pediatric)	No
Medical Microbiology	No

Specialty Description	Referral Required
Medical Toxicology	No
Molecular Genetic Pathology	No
Neonatology	No
Nephrology (Pediatric)	No
Neurology (Pediatric)	No
Neuropathology	No
Neuroradiology	No
Neurosurgery (Pediatric)	No
Nuclear Medicine	No
Nuclear Radiology	No
Nuclear Radiology (Office Location)	No
Nutritionists	No
Ophthalmology (Pediatric)	No
Optometry	No
Oral & Maxillofacial Pathology	No
Oral & Maxillofacial Pathology (Office Location)	No
Oral & Maxillofacial Radiology	No
Oral & Maxillofacial Radiology (Office Location)	No
Orthodontics	No
Otolaryngology (Pediatric)	No
Pathology	No
Pathology (Pediatric)	No
Pathology (Pediatric) (Office Location)	No
Pediatric Transplant Hepatology	No
Periodontics	No
Podiatry	No
Prosthodontics - Dentist (D&M Affils)	No
Psychiatry	No
Public Health & General Preventative Medicine	No
Pulmonary (Pediatric)	No
Radiologic Physicist	No
Radiologic Physicist (Office Location)	No
Radiology	No
Radiology (Pediatric)	No
Radiology - Pediatric (Office Location)	No
Rehabilitation Medicine (Pediatric)	No
Retina Specialists	No
Rheumatology (Pediatric)	No
Surgery (Pediatric)	No
Surgical Critical Care	No
Urology (Pediatric)	No

AVMED SPECIALISTS/ SPECIALTIES REQUIRING MEDICARE REFERRAL

PCP Description	Referral Required
Family Practice	No
General Practice	No
Geriatrics	No
Internal Medicine	No
Obstetrics	No
Pediatrics	No

Effective April 1, 2014