

Best Care by the Best Doctors!



The Office of Dr. Neville Campbell MD, MBA

Provider's name

| PATIENT INFORMATION   |                               |  |  |  |  |
|---|-------------------------------|--|--|--|--|
| Name  | Phone nun Insurance Member II | name   |  |  |  |
|   | SENDING REFER                 | RAL  |  |  |  |
| Provider's name   | A                             | Address  |  |  |  |
| Phone number  |                               | NPI  |  |  |  |
| Fax number  |                               |  |  |  |  |
|   | EVALUATE AND T                | REAT   |  |  |  |
| <ul> <li>□ DME- Back, Knee, Neck Brace</li> <li>□ Trigger Point Injections</li> <li>□ Implant Neuroelectrodes (SCS Trial)</li> <li>□ CBD Oil</li> <li>□ Others, pleαse specify</li> </ul> | ☐ Medial Branch Block         | ☐ Transforaminal Epidural Steroid Injections ☐ Destruction of Peripheral Nerves ☐ In-house Procedure without Sedation ☐ Provocative and Analgesic Discograms |  |  |  |

## **ACCEPTED INSURANCE**

| NAME OF INSURANCE                      | ACCEPT | REFERRAL | AUTH |
|--|--------|----------|------|
| AETNA MEDICARE PREMIER HMO OR (P3)     | YES    | NO       | NO   |
| AETNA POS                              | YES    | NO       | NO   |
| AENTA PPO                              | YES    | NO       | NO   |
| AFTRA                                  | YES    | YES      | YES  |
| AMBETTER                               | YES    | YES      | NO   |
| AMERICAN FAMILY INSURANCE (PPO)        | YES    | NO       | NO   |
| AMERIGROUP                             | YES    | NO       | NO   |
| ANTHEM BCBS (PPO) In Network w/ Hawaii | YES    | NO       | NO   |
| ANTHEM BCBS MEDICAID                   | YES    | YES      | NO   |
| BEECH STREET PPO                       | YES    | NO       | NO   |
| CHAMP VA                               | YES    | NO       | NO   |
| CIGNA PPO/POS                          | YES    | NO       | NO   |
| CIGNA MEDICARE SUPPLEMENT              | YES    | NO       | МО   |
| CLARK CO SELF FUND                     | YES    | NO       | NO   |
| COLONIAL HEALTH                        | YES    | NO       | NO   |
| CONSTRUCTION INDUSTRY & LABORERS       | YES    | NO       | NO   |
| CONSTRUCTION INDUSTRY & LABORERS       | YES    | NO       | NO   |
| CULINARY                               | YES    | NO       | NO   |
| ELECTRIAL WORKERS LOCAL 357            | YES    | NO       | NO   |
| FRIDAY HEALTH PLAN                     | YES    | NO       | NO   |
| HEALTH SCOPE                           | YES    | YES      | NO   |
| GEHA AETNA INS                         | YES    | YES      | NO   |
| HPN (PPO)                              | YES    | NO       | NO   |
| HPN POS                                | YES    | YES      | NO   |
| HPN MEDICAID                           | YES    | YES      | NO   |
| HUMANA PPO                             | YES    | NO       | NO   |
| JAS AKA SOUTHWEST ADMINISTRATORS       | YES    | NO       | NO   |
| MEDICAID                               | YES    | YES      | NO   |

| NAME OF INSURANCE                      | ACCEPT | REFERRAL | AUTH |
|--|--------|----------|------|
| MEDICARE                               | YES    | NO       | NO   |
| MEDICARE ADVANTAGE                     | YES    | NO       | NO   |
| MGM (Par8o)                            | YES    | NO       | YES  |
| MOLINA MEDICAID                        | YES    | YES      | NO   |
| Mutual of Omaha                        | YES    | NO       | NO   |
| OPTUMCARE                              | YES    | NO       | NO   |
| PREMIER ASSESS INC                     | YES    | NO       | NO   |
| PROMINENCE HEALTH PLAN(HMO in network) | YES    | NO       | NO   |
| SELECT HEALTH                          | YES    | YES      | NO   |
| SIERRA HEALTH AND LIFE (PPO)           | YES    | NO       | NO   |
| SIERRA HEALTH AND LIFE EPO PLAN        | YES    | NO       | NO   |
| SILVERSUMMIT AMBETTER                  | YES    | NO       | NO   |
| SILVERSUMMIT MEDICAID                  | YES    | YES      | NO   |
| TEARCHERS HEALTH TRUST (Par8o)         | YES    | NO       | YES  |
| TRICARE PRIME                          | YES    | NO       | NO   |
| TRICARE WEST payerid TWVACCN           | YES    | YES      | YES  |
| TRICARE FOR LIFE                       | YES    | NO       | NO   |
| TRIWEST                                | YES    | NO       | YES  |
| UMR                                    | YES    | NO       | NO   |
| UMR PPO                                | YES    | NO       | NO   |
| UMR THT                                | YES    | NO       | NO   |
| UHC AARP MEDICARE COMPLETE             | YES    | NO       | NO   |
| UNITED HEALTHCARE                      | YES    | NO       | NO   |
| UNITED HEALTHCARE AARP PPO             | YES    | NO       | NO   |
| UNITED HEALTH CARE MEDICARE            | YES    | YES      | NO   |
| UNITED HEALTH CHOICE PLUS              | YES    | NO       | NO   |
| VERTERANS AFFAIR                       | YES    | NO       | YES  |
| UFCW LOCAL 711                         | YES    | NO       | NO   |



## **OUR CORE VALUES FOR OUTSTANDING CARE**

**PATIENT-CENTRIC** 

COMPASSION

**EXCELLENCE** 

**COLLABORATION** 

RESPECT

We prioritize your needs above all. Attentively listening, crafting personalized plans, and remaining responsive to ensure you receive unparalleled care.

We understand the delibitating nature of pain and provide a nurturing environment to faster healing and recovery.

We adhere to the highest clinical standards, continuously enhancing our services based on evidence-based practices.

We actively collaborate with you and your health care provider to create a comprehensive, integrated approach to pain management.

Every patient is treated with utmost dignity, professionalism, and utmost consideration for their unique circumstances.

