

TRICARE Behavioral Health Assistance Line Helps Beneficiaries Find Providers

TRICARE and TriWest Healthcare Alliance Corp. are pleased to announce the new Behavioral Health Care Provider Locator and Appointment Assistance Line to help eligible active duty service members (ADSMs) and active duty family members (ADFMs) find behavioral health care providers and schedule outpatient appointments.

For eligible beneficiaries seeking assistance in the TRICARE West Region, TriWest manages the dedicated toll-free number at 1-866-651-4970, which is available from 8 a.m. to 6 p.m. Pacific Time, Monday through Friday. **Note:** This appointment assistance line is **not** a crisis intervention line. TRICARE beneficiaries seeking emergency behavioral health care assistance should call 911, call TriWest's Crisis Line at 1-866-284-3743 or proceed to the nearest emergency room for treatment. TriWest's Crisis Line is for West Region beneficiaries **only** and is not available to other TRICARE regions.

The primary goal of this new service is to assist beneficiaries in making timely appointments for routine and urgent behavioral health care. Keep in mind that TRICARE Prime primary care access standards concerning wait times also apply to behavioral health care appointments. Initial appointments for behavioral health care are not considered specialty care appointments.

The wait time for an initial urgent behavioral health care appointment with a behavioral health provider shall generally not exceed 24 hours. The wait time for an initial

routine behavioral health care appointment shall not exceed one week. Following the initial appointment, the behavioral health care provider's medical judgment will determine the wait time for the beneficiary's follow-up appointments.

The appointment assistance service is available to all ADSMs and ADFMs enrolled in TRICARE Prime, TRICARE Prime Remote or TRICARE Prime Remote for Active Duty Family Members, as well as ADFMs enrolled in TRICARE Overseas Program Prime who have temporarily returned to the United States.

ADSMs do not need a referral if they seek care in the military treatment facility (MTF) and all ADSMs are encouraged to get care with military providers. However, if space is not available to meet the access standards, network referrals may be considered and a referral is required from the MTF to seek care from a civilian network provider. The referral may come from the primary care provider or from a behavioral health provider. ADSMs with a referral may contact the appointment assistance line to schedule an appointment with a network provider.

ADFMs do not need a referral for behavioral health care. They can self-refer for care. They may call the appointment line at any time to receive assistance in making an appointment. After the first eight outpatient visits in a fiscal year (Oct. 1–Sept. 30), TRICARE prior authorization is required to extend the care, but a referral is not necessary. ■

TRICARE Now Covers Lap-Band® Surgery

A recent change in TRICARE policy now allows you to offer your TRICARE patients fighting morbid obesity the option of laparoscopic adjustable gastric banding (Lap-Band surgery). Patients 100 pounds or more over their ideal body weight with certain associated severe medical conditions, as well as those who weigh 200 percent or more of their ideal body weight, may be eligible for the procedure.

This policy change is retroactive to Feb. 1, 2007. For more information on surgery for morbid obesity, go to Chapter 4, Section 13.2 of the *TRICARE Policy Manual*, which can be found at <http://manuals.tricare.osd.mil>. ■



A Clearer View of Health Care

A satisfied TRICARE beneficiary is the primary goal of everyone working in the Military Health System (MHS). A key part of achieving that goal is keeping beneficiaries well-informed about the TRICARE benefit.

Following President Bush's August 2006 executive order to promote transparency in federal health care programs (see www.whitehouse.gov/news/releases/2006/08/20060822-2.html for the complete text), TRICARE is moving forward to fulfill the president's directive.

The MHS's transparency initiative is designed to improve the TRICARE experience for beneficiaries and providers, and focuses on four aspects of health care delivery:

- Pricing
- Quality
- Information technology
- High quality and efficiency

Pricing

TRICARE openly shares its pricing information at www.tricare.mil/allowablecharges. This easy-to-use tool allows anyone to look up the TRICARE-allowable charge for the most frequently used services and procedures by region.

Quality

Health care organization quality reports are available for review at www.qualitycheck.org, part of the Joint Commission's Web site. TRICARE beneficiaries are directed to this site for a comparison of their provider options. **Note:** Reports are only available for certain provider types. Visit www.qualitycheck.org for more information.

Information Technology

TRICARE is leading the nation in the adoption of health information technology systems. The military's electronic health record, AHLTA, and the Pharmacy Data Transaction Service are just two examples. These systems are designed to improve record-keeping and facilitate information exchange.

High Quality and Efficiency

With ever-evolving health care options and special programs, TRICARE strives to improve the quality and efficiency of care for our 9.2 million beneficiaries.

With your help, we can work together to continually improve the patient experience and provide value and service to TRICARE beneficiaries. ■

New TRICARE Provider Seminars Now Underway

TriWest is now offering the spring 2008 series of TRICARE provider educational seminars throughout the 21-state West Region. Scheduled from mid-March through mid-June, these seminars furnish providers and their staffs with the latest information on TRICARE programs, policies and procedures.

Even if you have previously attended a TRICARE seminar, attending a spring seminar will be beneficial. New TRICARE information and additional reference tools will be provided.

Seminars are scheduled for both medical/surgical and behavioral health providers. Providers can register online and will receive these additional benefits:

- E-mail confirmation of your registration
- Reminder notice prior to the scheduled seminar
- Eligibility to participate in a drawing for a small prize

Go to www.triwest.com to find the dates, times and locations of seminars nearest to you. ■



New

Interactive Voice Response (IVR) System Tip Sheet

We have updated the IVR tip sheet for your convenience. Now, you can use either voice or touch-tone responses to navigate the IVR system. Call TriWest Healthcare Alliance Customer Service at 1-888-TRIWEST (1-888-874-9378) to begin using it today! ■

TRICARE Provider News

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TRICARE Provider News is published by the TRICARE Management Activity. Please provide feedback at www.tricare.mil/evaluations/feedback.

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1-888-TRIWEST
www.triwest.com

TRICARE Alaska Office
1-907-743-1800

Wisconsin Physicians Service
(Electronic claims set up)
1-800-782-2680
www.wpsic.com

Express Scripts, Inc. (ESI)
(Pharmacy inquiries)
1-866-DoD-TRRX
1-866-DoD-TMOP
www.express-scripts.com/TRICARE



HPV Test Covered Only with Abnormal Pap Smear

The human papillomavirus (HPV) test (CPT® procedure codes 87620–87622*) is covered by TRICARE only when performed after an abnormal Pap smear. It is to be used strictly for the assessment of women with atypical squamous cells of undetermined significance (ASCUS) or low-grade squamous intraepithelial (LSIL) cells.

The HPV test is **not** covered when performed as a screening test simultaneously with a regular Pap smear. If you indicate on your claim that the HPV test was included in the screening as “standard practice,” the claim will be denied. Furthermore, you must send the test to a network laboratory for the claim to be paid by TRICARE.

For further information, refer to the *TRICARE Policy Manual*, Chapter 6, Section 1.1 at <http://manuals.tricare.osd.mil>, visit www.triwest.com or call 1-888-TRIWEST (1-888-874-9378). ■

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