

Post-Traumatic Stress Disorder in Primary Care

Military members returning from deployment may experience post-traumatic stress disorder (PTSD). PTSD may develop after exposure to extreme psychological trauma, defined as events that potentially cause a threat to life or physical integrity, and produce feelings of fear, helplessness or horror. For reasons not currently understood, not everyone exposed to such trauma develops PTSD.

Individuals with PTSD:

- Frequently re-experience the traumatic event
- Experience persistent, heightened arousal not present before the trauma
- Make efforts to avoid stimuli associated with the trauma
- Exhibit numbing of their general responsiveness

The National Center for Posttraumatic Stress Disorder (NCPTSD) indicates nearly half of all behavioral health care visits are to a medical clinic or provider, and 90 percent of these are to primary care managers (PCMs). Therefore, it is important for PCMs to know the implications of PTSD so it can be identified and treated.

The NCPTSD provides the following examples of PTSD implications:

- **PTSD affects health.** Neurochemical changes in the central nervous system, sleep deprivation, risky behavior (e.g., substance abuse, anger and/or violence) and psychosocial problems can result in great biological strain on individuals with PTSD. These individuals report higher rates of cardiovascular, pulmonary, neurological and

gastrointestinal system problems. The somatic symptoms of PTSD are frequently the presenting problems in primary care consultations.

- **PTSD affects utilization of services.** Studies show that psychiatric issues, such as PTSD, anxiety, depression and anger, increase medical resource utilization rates. Identified problems include difficulty in provider-patient communication, increase in somatization and decrease in patient compliance and collaboration with medical regimens.
- **PTSD is under-recognized.** Studies show that most patients with PTSD are not identified and are therefore not receiving the appropriate education, counseling or referrals for mental health evaluation.

What Can Health Care Providers Do?

Practitioners often identify time constraints as a barrier to in-depth discussions about behavioral health issues. The NCPTSD states that “it is important to keep in mind that pressing someone into discussion of a traumatic event soon after exposure may have a detrimental effect on some traumatized individuals. Experts on traumatic stress emphasize that people have their own pace for processing trauma, and it is important for helpers to let survivors know that they should listen to and honor their own inner pace.”

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Fall TRICARE Seminars Continue in the West Region

TriWest's fall 2008 TRICARE provider educational seminars* continue through mid-December, providing you and your staff with the latest information on TRICARE programs, policies and procedures. New reference tools will be covered, and the 2008 *TRICARE Provider Handbook* and *Quick Reference Charts* will be provided to all attendees. Register online today at www.triwest.com/provider! ■

* The seminars are approximately 2.5 hours; however, the end time may vary based on level of audience participation.



Changes to Interactive Voice Response System

Providers who call the interactive voice response (IVR) system at 1-888-TRIWEST (1-888-874-9378) will notice some changes to the system's service options. You can now check detailed medical eligibility information over the phone, allowing you to get information you need 24 hours a day without assistance from a customer service representative.

Here is an overview of the changes:

- **Navigation:** Getting to the provider main menu is the same. However, once you select "eligibility," some simple prompts will guide you to the self-service module.
- **Data Collection:** Once you select "eligibility," you will be asked if your call is regarding medical or behavioral health. Behavioral health

care calls will be routed directly to the Behavioral Health Department. Providers seeking medical benefits information will be prompted for their tax identification number.

- **Playback:** Previously, you were only given the name of the plan in which the patient was currently enrolled. The new service also provides the effective date of coverage, and you will have the option to hear about:
 - Copayments
 - Deductibles for the plan and how much has been met to date
 - Cost-share expenses
 - Point of service information
 - Maximum out-of-pocket expenses (catastrophic cap) for the plan and how much has been met to date

- Other health insurance information (e.g., type of plan, if it is primary to TRICARE and if pharmacy is covered)

- **Detailed Fax:** You can receive a patient's eligibility details by fax, allowing you to file the information in the patient's record.

Customer service representatives are still available to assist you if the IVR has not offered the information you need. Additional information, including an updated IVR tip sheet, is available at www.triwest.com/provider. ■

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Diagnosis and Treatment

PTSD is treatable, and with early intervention the severity can be reduced. Luckily, PCMs are not alone—there are professionals who specialize in PTSD diagnosis and treatment. These suggestions may help you to assist your patients:

Ask about deployment. Routinely asking your patients if they have recently returned from a combat zone can help to identify those with PTSD.

Identify resources. Fact sheets, screening questionnaires and videos are available on TriWest's Behavioral Health Web Portal and the NCPTSD Web site at www.ncptsd.va.gov. TriWest has also created *A Provider's Guide to TriWest's Behavioral Health Resources*, which offers a snapshot of available resources.

Identify a PTSD consultant. You can reach a PTSD consultant by calling 1-888-TRIWEST (1-888-874-9378) and asking for the Behavioral Health Department, or by contacting your local "Vet Center," which can be found at www.vetcenter.va.gov.

Establish referral procedures. Establishing referral procedures early can save time and ensure quality referrals. The NCPTSD advises, "A few words indicating your awareness of [patients'] possible difficulties with stress, and supportively advising them that specialized services can be of great help, is almost always sufficient to motivate patients to accept this referral. You need not, and in most cases probably should not, attempt to take a detailed trauma history or make a diagnostic assessment of PTSD. This can be done by the PTSD clinician specialist."

Maintain ongoing contact with the PTSD consultant.

Once the referral is made, it is important to maintain contact with the PTSD consultant. Coordination of care often results in improved patient compliance.

For more information, refer to the TriWest Behavioral Health Web Portal at www.triwest.com/provider or call 1-888-TRIWEST (1-888-874-9378). ■

Stay Informed with TRICARE's New E-Mail Alert System

If you want the latest news from TRICARE but don't want to hunt for it, there's now an easy way to stay informed with TRICARE's new e-mail alert system.

The new system is up and running at www.tricare.mil, and subscribing is fast, easy and secure—all you need is an e-mail address. You can be notified as soon as news is posted or select daily, weekly or monthly updates. With dozens of available topics, you can select only the news you want.

The system also links you to alerts on other Military Health System Web sites, along with news from the Force Health Protection and Readiness and the Centers for Disease Control and Prevention Web sites. To subscribe, go to "TRICARE e-mail updates" at www.tricare.mil/pressroom. ■



TRICARE "Backs" New Surgeries

Two minimally invasive back surgeries, percutaneous vertebroplasty and kyphoplasty, are now covered by TRICARE. This policy change, which is retroactive to March 1, 2007, allows either of these procedures to be performed for the treatment of painful osteolytic lesions and osteoporotic compression fractures refractory to conservative medical treatment.

Due to their less invasive nature, percutaneous vertebroplasty and kyphoplasty can be performed on an outpatient basis, and patients are able to return to some degree of normalcy 24 hours after surgery.

As with any other type of surgical intervention, coverage limitations apply to these procedures. Factors such as the severity of the patient's symptoms, degree of vertebral destruction and the presence of concomitant spinal disease may affect a coverage determination. If you are uncertain about benefit coverage for your patient, call TriWest Healthcare Alliance Corp. at 1-888-TRIWEST (1-888-874-9378).

For more information on TRICARE-covered services, visit www.tricare.mil. ■



TRICARE Provider News

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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

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Thanks for Taking Care of Veterans Honoring Our Veterans' Service

Ninety years ago, on Nov. 11, 1918, the First World War ended and quiet finally settled over the trench lines of the ravaged European battlefields.

On this and every anniversary of the “war to end all wars,” America observes Veterans Day by honoring the sacrifices of the men and women who have served our country.

TRICARE and TriWest Healthcare Alliance Corp. want to thank you, our providers, for caring for our active duty service members, National Guard and Reserve members, military retirees and all of their family members throughout the year. And to those of you who are veterans, we extend our gratitude for your dedication and years of service. ■

