

## Behavioral Health Care for ADSMs Proper Procedure for Treatment Is Required

**S**ometimes active duty service members (ADSMs) are not sure where to turn when seeking behavioral health care services and may directly approach a specialized provider. In these circumstances, it is important to direct them through the appropriate procedure for obtaining care.

*ADSMs are not eligible for the eight self-referred outpatient behavioral health care visits.*

If behavioral health services are not available at a military treatment facility (MTF), the MTF provider has the option of referring the patient to civilian services under the Supplemental Health Care Program (SHCP).

Only the MTF can approve health care outside of the MTF. ADSMs must follow the procedures for seeking medical care within their local MTF. If the MTF is unable to provide care, then the Commander or Designee at the MTF will submit a referral directly to TriWest for the ADSM to see a civilian behavioral health care provider.

If an ADSM assigned to an MTF contacts a civilian behavioral health care provider directly, the provider should obtain the necessary information and send a referral request for behavioral evaluation and treatment to TriWest using the Preauthorization for Outpatient Treatment Request Form. The form is available on the TriWest Web site ([www.triwest.com](http://www.triwest.com)) in the Referral and Authorization section of the Provider Connection or by calling 1-888-TRIWEST.

The form should be faxed to TriWest at 1-866-269-5892.

As a behavioral health care network provider, you should not provide treatment without prior authorization. Services provided without prior authorization may not be reimbursed.

### TRICARE Prime Remote

ADSMs who are not assigned to an MTF are covered by TRICARE Prime Remote (TPR). All behavioral health care for ADSMs through TPR must be authorized by the Military Medical Support Office (MMSO). A provider or ADSM may initiate a request for care.

If the TPR ADSM contacts a civilian behavioral health care provider directly, the provider should follow the procedure outlined above to send a referral request for behavioral evaluation and treatment to TriWest using the Preauthorization for Outpatient Treatment Request Form.

### In a Crisis Situation

If you feel that the ADSM is in a crisis situation, refer him or her to a local emergency treatment facility or to the TriWest Crisis Line, which is accessible by calling 1-888-TRIWEST and following the prompts to the "mental health crisis" line.

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## Get the Latest News via E-News

**S**ign up today to get the latest TRICARE news, program updates and tips for using the many online services



available to network providers. Just click on the E-News icon on the TriWest home page ([www.triwest.com](http://www.triwest.com)), select "Sign Up Now" in the TRICARE Providers box, complete the subscription form, and news will soon be delivered right to your in-box. It's simple, easy to use and informative. ■



# Provider Seminars Continue through Early Summer 2005

TriWest's Provider Services staff is pleased to invite providers and their staff members to attend one of our upcoming civilian provider seminars. The seminars will be held through early summer.

The seminar agenda includes information on TRICARE programs and updates, TRICARE eligibility and

benefits, referral and authorization processing, claims and billing tips, electronic claims filing, consult report tracking and much more.

To learn the dates, times and locations of seminars in your state, go to the TriWest Web site, click the registration link in the "Educational Materials" section of the "Provider Connection,"

select your state from the drop-down list and click "Continue."

By registering online, you will receive an immediate confirmation by e-mail, as well as reminder e-mails a few days before your seminar.

If you do not have Internet access, call 1-602-644-5584 for more information. ■

## Behavioral Health Care for ADSMs

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### Coordinating Care with the PCM

You will receive a pre-authorization letter for the ADSM's behavioral care, which is specific to the approved number of visits and care. Once authorized treatment is underway, it is critical that the behavioral health care network provider communicate with the PCM.

To notify the PCM about treatment and progress, fax the PCM Communication Form to the fax number provided on your authorization letter within 10 days of the ADSM's first visit. The form is available on the TriWest Web site or by calling 1-888-TRIWEST.

When completing the PCM Communication Form, be sure to include the following information:

- Diagnosis
- Summary of treatment
- Frequency of visits
- General compliance with treatment
- Medications prescribed
- Patient's response to those medications

All information provided need only be general in nature and provide an overview for the PCM. If the PCM needs additional information, he or she can follow up with you.

### Active Duty Personnel Must Release Information

The PCM Communication Form is used for many types of TRICARE beneficiaries and includes an option for patients to refuse the release of information to the PCM. This option is **not** available for ADSMs because their contracts with the

military require the release of all treatment information to their PCMs.

Communicating behavioral health care information to the PCM is important to ensure the service member is fit for duty and will not pose a risk to his/her person or unit.

### Additional Resources

ADSMs are offered additional resources, such as the Military OneSource employee support program. This may include free counseling sessions provided outside of the military system, a toll-free hot line number (1-800-655-4545) and the Military OneSource Web site at [www.militaryonesource.com](http://www.militaryonesource.com).

### If You Have Questions

If you have any questions about behavioral health care treatment for ADSMs, you can call 1-888-TRIWEST or visit [www.triwest.com](http://www.triwest.com). ■

### Accessing the PCM Communication Form Online

To locate the PCM Communication Form on the TriWest Web site, follow these steps:

1. Go to [www.triwest.com](http://www.triwest.com).
2. Select the "Find a Form" tab in the top navigation bar, then select the "Provider forms" radial button.
3. Scroll to the "Behavioral Health" section and click on the "PCM Communication Form" link.



# Tips for Working with Dual-Eligible Beneficiaries

## Transition to Nationwide Claims Processor Complete

**A**fter an eight-month transition period, all three TRICARE regions are now working with a single, nationwide claims processing contractor—Wisconsin Physicians Service TRICARE For Life (WPS-TFL)—for all dual-eligible beneficiary claims. Dual-eligible beneficiaries are TRICARE beneficiaries who are also entitled to Medicare Part A and Part B.

Now that the transition to WPS-TFL is complete, here is some good information to know about dual-eligible claims processing.

### Dual-Eligible Beneficiaries Can Be Either Under Age 65 or Age 65 and Over

While most dual-eligible beneficiaries are age 65 and over, it is important to remember that some may be younger. Beneficiaries under the age of 65 may be dual-eligible based on disability or end-stage renal disease.

### How to Identify Your Dual-Eligible Patients

Each dual-eligible patient must present a valid uniformed services or military identification card, as well as a

Medicare card prior to receiving services. You should copy both sides of the cards and retain them for your files. If you have a question about a patient's eligibility, you can call the Defense Enrollment Eligibility Reporting System (DEERS) at 1-800-538-9552 to confirm TRICARE status and 1-800-772-1213 to confirm a patient's Medicare status.

### How to Process Claims

Since Medicare is the primary payer, you should continue to follow Medicare rules for claims processing and submit your dual-eligible claims to Medicare. Medicare will electronically transfer claims for dual-eligible (Medicare/TRICARE) beneficiaries, regardless of their age, directly to WPS-TFL. If a beneficiary has other health insurance (OHI), he or she will need to file a paper claim (DD Form 2642) with WPS-TFL, which includes the Medicare Summary of Benefits and an explanation of benefits from their OHI.

If you have questions, WPS-TFL can be reached toll free at 1-866-773-0404. You can also visit WPS online at [www.tricare4u.com](http://www.tricare4u.com). ■

## Improve Your TRICARE Smarts Online at TRICARE U!

“Cris” is new to her job at TRICARE, and she's just learning about the TRICARE Program and TRICARE Management Activity. “Ann” greets Cris at the Welcome Center and proceeds to share her comprehensive knowledge about TRICARE.

Cris and Ann are actually characters in the new public version of the TRICARE Fundamentals Course, now available online through TRICARE University. This new TRICARE employee and her mentor explain the ins and outs of TRICARE in easy-to-understand language.

While the lessons are geared toward TRICARE's new employees, the course is free and open to the public because it contains valuable TRICARE information for both providers and beneficiaries.

“The public course is an excellent starting point for providers,” says TRICARE University's Linda Foote, chief, Staff Development and Training Branch. “The public course provides a fast and easy method for office managers and others to learn TRICARE fundamentals.”



In 15 simple lessons, you can learn the essentials of TRICARE, from medical benefits to claims filing and much more.

“Once they understand the basics, providers and their staff can more easily grasp in-depth information as they continue to learn more.”

You can take the course in however many sessions you desire. It's not monitored for completion, and there is no grade or certificate awarded.

For more information or to take the public TRICARE Fundamentals Course, go to [www.tricareu.tricare.osd.mil](http://www.tricareu.tricare.osd.mil). TRICARE University is best viewed using Microsoft® Internet Explorer. ■

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## CONTACTS

**TriWest Customer Service**  
1-888-TRIWEST  
[www.triwest.com](http://www.triwest.com)

**TRICARE Alaska Office**  
1-907-743-1800

**Wisconsin Physicians Service**  
(Electronic claims set up)  
1-866-773-0404  
[www.wpsic.com](http://www.wpsic.com)

**Express Scripts**  
(Pharmacy inquiries)  
1-866-DoD-TRRx  
1-866-DoD-TMOP  
[www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE)



## Meeting Access Standards

### Obligations for TRICARE Network Providers

**U**nder normal circumstances, TRICARE Prime beneficiaries should have access to providers within specific time frames and certain distances from their homes.

#### Access Standards

TRICARE network providers servicing TRICARE Prime beneficiaries are obligated to meet the following access standards for appointments:

- **For urgent care or acute illness**, patients should receive an appointment within 24 hours.
- **For routine visits**, patients should receive an appointment within one week.
- **For specialty care or wellness visits**, patients should receive an appointment within four weeks (28 days).
- **Once in the office**, patients should be seen within 30 minutes for nonemergencies, except when you are providing emergency care to other patients and the normal schedule is interrupted. You should notify patients of the

cause for the delay and the length of delay anticipated, and then offer to reschedule the appointment.

#### Drive Time

Primary care managers (PCMs) should understand that beneficiaries are entitled to receive primary care within a 30-minute drive from their home under normal circumstances.

When helping patients with referrals to specialists, PCMs should also be aware that TRICARE Prime beneficiaries are to receive specialty care within an hour's drive from their home.

#### Verifying the Standards

Meeting the TRICARE Prime access standards is an essential condition for network providers. Network providers must notify TriWest within 30 days of any change to demographic information, panel status or ability to meet the appointment standards. ■