Request for Service Process
Quick Reference Guide

> ## Key Points:
> - A provider who determines that additional or continued care is needed must submit a Request for Service (RFS) to initiate the review and approval process.
> - When TriWest is appointing, providers must fax an **RFS to TriWest.** TriWest will review and, if needed, submit the RFS to the appropriate U.S. Department of Veterans Affairs Medical Center (VAMC) for review.
> - When the Veteran's VAMC is managing the appointing process, providers must submit an RFS directly to the Veteran's authorizing VAMC.
> - **To verify which entity is appointing in your area, please take a look at the RFS Matrix tool**.

Do I Need to Submit a RFS?

A RFS should be submitted when a provider determines:
- A Veteran needs continued care outside the authorized date range
- A Veteran needs more visits than what was originally authorized
- A Veteran needs additional procedures not included in the codes on the authorization letter
- Care is needed for a new condition

RFS Submission Process:

You can find the RFS form on the VA Storefront. From there:
- Click "Request and Coordinate Care" on the left-hand navigation bar under "For Providers"
- Then click "Request for Service (RFS) Requirements"
- The link to the RFS form will be at the bottom of the section

The RFS should include:
- A completed and signed RFS form
- Supporting medical documentation, discharge plans, or observations, and justification for the requested care

Once you've compiled this information, fax the completed RFS to either TriWest or the authorizing VAMC, depending on who appointed the Veteran:
- If TriWest appointed, send the RFS to TriWest.
- If VA appointed, send the RFS to the authorizing VAMC.

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For more information, go to VA Storefront
View a map of VA Community Care Regions

If you are not sure whether your Region submits to TriWest or VA, you can use the Lookup Matrix. Additionally, be sure you include the authorization number and the Veteran's unique identifiers on each page – this ensures the document is then processed correctly.

Note: A RFS is not required simply because an ancillary (radiology, bloodwork, etc.) or "downstream" provider (anesthesiologist, etc.) has a different TIN.

Routine, Urgent, Emergent – Determining Your Request Level

VA assesses a RFS based on clinical need and priority; this allows Veterans who urgently need care to have their review process escalated. There are three clinical priority levels for a RFS – Routine, Urgent and Emergent.

- ➔ **ROUTINE:** Any care that is not urgent or emergent is considered routine. NEVER mark your request for routine care as urgent or emergent. Please see below to determine if your request may be considered urgent or emergent.
- ➔ **URGENT:** Do NOT mark urgent for administrative urgency. Only mark a request as urgent if at least one of the following is true:
  - ➔ Processing time that lasts more than two days could jeopardize the life or health of the Veteran, or his/her ability to regain maximum function.
  - ➔ Processing time that lasts more than two days will subject the Veteran to severe pain that cannot be managed without the treatment being requested.
- ➔ **EMERGENT:** Indicate "emergent" only when a new issue/diagnosis has developed for a Veteran who was already authorized to see you, or a Veteran self-presents for emergency reasons without a prior-authorization (for emergency room visits, please see our **Quick Reference Guide on Emergency Care**).
  - ➔ VA determination of emergent care includes loss of limb, loss of life, loss of eyesight and other urgency at this level.
  - ➔ If the care is emergent, please proceed with the care and submit the RFS request immediately, indicating that the care is being rendered emergently.
  - ➔ Emergent requests can come in after care is rendered; providers can still get paid after review of the circumstances. This is an exception to the pre-authorization requirement.

Note: Please be aware that during this time of transition from VA's Patient-Centered Community Care Program (PC3) to the Community Care Network (CCN), the information contained on the VA Storefront website is specific to CCN. For information regarding PC3, go to www.triwest.com/provider.

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2

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