

In Case You Missed it

TRICARE® West Region e-Updates

March 2023

- 1. Refer TRICARE Prime beneficiaries to network providers. Military hospital and clinic or TRICARE civilian network providers should be the first option in TRICARE beneficiary care. Please continue to refer TRICARE Prime-enrolled patients to network providers, except in an emergency or if Health Net Federal Services, LLC (HNFS) pre-authorized the care to a non-network provider. Providers may be held financially responsible for costs incurred in connection to unauthorized and/or non-covered services, including beneficiary point-of-service fees. Please review recent updates to the 2023 TRICARE West Region Provider Handbook, published March 6, 2023, which include this information.
- 2. Billing for prolonged services. Prolonged services are time-based and involve a single same-day evaluation/management (E/M) encounter. Changes to TRICARE's billing process for prolonged services involving HCPCS code G2212 and Current Procedural Terminology (CPT®) code 99417 recently went into effect. To help avoid claim rejections and shorten claim processing times, please refer to the guidelines outlined in our recent Billing for Prolonged Services article.
- 3. New course available to learn about submitting consult reports. If you are treating a TRICARE patient who was referred by a military hospital or clinic, you will need to submit consult documentation also known as patient encounter reports or clear and legible reports (CLRs) to the referring provider within required time frames. We know that as a provider, you are busy, so we developed a short self-paced course for you to easily learn what you need to know about returning consult documentation to military hospitals and clinics.
- **4. Be sure to update your demographic information. Keeping your information up to date** is essential in helping TRICARE beneficiaries get the care they need quickly and easily. You can easily update things such as your address, phone number or specialty. Changes can be made using our online Update Demographics tool or our Network TRICARE Provider Roster, depending on what needs to be updated.
- 5. Understand how TRICARE works with other health insurance. Along with TRICARE plan changes, some patients may have new other health insurance plans. In general, if your TRICARE patient has other health insurance, be sure to follow the guidelines of that plan as you will not need approval from Health Net Federal Services. Exceptions to this are for applied behavior analysis services, all care for active duty service members, and for certain plans such as Medicare. Find all the details on our website. Beneficiaries who need to update their other health insurance information with us can do so via web, mail, fax, or phone.
- **6.** New benefit option for your patients with diabetes. As of Feb. 15, 2023, TRICARE covers the Omnipod® 5 automated insulin delivery system under the pharmacy benefit. Prescribing providers must request pre-authorization. Find details by searching for "Omnipod 5" in Express Scripts' TRICARE Formulary Search tool. Currently, Omnipod 5 is only available at retail pharmacies and is not available at military pharmacies or through Express Scripts Home Delivery.
- 7. Submitting complete Autism Care Demonstration pre-authorization requests. When you submit well organized pre-authorization requests that meet TRICARE's Autism Care Demonstration (ACD) requirements, you help HNFS make coverage determinations more quickly. Refer to our pre-authorization request refresher for information on Current Procedural Terminology (CPT®) codes, treatment plans and the Pervasive Developmental Disorder Behavior Inventory (PDDBI).
- 8. Right of first refusal for specialty care. When a TRICARE Prime beneficiary is referred for specialty care, he/she may be required to receive care at a local military hospital or clinic, even when enrolled to a civilian primary care manager. This process, known as TRICARE's right of first refusal, gives local military hospitals and clinics the opportunity to determine if they can provide treatment or if care should be referred out to a civilian provider. To help military facilities reasonably determine if they can effectively treat a beneficiary, please include as much clinical documentation as possible when submitting referral requests to HNFS.
- 9. Colonoscopy screening guidelines from Choosing Wisely®. The American Gastroenterological Association recommends providers not repeat colonoscopy for at least five years for patients who only have one or two small (<1cm) adenomatous polyps with low grade abnormality that have been completely removed by a high-quality colonoscopy. Learn more about this and other related guidelines at Choosing Wisely®.
- 10. March is National Nutrition Month. Your patients can learn about good nutrition, cooking and eating healthy, meal planning, weight management skills and strategies, and more with our Healthy Weighs for Life online program. They'll have access to videos and presentations, online resources, interactive forms, and activities to make learning fun. For a first attempt at weight loss, our Basics for Reaching a Healthy Weight program is a great place to start. Encourage the use of these resources to help your patients live healthier. We also have new individual coaching available: The Basics of Healthy Eating and Stress Management. Share the Preventive Care Coaching page with your patients for more information and registration.

COVID-19 Updates: Go to www.tricare-west.com/go/COVID19.