

## TRICARE® West Region Referral/Authorization Waiver Approval Letter

Dear Civilian Health Care Provider:

This letter serves as approval for TRICARE Prime patients to seek outpatient TRICARE-covered services that otherwise would require approval from Health Net Federal Services, LLC (HNFS).

On Feb. 20, 2018, the Defense Health Agency implemented a temporary waiver of outpatient referral and authorization requirements for eligible TRICARE West Region beneficiaries enrolled in a TRICARE Prime plan. Effective March 29, 2018, the Prime Referral/Authorization Waiver period has been extended through April 15, 2018 for civilian provider referrals/orders.

- Waiver Details:** Referrals issued by a civilian primary care manager (PCM) or other TRICARE-authorized provider do not require separate approval from HNFS during the waiver period. Outpatient TRICARE-covered procedures, services, and equipment ordered or initiated during the waiver period do not require separate approval from HNFS.
- Effective Dates:** Referrals and orders for services issued to TRICARE Prime beneficiaries by civilian providers Jan. 1, 2018 through April 15, 2018, are valid for services rendered through June 30, 2018.
- Included Services:** TRICARE-covered office visits and outpatient procedures/services/equipment that otherwise require HNFS approval, when a PCM or other TRICARE-authorized provider issued the referral between Jan 1, 2018 and April 15, 2018.
- Authorized Provider:** Any TRICARE-authorized provider. Network and non-network provider directories are available at [www.tricare-west.com](http://www.tricare-west.com).
- Exceptions:** Inpatient care, and applied behavior analysis (ABA), laboratory developed test (LDT) and Extended Care Health Option (ECHO) services require authorization during this waiver period.
- Limitations:** This waiver only applies to TRICARE-covered services. Please reference "Benefits A-Z" and the "Prior Authorization, Referral and Benefit" tool at [www.tricare-west.com](http://www.tricare-west.com).
- After Waiver Ends:** NEW referrals and orders issued by civilian providers on or after April 15, 2018, must follow TRICARE referral and authorization requirements. Point of Service charges and authorization penalties may apply if an HNFS approval is not obtained.

Documentation (for your records only, not required for claim submission):

- A written referral or order for covered procedures, services or equipment from the beneficiary's provider dated between Jan. 1, 2018 and April 15, 2018
- A copy of this TRICARE West Region Referral/Authorization Waiver Approval Letter

***This TRICARE West Region Referral/Authorization Waiver Approval Letter is your verification of approval.***

Sincerely,

Health Net Federal Services