

Thank You for Improving Consult Return Efficiency

Humana Military's Auto Fax Confirmations Ease the Process

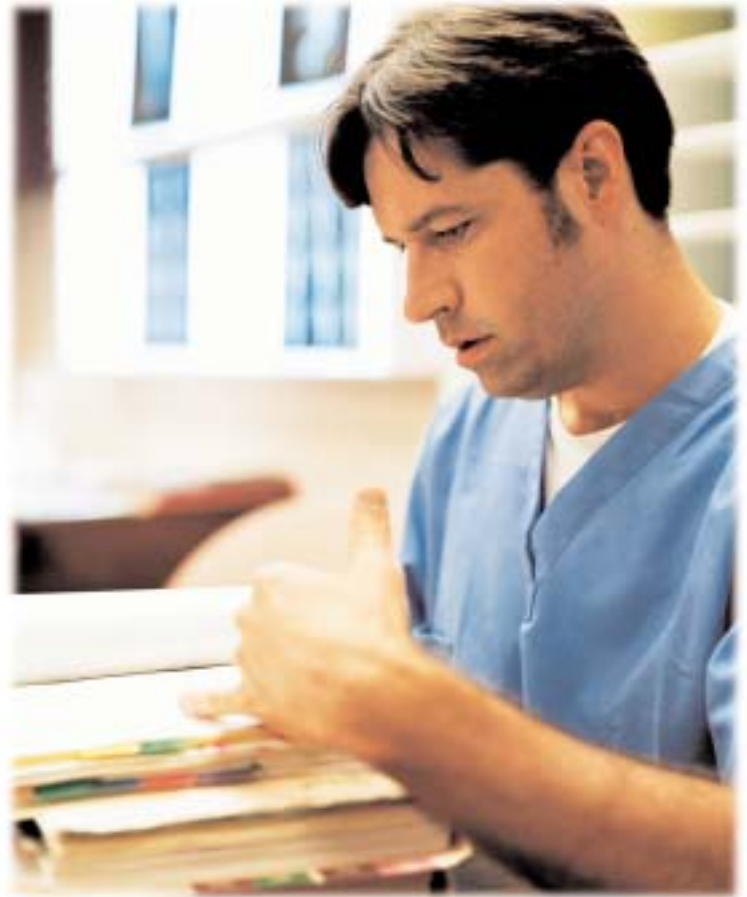
Humana Military thanks providers for responding and complying with the consult return process. Members of the Provider Relations Department at Humana Military remarked that they were impressed with providers' response and compliance. They specifically recognized the quicker response times and the increased number of providers responding to the auto fax confirmations containing initial requests.

Returning consult reports in a timely manner is very important to providing the best quality health care possible to TRICARE beneficiaries. This is especially true for those assigned to local military treatment facilities (MTFs) who are referred out to our network provider community for evaluation and treatment.

To help providers meet this requirement and expedite the consult return process, auto fax confirmations are issued at the time a referral/authorization has been established. For the MTF-assigned beneficiary referral, the auto fax confirmation includes a request to return the consult report to a specific fax number.

In most cases, providers receive this fax confirmation well before the TRICARE beneficiary makes an appointment. If it is an auto fax confirmation for a new or existing patient, providers should retain the confirmation until the TRICARE beneficiary makes an appointment and then place it with the patient's chart.

The auto fax confirmation includes the referral/authorization number and the consult return fax number when applicable. Providers should use the direction given on the auto fax confirmation for consult reports unless no fax number appears. This is to avoid having providers send documentation on all other TRICARE beneficiaries. ■



A Few Reminders Regarding Consult Returns

- If you are using a transcription service for your medical reports and you rely on them to return consults to Humana Military, be sure that they have the appropriate consult return fax number that is identified on the referral confirmation fax sheet for the patient.
- Consult reports should be returned within 10 days following the patient's appointment.
- For urgent consults that need to get back to the primary care manager (PCM) within 24 hours, contact the PCM by phone and follow up by sending the formal consult report to Humana Military within the next 10 days.
- For reports to be accurate and useful, please submit complete and legible documentation.



Child Psychiatrist vs. Developmental Pediatrician

Which Specialist Is Best for Your Patients?

Children with behavioral health needs are often referred to child and adolescent psychiatrists. Other times, a referral to a developmental pediatrician may be in order. This decision can sometimes be confusing for referring providers and the child's parents. Here is some general information that offers a distinction between the types of treatment each specialty provider renders, as well as guidelines for making a decision.

Child and Adolescent Psychiatrists

Child and adolescent psychiatrists have medical degrees (MD or DO). Most child psychiatrists have completed an internship and a residency in general psychiatry, in addition to a two-year fellowship in child and adolescent psychiatry.

Board certifications exist in both general psychiatry and child and adolescent psychiatry. A physician who is board certified in child and adolescent psychiatry will also be board certified in general psychiatry as a prerequisite.

Child and adolescent psychiatrists are able to perform evaluations, therapy and medication management. As physicians, they are familiar with medical conditions that may complicate a behavioral health condition. The assessment and treatment of DSM-IV-R disorders usually make up the main area of interest and main referral source for these specialists.

Developmental Pediatricians

The American Board of Pediatrics recently established certification in two separate developmental pediatrician subspecialties: neurodevelopmental

disabilities and developmental-behavioral pediatrics.

Neurodevelopmental disability is a conjoint program with the American Board of Psychiatry and Neurology that emphasizes neuromotor development and developmental disabilities.

The developmental-behavioral pediatrics subspecialty is under the sole auspices of the American Board of Pediatrics and focuses on psychosocial development and behavioral problems.

Generally developmental pediatricians evaluate and treat infants and children who are at high risk for developmental problems or have been referred for suspected developmental delays, including language, motor or cognitive delays. Some of these developmental conditions include Asperger's Syndrome, pervasive developmental disorder and autism.

Guidelines for Making a Decision

As you can see, there is considerable overlap among the specific behavioral and developmental disorders that physicians in these specialties are trained to treat. Treatment practices between these specialties may range from traditional therapy and medication to educational and occupational therapies. When referring patients to providers in these specialties, consider these general guidelines:

- Patients presenting with a primary DSM-IV-R disorder may be referred to either a developmental pediatrician or a child psychiatrist.

- Patients presenting with a DSM-IV-R disorder and with recognized genetic, neurological or organic etiologies may be better referred to developmental pediatricians.
- Patients with primary medical or neurological symptoms and with concurrent psychiatric disorders also may be better referred to developmental pediatricians.
- Patients in need of coexisting therapy (individual, family or group) may be most suited with a child and adolescent psychiatrist to direct the treatment.

Humana Military's first priority is to provide the best quality health care to TRICARE beneficiaries. As a referring provider, it is your responsibility to decide which specialist best meets the needs of your patient. Understanding the differences between these specialties and conveying the distinctions to patients' parents will help reduce confusion and provide a better understanding of how best to help their child. ■

Electronic Claims Filing Assistance

TRICARE requires all network providers to file claims electronically.

For assistance with any issues related to electronic media claims (EMC) submission for the TRICARE South Region, contact the PGBA EMC Help Desk at 1-800-325-5920, option 2.

Visit www.humana-military.com or www.mytricare.com for more information regarding electronic claims submission. ■

Simplifying Referrals and Prior Authorizations

Know the What, When and How

Providers continue to ask questions about referrals and prior authorizations. While both have specific steps, neither process needs to be too perplexing. Follow these simple guidelines to understand the “what, when and how” for obtaining referrals and prior authorizations.

What...

A referral is the process by which a primary care manager (PCM) or other provider sends a TRICARE beneficiary to another professional or ancillary provider for specialized medical services.

A prior authorization is the process of reviewing certain medical, surgical and behavioral health services to ensure medical necessity and appropriateness of care before the services are rendered.

When...

Beneficiaries enrolled in TRICARE Prime must obtain a referral from their PCM before receiving any type of nonemergency care that the PCM cannot provide (e.g., specialty care, ancillary services, etc.). Beneficiaries using TRICARE Standard and TRICARE Extra do not require referrals for any type of care.

A prior authorization is required for all inpatient hospital admissions and certain outpatient procedures. For a complete list of services requiring prior authorization, refer to the chart in Section 7 of your *TRICARE Provider Handbook* or visit the “Provider Resources” section of www.humana-military.com.

How...

Referral and prior authorization requests may be made online by visiting www.humana-military.com, by faxing the Patient Referral and Authorization Form (PRAF) to

Humana Military or by calling Humana Military. (For behavioral health referrals, contact ValueOptions.) Follow the simple steps below to submit referral or authorization requests. ■

Quick Tips for Submitting Referrals and Authorizations

When submitting your requests follow these quick tips:

Referrals

1. Referrals must be made to network providers. For beneficiaries enrolled in TRICARE Prime Remote for Active Duty Family Members, referrals may be made to non-network providers when a network provider is not available.
2. For behavioral health referrals, contact ValueOptions at 1-800-700-8646.
3. When completing the referral, always have the sponsor’s Social Security number (for the patient), the diagnosis and clinical data explaining the reason for the referral.

Authorizations

Make sure you have the following information (if applicable) when submitting an authorization request:

1. Sponsor’s Social Security number and address
2. Patient’s name, date of birth and relationship to sponsor
3. Admitting hospital, date, time, physician tax ID, name and billing address
4. Clinical conditions for surgery, including CPT codes

Online www.humana-military.com	Fax 1-877-548-1547	Phone 1-800-444-5445
After registering on the site, visit the “Provider Resources” section, click on “Online Provider Services,” then select “Referrals and Authorizations.”	Fax the completed PRAF to Humana Military. A sample of this form is available in the <i>TRICARE Provider Handbook</i> or in the Provider Resources section of the Humana Military Web site. Fax behavioral health referrals to 1-866-811-4422.	If you are having trouble with the Web or fax, contact a health care finder during regular business hours. For behavioral health services, call 1-800-700-8646.

TRICARE Provider News

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CONTACTS

Humana Military
1-800-444-5445
www.humana-military.com

PGBA (claims)
1-800-403-3950

ValueOptions (behavioral health)
1-800-700-8646

Pharmacy Customer Service
1-866-DoD-TRRx (retail)
1-866-DoD-TMOP (mail order)
www.express-scripts.com/TRICARE

National TRICARE Web Sites
www.tricare.osd.mil
www.tricareonline.com

Update DEERS
1-800-538-9552
www.tricare.osd.mil/DEERSAddress

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TRICARE Online: A Resource for Health Information

Thanks to the Internet, patients today are far more informed about health care and more inclined to work with their providers toward proper treatments. You can direct TRICARE beneficiaries to TRICARE Online at www.tricareonline.com to access general health information, health articles and resources, as well as interactive features and tools, including:

- A model of the human body that provides health information specific to the body part selected
- A medication interaction checker that offers important drug and food interaction information
- Health calculators that aid weight evaluation, weight loss and exercise needs
- Health risk assessments for conditions, such as heart disease and diabetes
- In-depth research resources, including a medical dictionary and surgical procedure guide
- Games and articles written specifically for children and teens
- Pregnancy and child care guides



TRICARE Online's General Health Information section empowers patients to make smarter health care decisions. Encourage your TRICARE patients to explore TRICARE Online today! ■