

Update: TRICARE Outpatient Prospective Payment System

What's Included... and What's Not

The TRICARE Outpatient Prospective Payment System (OPPS) reimbursement methodology will be implemented for claims June 1, 2007, and thereafter.

TRICARE OPPS applies to all hospitals participating in the Medicare program and hospital-based partial hospitalization programs subject to TRICARE authorization requirements. TRICARE OPPS also applies to hospitals or distinct parts of hospitals that are excluded from the inpatient Diagnostic Related Group Based Payment System, to the extent that the hospital or distinct part furnishes outpatient services (e.g., Sole Community Hospitals). Several organizations, as defined by TRICARE policy, are exempt from OPPS.

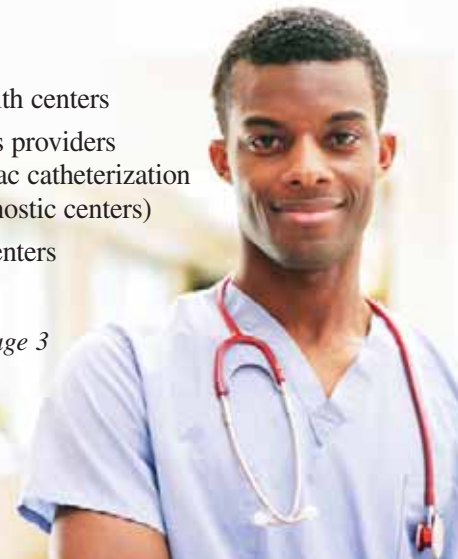
Some providers will be excluded from the TRICARE OPPS.

These providers are:

- Indian Health Service hospitals that provide outpatient services.
- Certain hospitals in Maryland that qualify for payment under the state's cost containment waiver
- Critical Access Hospitals

- Hospitals located outside one of the 50 states, the District of Columbia and Puerto Rico
- Specialty care providers including:
 - Cancer and children's hospitals
 - Freestanding ambulatory surgery centers
 - Freestanding partial hospitalization programs
 - End-stage renal disease facilities
 - Comprehensive outpatient rehabilitation facilities
 - Home health agencies
 - Hospice programs
 - Community mental health centers
 - Other corporate services providers (e.g., freestanding cardiac catheterization and sleep disorder diagnostic centers)
 - Freestanding birthing centers

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Do You Want to Know More About NPI?

The use of National Provider Identifiers (NPIs) was mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It is designed to ease the electronic transmission of HIPAA-standard transactions and simplify the administration of the health care system. TRICARE is now

collecting NPI numbers in preparation for implementing this requirement later this year.

If **you** need to get an NPI, Humana Military is here to help. Our Web site, www.humana-military.com, offers current information on the NPI transition along with frequently asked questions and directions for

you, our providers, to obtain NPIs. The directions include links to the National Plan and Provider Enumeration System (NPPES) Web site and the correspondence address. We also have a Web page for direct entry of NPI numbers for network physicians and facilities.

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Do You Want to Know More About NPI?

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Your 10-digit NPI is an intelligence-free numeric identifier that does not carry information about you, such as the state where you practice, your provider type or specialization. Your new NPI will replace other health care provider identifiers, including Medicare legacy IDs, which are used in HIPAA-standard transactions.

Once you have an NPI, it will not change and will remain with you regardless of job or location changes. Here are some things to remember about NPIs:

- The NPI must be used in all HIPAA-standard transactions.
- You must communicate to the NPPES any changes to the data elements in your NPPES record within 30 days of the change.
- You may receive and use only one NPI if you are an individual provider (physician).
- A designated health care component may be assigned multiple NPIs if they are made up of multiple health care providers or subparts.
- There will be two categories of health care providers for enumeration purposes:
 1. Entity Type Code 1 is for individuals such as physicians, nurses, dentists, chiropractors, pharmacists and physical therapists.
 2. Entity Type Code 2 is for organizations such as hospitals, home health agencies, clinics, nursing homes, residential treatment centers, laboratories, ambulance organizations and suppliers of durable medical equipment.

We are working very closely with our fiscal intermediary, PGBA, LLC, to ensure coordination of TRICARE provider NPI collection for electronic claim filing and to make this a smooth process. If you have any questions, please go to www.humana-military.com. ■

Helping Returning Service Members and Their Families Through the Adjustment Process

Deployment is an important part of military life. While separations are hard on families, sometimes reuniting can be more challenging. As a TRICARE provider, you can help to support returning service members and their families through the behavioral health challenges they may be experiencing by encouraging them to seek help.

While spouses and children anxiously anticipate the return of their beloved service member, it is also a time of significant change and readjustment.

Returning service members may experience feelings of change and “not quite fitting in” with the family. Communication with family members may be difficult, and emotional and physical intimacy with their spouses may be awkward. Feelings of sadness are also common because service members have missed significant phases of their children’s growth. Strong emotional reactions or flashbacks to past combat and war-zone-related experiences can also affect their ability to adjust to the civilian world.

Help your patients recognize these mental, behavioral and emotional signs:

- Becoming withdrawn
- Loss of interest in activities that were previously enjoyable
- Difficulty concentrating
- Angry outbursts and aggressive behavior
- Frequent crying
- Feelings of anxiety, fear or paranoia

Families are usually happy and excited when a service member returns; however, many things may have changed since the service member left. Spouses should keep in mind that their service member may need some time to adjust to civilian and family life because of the effects of war and long separations from loved ones. Family or individual counseling may ease this period of transition.

Please be aware that family members may experience feelings of anxiety while adjusting to having their loved ones home again. For a substantial amount of time, spouses have taken a greater role in caring for children, managing the finances and tending to the home. The children have grown, assumed more responsibilities and adjusted to a single-parent household.

The return of a service member is a joyous occasion, but it can sometimes be a challenging and stressful time for service members and their families. It’s important that you help your patients recognize the symptoms of a behavioral health issue and encourage them to get help. ■

Effective Communication Equals Quality Health Care

Communication between health care providers and patients is essential to providing quality health care to TRICARE beneficiaries.

In the fast-paced world of hectic clinic schedules and demanding professional commitments, it's worth taking a moment to examine our interactions with patients. More importantly, we should look at how our patients might perceive those relationships. Effective doctor-patient communication is the key to fully understanding a patient's health care needs and responding with effective treatment options and advice.

Some people may feel anxiety, frustration or distrust toward the health care system. This may be due to a previous experience or their general discomfort in a health care setting. Patients may become frustrated if they receive conflicting information about their condition. Sometimes, inconclusive results increase a patient's sense of uncertainty and insecurity, and can lead to a lack of trust in health care providers.

The following may already happen in your practice, but are provided here as helpful reminders of the common elements of effective provider-to-patient communication.

- **Speak clearly**—Clarify the use of technical terms and use simple vocabulary.
- **Incorporate diagrams or pictures**—Using a picture or diagram to illustrate a common physiological or anatomical problem can help the patient better understand what is going on inside his or her body.
- **Provide options**—When recommending treatment options, clearly convey the patient's options, potential outcomes and associated risks.
- **Ask questions**—It is important to gauge how well patients understand the information you've provided. Ask open-ended questions, allowing them to repeat what you've said, and get clarification if they don't understand.
- **Offer support**—Depending on the patient's condition, whether routine or serious, it is important to communicate support and encouragement to the patient about the treatment decision.

We know that too much information too soon can lead to "information overload."

Be aware of how much information your patient is absorbing and follow up with the patient in a few days with a phone call if you think it might be helpful. ■

Reminder to Behavioral Health Providers:

Behavioral health providers accepting assignment are reminded they can only collect deductibles, cost-shares or co-payments at the time services are rendered. They cannot collect full fees prior to rendering services. Providers can contact ValueOptions at 1-800-700-8646 at anytime to obtain eligibility, benefit coverage, deductible, cost-share and co-payment information. ■

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How is TRICARE OPPTS different from Medicare OPPTS?

Some examples of the common differences between Medicare and TRICARE OPPTS are:

Maternity observation stay—TRICARE will allow separate payment for maternity observation stays assigned to the Level II Healthcare Common Procedure Coding System (HCPCS) codes G0378 and G0379. A separate maternity observation ambulatory payment classification amount will be paid if the stay is for a minimum of four hours and accompanied with one of the required maternity diagnosis.

Preventive medicine services—Under Medicare, procedure codes 99381-99387 and 99391-99397 for preventive medicine services are not covered. Services for these codes are covered under the TRICARE OPPTS.

OPPTS deductible and cost-sharing—The same TRICARE deductible and cost-sharing/copayments currently being applied under the TRICARE Prime, Extra and Standard programs for outpatient services will remain in effect under the OPPTS.

To access additional information regarding the TRICARE OPPTS program, please reference the *TRICARE Reimbursement Manual*, Chapter 13, at <http://manuals.tricare.mil>. ■

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1-800-444-5445
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PGBA, LLC (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 Site
www.tricare.mil

Update DEERS
1-800-538-9552
www.tricare.mil/deers/default.cfm

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Provider News is published by TRICARE Management Activity. Please provide feedback at www.tricare.mil/evaluations/feedback.



Online Information Updates Now Available

A recent addition to the Provider Services section of Humana Military Healthcare Services' Web site now allows you to view and instantly update your individual provider information online.

This new feature appears under "Online Provider Services" and "Primary Care Manager Central" online at www.humana-military.com. Just click the link to get started.

This service was created to improve our preferred network provider listings and offer an electronic method of reviewing and updating your provider information posted to our TRICARE South Region provider locator.

Humana Military directs our beneficiaries and providers to select network providers for primary care and specialty referrals from our provider locator. We want to make sure the information is accurate and timely in order to prevent delays in primary care manager assignment.

The ability to display and maintain current provider information is very important for appropriate network direction, location access and claims payment. We now offer our individual providers the opportunity to try this

new feature—and keep us informed of updates and changes to your provider file including your new National Provider Identifier.

Currently, the new view and update feature is for individual providers only and does not apply to behavioral health providers, but we will be expanding the option to include network groups, facilities and ancillary services as we continue to enhance this service.

We hope this new feature meets the needs of our valued network providers and demonstrates that we are listening. We're always working to identify ways to offer our providers more efficient and effective communications.

If you have not used our Web site, please go out to www.humana-military.com and look at the options available. We have site demos, log in assistance, self-study guides and many other items for our providers' daily business with TRICARE. ■