

## Look-Alike/Sound-Alike Drugs Often Work Differently

**W**hat do hydroxyzine and hydralazine have in common? Because their names sound the same, there is a chance the antihistamine could be switched for the antihypertensive agent, leading to a serious adverse drug event.

During the past seven years, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has worked to reduce the errors associated with look-alike/sound-alike drugs.

“The issue in terms of look-alike/sound-alike drugs is that this is a very common source of medication errors,” said Dr. Geoffrey Rake, M.D., director of the Department of Defense Patient Safety Center at the Armed Forces Institute of Pathology in Silver Spring, Md.

While pharmaceutical firms and the U.S. Food and Drug Administration work to reduce the likelihood of mix-ups associated with look-alike or sound-alike drugs, this type of error still occurs—sometimes with tragic results. According to a study by the Institute of Medicine, *Preventing Medication Errors*, there are at least 1.5 million preventable adverse drug events in the United States each year.

For 2006-2007, JCAHO updated the drugs that hospitals and other health care organizations must pick from for their organization’s look-alike/sound-alike list.

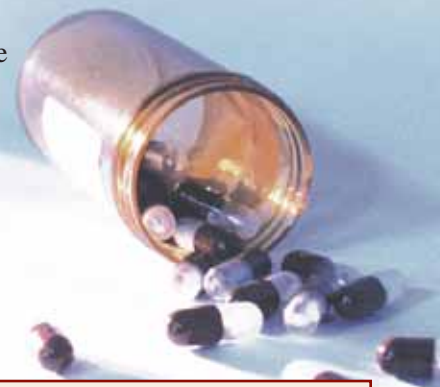
New this year for critical access hospitals, hospitals and office-based surgery are:

- Hydroxyzine and hydralazine
- Metformin and metronidazole
- OxyContin® and oxycodone

For ambulatory care, assisted living, behavioral health care, disease-specific care, home care and long-term care, newly added drugs include:

- Lorazepam and alprazolam
- Metformin and metronidazole
- Topamax® and Toprol XL®

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## Welcome to myTRICARE.com

**A**re you looking for a way to streamline your claims process? Would you like to verify patient eligibility or check other health insurance (OHI) for your patients in one place? “myTRICARE.com” provides claims assistance as well as other valuable information and tools for providers.

To become a registered member of the Web site, log on to [www.myTRICARE.com](http://www.myTRICARE.com) and follow these steps:

- Click on “Register Now” on the homepage.
- Select “Are you a TRICARE provider?”
- Read and accept the terms and conditions.
- Enter your tax ID number, state and zip code where you practice.
- Click on “Submit.”
- Check the status of your TRICARE claims anytime, day or night.
- Submit claims through XPressClaim<sup>SM</sup> and receive instant results.
- Create and download unique accounts-receivable reports with “dataMart.”
- View and print TRICARE remits.
- Submit National Provider Identifier numbers.

Once registered, you can:

- Verify patient eligibility, OHI and out-of-pocket expense information.

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To reduce the possibility of errors, JCAHO's recommendations to providers prescribing medication include:

- Clearly specify dosage form, drug strength and complete directions on prescriptions.
- Reduce the potential for confusion by writing prescriptions using both the brand and generic name.
- Include the purpose of the medication on the prescription (often look-or sound-alike drugs are used for different purposes).
- Alert patients to potential mix-ups, especially with problematic drug names, and insist on pharmacy counseling when picking up outpatient prescriptions.

- Encourage inpatients to question nurses about medications that are unfamiliar or look or sound different than expected.
- Give verbal or telephone orders only when necessary. Orders for chemotherapeutics should never be given over the telephone. Include the intended purpose for clarity and encourage your staff to read back all orders, including the drug's spelling and indication.

For more information on look-alike/sound-alike medications and complete lists of the medications at risk, go to the JCAHO Web site at [www.jointcommission.org/PatientSafety/NationalPatientSafetyGoals](http://www.jointcommission.org/PatientSafety/NationalPatientSafetyGoals), look under "2007 Resources" and select "Look-alike/Sound-alike drug list Updated for 2006-07." ■

## Welcome to myTRICARE.com

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Using myTRICARE.com also gives you the freedom to modify your account, submit CMS-1500 or UB-04 claim forms or ask confidential questions about patients and receive prompt responses in your myTRICARE.com mailbox—all without ever having to pick up the phone.

Online claims submission is effortless with XPressClaim. With this free, easy-to-use tool, you can file a claim and print a Patient Summary Receipt before your patient leaves the office!

"dataMart" is a unique feature that allows you to sort information any way you like. This myTRICARE.com feature allows you to:

- View claims status for all TRICARE patients in one or more locations on the same report.
- Create, view, print or download unique accounts-receivable reports.
- Sort information by date range, patient's name, account number or other options.

For a more detailed overview of myTRICARE.com, view the "Provider Demo." This provides a great overview of the

myTRICARE.com claims process. You can also find online demos of XPressClaim and dataMart.

If you want to simplify your claims process or have better access to patient information, log on to [www.myTRICARE.com](http://www.myTRICARE.com) today! ■



# Injectable Drugs Claims Filing

## Attention to Detail Speeds Processing

**W**hen submitting claims for injectable drugs, it is important to pay attention to the details, such as the National Drug Code (NDC) number, drug quantity and package unit (P/U) indicators. Including these essential pieces of information on all injectable drug claims will ensure accurate pricing and speedy payment of all injectable drugs administered by providers.

### Electronic Claims Submission

Electronic media claims provide the fields for keying the NDC, drug quantity and the package or unit indicator, in addition to the HCPCS/CPT drug code and quantity, which can be different from the NDC drug quantity. Where necessary, please provide supporting documentation such as the certificate of medical necessity (CMN), medical records or NDC information. This can be submitted to PGBA, LLC through FAXGATE and will be attached to the electronic claim.

### Paper Claims Submission

When billing paper claims using the CMS-1500 claim form (08/05 version), providers must follow these guidelines for proper claims processing and payment:

- In the CPT/HCPCS column directly above the line in section 24D, include the appropriate CPT/HCPCS code and the quantity.
- In the shaded area above the actual CPT/HCPCS code, you must include the 11-digit NDC number (with no spaces or dashes), the drug quantity based on the NDC and the P or U indicator.

Remember, if supporting documentation (such as CMN, medical records or NDC information, etc.) is needed, please include it with the submission of the paper claim. ■

## New Claim Forms: CMS-1500 and UB-04

**T**RICARE Management Activity (TMA) has recently extended the dual use of the CMS-1500 (version 12/90) and CMS-1500 (version 08/05) as well as the CMS-1450 (UB-92) and the new CMS-1450 (UB-04) forms until December 31, 2007. This means providers can have until the end of the year to phase out the old forms and start using the new versions.

Beginning January 1, 2008, all claims must be submitted using the CMS-1500 (version 08/05) claim form (for providers) or the new UB-04 claim form (for facilities). Keep in mind that using new forms means you must update your software. Claims are being submitted with information in the wrong fields because of outdated software.

Remember, to experience timely processing of your TRICARE claims please use the appropriate claim forms and be sure to upgrade your software! ■



Humana Military Healthcare Services, Inc.  
P.O. Box 740044  
Louisville, KY 40201-7444

## CONTACTS

**Humana Military**  
1-800-444-5445  
[www.humana-military.com](http://www.humana-military.com)

**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](http://www.express-scripts.com/TRICARE)

**National TRICARE Web Site**  
[www.tricare.mil](http://www.tricare.mil)

**Update DEERS**  
1-800-538-9552  
[www.tricare.mil/deers/default.cfm](http://www.tricare.mil/deers/default.cfm)

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## Centers of Excellence for Bariatric Surgery

**B**ariatric surgery continues to be a common treatment option for patients with morbid obesity and related chronic diseases. To provide TRICARE beneficiaries with the highest quality of appropriate medical, nutritional and psychological care, we encourage referring beneficiaries to the centers of excellence for bariatric surgery.

The centers of excellence for bariatric surgery are nationally recognized as being able to provide the best quality care. These facilities are certified by the American College of Surgeons as Level 1 Bariatric Surgery Centers, or certified by the American Society for Bariatric Surgery as Bariatric Surgery Centers of Excellence. These facilities are listed at [www.cms.hhs.gov/MedicareApprovedFacilities/](http://www.cms.hhs.gov/MedicareApprovedFacilities/).

Facilities certified as a center of excellence are evaluated based on the following criteria:

- Surgical experience (number of procedures performed)
- Hospital facilities
- Multidisciplinary care available
- Complications and mortality rates
- Long-term and follow-up programs

Humana Military has worked diligently to bring these centers into the TRICARE South network. Additionally,

Humana Military is working to identify those beneficiaries who have requested an evaluation and have met the criteria for bariatric surgery. This is in effort to refer and have these beneficiaries schedule their pre- and post-operative care with a center of excellence on the TRICARE network provider list.

By helping beneficiaries obtain the appropriate referrals, the risk of postoperative complications and early death after surgery may be reduced. Surgeons and facilities with higher volumes of bariatric surgery have lower rates of complications and patients spend less time in recovery, which contribute to better post-operative results for your patient.

In May 2006, the Centers for Medicare and Medicaid Services (CMS) implemented a Medicare National Coverage Decision that allows coverage for bariatric surgery only in approved facilities. This has been a common decision among several commercial health care plans that cover bariatric surgery.

Please carefully consider referring candidates for bariatric surgery to TRICARE-authorized facilities. For TRICARE beneficiaries in the South Region, bariatric surgery requires prior authorization by Humana Military. ■