

## Obtaining Prior Authorization for Prescriptions

If you've ever had questions about how to obtain prior authorization for prescriptions, what forms are required and where to get them, the following is a guide for obtaining authorization through TRICARE.

### Medications Requiring Prior Authorization

Prior authorization and/or validation of medical necessity may be required for prescription coverage under several circumstances, including:

- Certain medications as designated by the Department of Defense (DoD) Pharmacy and Therapeutics Committee
- Medications that have the potential for inappropriate use
- Medications used for conditions not covered by TRICARE
- Medications with more cost-effective equivalents having similar or better clinical effectiveness, available on the Uniform Formulary
- Brand-name medications with generic equivalents
- Medications with quantity limits when a greater amount is needed
- Medications with age and/or gender limitations
- Active duty service members who require a medication designated non-formulary (Tier 3) under the DoD Uniform Formulary

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## Humana Military Offers Program for Injured and Ill Warriors

Humana Military Healthcare Services, Inc. (Humana Military) proudly announces the Warrior Navigation and Assistance Program (WNAP) to support severely injured or ill active duty service members and activated National Guard and Reserve members and their families in the TRICARE South Region. In addition to the specialized support the WNAP seeks to provide to warriors and their families, the newly formed WNAP unit also will oversee education and assistance initiatives for civilian providers responsible for the ongoing care of these warriors and their families. TRICARE providers are encouraged to make their patients aware of this new resource.

The goal of the new WNAP is to provide TRICARE benefit information and guidance to wounded warriors and their families who are navigating the Military Health System (MHS), and to assist those who are in transition from the MHS to the civilian health care system.

Through Humana Military's dedicated, toll-free WNAP telephone number, 1-888-4GO-WNAP (1-888-446-9627), warriors and their families have direct access to a multi-disciplinary team that will help solve problems and provide other medical or community resources. With the WNAP, TRICARE beneficiaries can access information on all available resources whether it is through the MHS, Veterans Affairs or community assets. A broad spectrum of clinical programs designed to meet the special needs of soldiers, sailors, airmen, marines, coast guard members and their families also is available.

In addition to the previously mentioned services, the WNAP also offers:

- Enhancements to the Humana Military Web site:
  - Inclusion of such brochures as "Information and Resources for Combat Veterans"
  - Addition of the new AchieveSolutions® Web site feature at [www.achievesolutions.net/tricaresouth](http://www.achievesolutions.net/tricaresouth), which includes educational articles, resources and tools
  - Expansion of outreach efforts to the National Guard and Reserve audience
- Care management initiatives, including behavioral health support

For more information about the WNAP, visit the Humana Military Web site at [www.humana-military.com](http://www.humana-military.com) or call 1-888-4GO-WNAP (1-888-446-9627) today. ■



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To determine formulary status, copayment, availability, prior authorization, and quantity or age/gender limits for specific medications, use the DoD Formulary Search Tool at [www.tricareformularysearch.org](http://www.tricareformularysearch.org).

To validate medical necessity for a brand-name medication when a generic equivalent is available or to justify exceptions to quantity limits or age/gender limits, call 1-866-684-4488 for prescriptions to be filled through a TRICARE network retail pharmacy or include relevant clinical information with prescriptions to be filled through the TRICARE Mail Order Pharmacy.

### Non-Formulary (Tier 3) Medications and Military Status

Designation of a medication as “non-formulary,” also known as Tier 3 under the Uniform Formulary, impacts active duty service members (ADSMs) differently than active duty family members (ADFMs), retired service members and their family members, and other TRICARE-eligible individuals.

TRICARE **will not cover** a non-formulary (Tier 3) medication for an ADSM (who pays no copayment)

unless it is determined to be medically necessary **in lieu of** all similar alternatives on the Uniform Formulary.

ADFMs, retired service members and their families may obtain non-formulary (Tier 3) medications at the \$22 Tier 3 copayment **without** medical necessity determination. However, they may receive a non-formulary (Tier 3) medication at the \$9 formulary (Tier 2) copayment **if** it is determined to be medically necessary **in lieu of** all similar alternatives on the Uniform Formulary.

### Forms and Contact Numbers

Prior authorization and medical necessity criteria and forms are accessible via the Formulary Search Tool Web site at [www.tricareformularysearch.org](http://www.tricareformularysearch.org). These forms apply only to prescriptions filled through retail network pharmacies or the mail-order program. Military treatment facility (MTF) pharmacies may follow different procedures. Please contact the MTF for details.

At the top of each form, there is information on where to send the completed form. For assistance in completing prior authorization or medical necessity forms, please call 1-866-684-4488. ■

## Get Up-to-Date Provider Information on the Web or Over the Phone

**A**s a primary care manager (PCM) for TRICARE beneficiaries, there may be instances where you will need to refer your patients to providers, facilities or specialists for continuity of care. Accessing accurate and real-time TRICARE South Region provider information is no farther than a click or call away thanks to Humana Military Healthcare Services, Inc. Humana Military’s Provider Locator tools are easy to use and available anytime—24 hours a day, seven days a week—at [www.humana-military.com](http://www.humana-military.com) or via 1-800-444-5445.

In order for Humana Military’s Provider Locator tools to continue to provide accurate and up-to-date information, providers must be vigilant about updating the system when there are changes in their demographic information. To update your provider information, simply visit [www.humana-military.com](http://www.humana-military.com) and click on the Online Provider Services link. ■



## Resolving Claims Errors: Work within the TRICARE System

A simple claim error can lead to a complicated and stressful situation for you, your staff and the TRICARE beneficiary involved. Such situations are further complicated when debt collection agencies become involved. When a claims problem occurs, you'll often see quicker results if you work directly within the TRICARE system by collaborating with your regional contractor, claims processor and beneficiary advocates.

Both network and non-network providers are encouraged to explore every possible means to resolve claims issues without involving debt collection agencies.

In the TRICARE South Region, Humana Military Healthcare Services' claims processor partner, PGBA, LLC (PGBA), is your first point of contact for resolving claims issues. In most instances, PGBA will be able to resolve your issue or concern. Call PGBA at 1-800-403-3950 or visit the PGBA Web site at [www.myTRICARE.com](http://www.myTRICARE.com).

If the problem cannot be resolved at this level, encourage your patients to contact a TRICARE beneficiary advocate. Beneficiary counseling and assistance coordinators (BCACs) and debt collection assistance officers (DCAOs) can help the beneficiary better understand their benefit and help them understand and resolve claims issues.

DCAOs, in particular, help beneficiaries evaluate the validity of collection agency claims and/or the negative credit reports that sometimes result from them. Sometimes, when acting as the beneficiary advocate, the DCAO may even contact you. Any information you can provide to expedite resolution is greatly appreciated.

BCACs and DCAOs are located at TRICARE Regional Offices and at military treatment facilities (MTFs). To find a BCAC or DCAO near you, call the closest MTF or search the online BCAC/DCAO Directory at [www.tricare.mil/bcacdcao](http://www.tricare.mil/bcacdcao). ■

### Common Claims Errors

To help avoid claim errors, double-check the accuracy of the following before submitting a claim:

- Correct beneficiary address
- Correct Social Security number (SSN)—Do not submit under the beneficiary's SSN unless that person is the military "sponsor" or the person is an eligible former spouse.
- Correct procedure and diagnosis codes—Unclassified Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) codes should be used only with a clear description of what is being billed.

## Online Tool Accelerates Referral and Authorization Processes

With just a couple of clicks on the Humana Military Healthcare Services, Inc. (Humana Military) Web site, you can speed up your patients' referrals to specialists and cut down your office staff's workload. An online referral or authorization can be completed in as little as five minutes, compared with potentially lengthier telephone and fax referral wait times.

The primary reason more than 50 percent of TRICARE providers use the online referral system is its efficiency. The system automatically populates much of the needed referral information. As a result, the majority of your online referrals and authorizations are approved on the spot and completed while your patient is still in your office.

Visit [www.humana-military.com](http://www.humana-military.com) today to use this efficient, time-saving tool. From the Humana Military home page, click on the Online Provider Services link and then click on the Online Referrals and Authorizations link. Remember, you must sign in to use this feature. Simply enter your user ID and password to begin receiving authorizations while your patients wait! ■



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Louisville, KY 40201-7444

## CONTACTS

**Humana Military  
Healthcare Services, Inc.**  
[www.humana-military.com](http://www.humana-military.com)

**PGBA, LLC (claims)**  
1-800-403-3950  
[www.myTRICARE.com](http://www.myTRICARE.com)

**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/update-info.cfm](http://www.tricare.mil/deers/update-info.cfm)

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## Duplicate Claims ... A Reason for Concern

Surprisingly, a great number of providers file “duplicate” TRICARE claims each month. Thousands of duplicate claims are identified each quarter of the year and many are reviewed for potential fraud.

### Why Does This Occur?

There are several scenarios that lead to duplicate claims submissions, if not closely monitored. Here are some points to remember to help you avoid the costly mistake of submitting duplicate claims:

- The higher your claims volume, the more likely duplicates are to occur.
- Duplicate claims submissions tend to happen more often with professional claims than with institutional ones.
- Following laboratory and radiology claims, mid-size provider offices and groups tend to submit the largest number of duplicates.

- Duplicates appear in both electronic files and paper submissions.
- Many providers’ offices re-file without allowing sufficient time for the first claim to be processed.

### Why Are Duplicates a Problem for Providers?

At face value, a duplicate claim may not appear to be a major issue. However, if the claim is being filed electronically, it may overlap with the previously submitted claim and cause a delay in processing. In addition, paper duplicates may be entered before the original, making it more difficult to track the claims. Furthermore, there may be times when you intend to file a “corrected claim;” however, if the claim is not flagged as a “corrected claim,” it will be denied as a duplicate.

Duplicate claims submissions also can be a bookkeeper’s nightmare. If your

office’s patient accounting system were to track the duplicate as a separate claim, it could mistakenly duplicate the patient’s copayments and expected reimbursement. Duplicate claims also should be a reason for concern if your office uses a billing service or a clearinghouse to file its claims—particularly if you are being charged per claim!

As the claims processor for TRICARE in the South Region, PGBA, LLC must assign an internal claim number to every incoming claim, whether electronically or on paper. This can make it very difficult for PGBA to discern which claim is correct, especially if it has been submitted several times in the same month.

Remember ... a duplicate is not recognized as a “corrected claim” unless it is flagged as such. Please allow adequate time for your claim to be processed. ■