

TRICARE for National Guardsmen and Reservists

Members of the National Guard/Reserve and their families are eligible for TRICARE under specific circumstances, such as:

- When called or ordered to active duty for more than 30 consecutive days—the service member is covered as an active duty service member and their family as active duty family members for TRICARE purposes.
- When released from active duty (deactivated) after supporting a contingency operation—the service member and their family are eligible for 180 days of TRICARE coverage under the Transition Assistance Management Program.
- When called to active duty and meet early eligibility requirements—National Guard/Reserve members who are activated in support of a contingency operation on delayed effective-date orders and their family members are eligible for TRICARE up to 90 days before the active duty begins.

Line of Duty Care—Separate from TRICARE

National Guard/Reserve members are eligible for health care if they sustain a line-of-duty (LOD) injury. LOD care is separate from TRICARE benefits received in any of the situations just mentioned.

LOD care is usually provided at a military treatment facility (MTF) if available, but the MTF may refer the National Guard/Reserve member to a civilian provider. When National Guard/Reserve beneficiaries live in remote locations, the Military Medical Support Office may coordinate non-emergency care through any TRICARE-authorized/certified provider.

More information about LOD changes is available on the TRICARE Web site at www.tricare.osd.mil and the Reserve Affairs Web site at www.defenselink.mil/ra. ■

From the Desk of the CMO

John Crum, MD
Chief Medical Officer
Humana Military Healthcare Services

Reduce Work with Online Referrals and Authorizations

At Humana Military, we've made significant strides in streamlining and automating the process of referrals for Prime enrollees and authorizations for admissions and procedures requiring prior authorization. In March 2006, civilian providers chose to submit over 43 percent of their referrals and authorizations through the Online Provider Services feature at www.humana-military.com. That's up from 24 percent in August 2004. This internet procedure reduces the time your staff requires to prepare and

submit service requests, and speeds receipt of the approval by your office, specialists and facilities. More than 75 percent of referral and authorization requests are system approved, resulting in immediate notification to the requesting provider and automated fax transmissions to the PCM, specialist and facility (if applicable) in under two hours.

Here's how to sign up for Humana Military's Online Provider Services:

- Go to www.humana-military.com and click on "Register Now" in the right column. Select the "Online Provider Services" option. Read the information about signing up for *HMHS Online Provider Services*. Click on the "Continue >>" button.
- Next, enter a User ID of your choice to access *HMHS Online Provider Services*. Now enter and confirm a password of your choice. The password must be 8 to 12 letters and/or numbers

and contain at least one letter, one number and one special character. Then choose an AKA name that will function as a *public* User ID. (This allows you to keep your User ID confidential.) Finally, select a password reminder question from the drop down box and enter an answer. Click on the "Continue >>" button.

- Enter the information requested in the "Personal Information" box and click on the "Continue >>" button.
- Read the "HMHS Security and Information Protection Agreement" that covers information you will be able to access through *HMHS Online Provider Services*. Click on "I accept this agreement" and click on the Provider Home Page.

You are now ready to take advantage of the convenience and speed offered by Humana Military's online referrals and authorizations processes. ■



ClaimCheck®/ClaimReview—Correct Claims Coding

ClaimCheck® is a review system used by Humana Military to audit claims for the correct coding of current procedural terminology (CPT) and health care procedural coding system (HCPCS) procedure codes. ClaimReview is a companion system that audits claims for the correct coding of procedure and diagnosis codes.

Humana Military uses these claims review systems to fulfill contract requirements to ensure correct coding of all TRICARE claims. These review systems are essential in maintaining and monitoring program integrity while reducing the provision of inappropriate services on future claims.

ClaimCheck/ClaimReview is used for all claims processed under the South contract, except:

- Inpatient institutional (including a skilled nursing facility)
- Physical therapy
- Adjunctive dental
- Home Health Prospective Payment System
- Active duty service members (ClaimReview only)

Note: Upon the 2007 implementation of Outpatient Prospective Payment Systems (OPPS), all claims subject to OPPS reimbursement will also be excluded from ClaimCheck/ClaimReview.

ClaimCheck audits claims for the correct coding of the following CPT and HCPCS procedure codes:

- Incidental procedures
- Medical visits billed with primary procedures
- Unbundled services
- Mutually exclusive procedures
- Services included in pre-operative or post-operative care
- Medical need for an assistant surgeon
- Bilateral and duplicate procedures
- Single code edits

ClaimReview simultaneously audits claims for the correct combination of CPT, HCPCS and diagnosis codes—ensuring the program pays for the right number of services at the right time in the right place.

It is important that you and your staff understand the need for correctly coded claims as it can be a complex process. For claims to be coded correctly, it is essential for you and your staff to stay informed about the latest coding guidelines and software.

If there is a discrepancy or disagreement with a ClaimCheck or ClaimReview reject, the following reconsideration process is in place:

1. Review the claim and corresponding medical documentation to determine if additional or more complete coding is available.
2. Adjust the coding on the claim.
3. Mark “corrected claim” at the top of the claim form.
4. Submit the claim to Palmetto Government Benefit Administrators with the corresponding medical documentation:
 - Fax: 803-462-3993
 - Mail: TRICARE South Correspondence
P.O. Box 7032
Camden, SC 29020-7032

If more complete coding is not available, a formal request for reconsideration should be submitted to the fax number or mailing address noted above with supporting documentation for the codes applied on the original claims.

The outcomes from the reconsideration process may include:

- Errors made during adjudication are corrected
- Information to assist in filing correct claims
- Notification on TRICARE policy
- Customization to prevent future erroneous edits

Assigning correct codes to claims is a complex, but necessary process that will ensure you receive appropriate reimbursement for your services.

Several resources are available to help you and your staff navigate the ClaimCheck/ClaimReview world. Additional information can be found on the following Web sites:

- www.humana-military.com
- www.myTRICARE.com
- www.AHIMA.com
- www.AAPC.com. ■

Third-Party Liability

Knowing the Process Ensures Timely Payment of Claims



The Federal Medical Care Recovery Act allows the government to be reimbursed for costs associated with treating a TRICARE beneficiary who has been injured in an accident caused by someone else. When a claim appears to have possible third-party involvement, certain actions must be taken that can affect total processing time.

Knowing the third-party liability process can help you take steps to ensure more timely payment of such claims.

All potential third-party recovery claims will be identified and investigated by Humana Military. Any inpatient claims with diagnosis code 800-999, regardless of dollar value, or any outpatient claim with diagnosis code 800-999 that exceeds TRICARE liability of \$500, will be considered a potential third-party liability claim.

These claims will not be processed until the beneficiary completes and submits a Statement of Personal Injury—Possible Third-Party Liability Form (DD Form 2527). You can find this form online at www.tricare.osd.mil/claims or at www.humana-military.com.

Please inform the beneficiary that the DD Form 2527 must be completed, signed and submitted within 35 calendar days, or the claim will be denied.

If the illness or injury was not caused by a third party but the diagnosis code still falls within 800–999, the beneficiary may still be responsible for filling out the DD Form 2527. ■

Cancer Clinical Trials

The seven-year partnership between the National Cancer Institute (NCI) and the Department of Defense (DoD) gives TRICARE beneficiaries more options for cancer care and access to the latest advances in cancer treatment. Through the DoD/NCI Cancer Clinical Trials Demonstration Project, TRICARE beneficiaries can participate in phase II and phase III NCI-sponsored trials.

Phase II trials focus on and study a particular type of cancer and provide information on a particular treatment. A phase III trial compares a new agent or treatment, or the new use of a standard treatment, with a current standard therapy.

By providing the opportunity for your patients to enroll in an NCI-sponsored cancer clinical trial, you are giving

them access to the latest and most promising advances in cancer research.

No patients receive placebos or go without treatment when there is a standard cancer therapy available.

More than 2,000 health care facilities around the country, including military hospitals, participate in NCI-sponsored clinical trials. The costs of screening tests to determine trial eligibility, and the cost of taking part in the trial are covered under the agreement between the DoD and NCI.

To learn more about NCI/DoD cancer clinical trials, visit www.cancer.gov/clinicaltrials for the latest news in cancer research and general information on clinical trials. ■

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

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



National Patient Safety Goals

In late spring 2005, the Joint Commission on Accreditation of Healthcare Organization's (JCAHO) Board of Commissioners officially approved the National Patient Safety Goals for 2006. These nationally recognized goals are derived from recommendations in the newsletter, *Sentinel Event Alert*, and contain relevant information regarding safety for patients and providers. Humana Military supports promulgation and implementation, where applicable, of these Patient Safety Goals.

New Goals for 2006

- Review of the 'Ambulatory Care and Office Based Surgery,' 'Behavioral Health' and 'Disease Specific' categories reveals one common new goal. This goal represents an enhancement to communication between providers and caregivers. JCAHO is recommending a consistent, standardized approach for "hand-off" communications when the patient is transferring to another level of care, another department, or another facility. These communications should afford a chance to ask questions, clarify issues, etc.
- In the 'Ambulatory Care and Office Based Surgery' category, another new goal enhances medication safety. JCAHO is recommending adequate labeling of solutions, medications and their containers in procedural settings.

- The category of 'Disease Specific' goals advocates an active fall safety program, with measures to assess the effectiveness of the programs. Other new goals for this category address the need for inclusion of patients and families in safety planning and interventions, and incorporation of methods to urge reporting of safety issues.

For the remaining goals and a helpful FAQ document, please access additional information from the JCAHO Web site at www.jointcommission.org/PatientSafety/NationalPatientSafetyGoals/06_npsg_facts.htm.

Humana Military wishes to express gratitude for your continued efforts to promote patient safety—good work, and thank you! ■

Sources:

Joint Commission on Accreditation of Healthcare Organizations. Patient Safety. Retrieved March 23, 2006, from: www.jointcommission.org/PatientSafety/NationalPatientSafetyGoals/06_npsg_facts.htm

Joint Commission on Accreditation of Healthcare Organizations. Speak Up. Retrieved March 23, 2006, from: www.jointcommission.org/PatientSafety/SpeakUp