

## You Can Help Prevent Fraud and Abuse

**H**ealth care fraud and abuse not only are costly, dishonest and deceptive, but they also are preventable. Identifying and preventing fraud and abuse helps save valuable benefit dollars and also ensures that TRICARE beneficiaries receive the quality of care that they are entitled to receive.

Fraud is defined as the intentional deception or misrepresentation of facts, resulting in unauthorized benefits or payments. When undetected, fraud can negatively impact patient care. Examples of fraud include the following:

- Billing for services at a higher level than provided or necessary
- Collecting amounts from TRICARE beneficiaries that exceed the TRICARE-allowable amount
- Failing to disclose coverage under other health insurance (OHI)
- Falsifying claims or medical records
- Falsifying eligibility
- Misrepresenting the dates, frequency, duration or description of services rendered
- Misrepresenting who provided the services
- Submitting claims for services not rendered/used

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## TRICARE and Other Health Insurance

**U**nderstanding how a TRICARE patient's other health insurance (OHI) complements TRICARE benefits can help ensure that you receive timely and correct claims payments.

OHI is any non-TRICARE health insurance that a beneficiary—excluding active duty service members (ADSMs)—may receive from an employer or other public or private insurance program. TRICARE pays last after all OHI plans, except in the following instances:

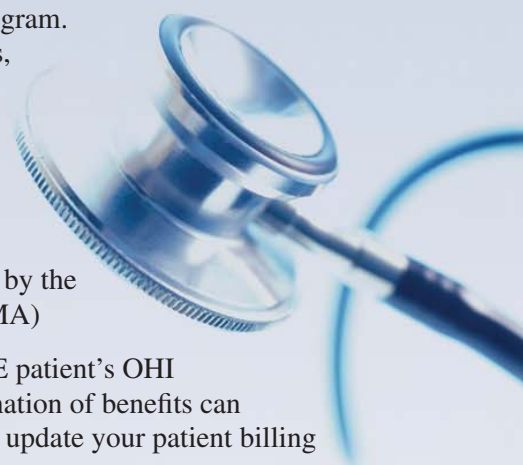
- Medicaid
- TRICARE supplements
- The Indian Health Service
- Other programs or plans as identified by the TRICARE Management Activity (TMA)

Make sure you confirm your TRICARE patient's OHI status on a regular basis so that coordination of benefits can occur. If OHI status changes, you must update your patient billing records to avoid delays in claims reimbursement.

### Coordinating Referrals and Authorizations with OHI

Humana Military Healthcare Services, Inc. (Humana Military) does not require referrals or prior authorizations when a beneficiary's OHI is the primary payer, except for the following covered services:

- Adjunctive dental care
- Behavioral health care services
  - All nonemergency inpatient admissions for substance use disorder or behavioral health care
  - Partial hospitalization programs and residential treatment center programs
  - Psychotherapy after the initial eight outpatient visits
  - Psychoanalysis
- Home health services
- Hospice care
- Solid organ and stem cell transplants
- TRICARE Extended Care Health Option (ECHO) benefits



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Abuse is practicing improper or inappropriate actions, having less than acceptable standards of professional conduct or performing services that are not medically necessary. Examples of abuse include the following:

- A pattern of claims for services not medically necessary
- A pattern of waiving cost-shares and/or deductibles
- Failure to maintain adequate medical or financial records
- Improper billing practices
- Refusal to furnish or allow access to medical records

To report suspected fraud or abuse by another provider or a TRICARE beneficiary, call the Humana Military Healthcare Services, Inc. (Humana Military) Fraud and Abuse Hotline at 1-800-333-1620.

You can also access the online *Humana Military Program Integrity Referral Form* under “Fraud and Abuse” in the “Tools and Resources” section of the beneficiary services portal of the Humana Military Web site or contact the TRICARE Program Integrity Office at:

TRICARE Management Activity  
 Attn: Program Integrity  
 16401 East Centretech Parkway  
 Aurora, CO 80011-9066

Fax: 1-303-676-3981  
 E-mail: [fraudline@tma.osd.mil](mailto:fraudline@tma.osd.mil)  
 Web: [www.tricare.mil/fraud](http://www.tricare.mil/fraud)

TRICARE strives to provide quality, affordable health care to all of its beneficiaries. Preventing fraud and abuse is one way to keep costs down and ensure that all beneficiaries receive the optimal care they deserve. We ask for your cooperation in preventing and reporting fraud and abuse. ■

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However, if the OHI benefits are exhausted and TRICARE becomes the primary payer, additional referral and prior authorization requirements may apply.

**Submitting OHI Claims**

When TRICARE is the secondary payer, submit the claim to the primary insurer first. To coordinate benefits, supply the following information on the Centers for Medicare and Medicaid Services (CMS) 1500 Health Insurance Claim Form (CMS-1500):

- Indicate the sponsor’s full name in BOX 4. (Do not complete if “self” is checked in BOX 6.)
- Indicate the full name of the person with OHI that covers the patient in BOX 9, as well as the following additional information:
  - Other insured’s policy or group number in BOX 9a
  - Other insured’s date of birth and sex in BOX 9b
  - Other insured’s employer name or name of school in BOX 9c
  - Name of insurance plan or program name where individual has OHI in BOX 9d
- Mark “Yes” in BOX 11d indicating that there is an OHI plan primary to TRICARE.
- Indicate the amount paid by the OHI carrier in BOX 29.

You may not collect any out-of-pocket costs from a TRICARE beneficiary after the payment of a claim, unless OHI and TRICARE payments combined do not meet the following:

- The negotiated rate, if you are a network provider
- The TRICARE-allowable charge, if you are a non-network provider accepting assignment
- 115 percent of the TRICARE-allowable charge, if you are a non-network provider not accepting assignment

For more information on filing OHI claims for TRICARE beneficiaries, refer to “TRICARE and Other Health Insurance” in Section 8 of the *TRICARE Provider Handbook*, or call PGBA at 1-800-403-3950. ■

# DoD, TRICARE and VA: United in Treating Post-Traumatic Stress Disorder in Service Members

With the ongoing wars in Iraq and Afghanistan, post-traumatic stress disorder (PTSD) in returning active duty service members (ADSMs) is on the rise. According to the National Center for Posttraumatic Stress Disorder (NCPTSD), the occurrence of PTSD in this population happens:

- In about 12 to 20 veterans of the Iraq war (Iraqi Freedom) out of 100 veterans
- In about 6 to 11 veterans of the Afghanistan war (Enduring Freedom) out of 100 veterans

The Department of Defense (DoD), TRICARE and the Department of Veterans Affairs (VA), are all heavily focused on performing post-deployment screenings and reassessments for the proper diagnosis and treatment of all behavioral health disorders, including PTSD, in returning ADSMs.

Additional research from the NCPTSD also reveals that an individual suffering from PTSD will most likely seek care first from his or her primary care manager (PCM). As a result, the DoD, TRICARE and VA are relying on PCMs to take an active role in identifying PTSD symptoms and ensuring these trauma survivors get the appropriate help and treatment they need.

It is important for PCMs to recognize that combat veterans, while wanting help, may exhibit some hesitancy in talking to you about their behavioral health issue in order to avoid a perception of weakness. Consequently, communication with military patients can be challenging. To assist providers in approaching military patients, the DoD and VA created clinical practice guidelines, which are available online at [www.oqp.med.va.gov/cpg/PTSD/PTSD\\_GOL.htm](http://www.oqp.med.va.gov/cpg/PTSD/PTSD_GOL.htm). **Note:** Some of the

treatments may not be covered under TRICARE covered benefits. Please verify coverage before starting any treatments on beneficiaries diagnosed with PTSD. Call ValueOptions, Inc., Humana Military's behavioral health care partner in the TRICARE South region, at 1-800-700-8646.

## Identifying PTSD Symptoms

PTSD is an anxiety disorder that occurs after someone has been through a traumatic event. Indirect trauma, e.g., seeing another person in a life-threatening situation, can trigger PTSD as well.

After such events, victims may feel scared, confused or angry. The trauma is persistently re-experienced as intrusive recollections, images, thoughts, dreams, dissociative flashbacks or intense reactions to situations that resemble an aspect of the traumatic event. Additionally, the affected individual will avoid things associated with the trauma (or respond in a numb manner). A victim may display general avoidance of all activities, a restricted ability to experience emotion and an inability to recall certain aspects of the trauma.

Other less specific symptoms that also may be present include increased arousal and startle response, difficulty sleeping, irritability and poor concentration. There may be guilt, coexisting depression, panic disorder or substance abuse.

When these symptoms don't go away or they get worse, a person may have PTSD. To accurately diagnose PTSD in a patient, symptoms must be present for at least one month and significantly impair function.

The NCPTSD Web site, [www.ncptsd.va.gov](http://www.ncptsd.va.gov), provides screening tools to assist you in evaluating and diagnosing PTSD.

In addition, the American Psychiatric Association has compiled evidence-based guidelines on the treatment of acute stress disorder and PTSD. These materials are available at [www.psych.org/psych\\_pract/treatg/pg/prac\\_guide.cfm](http://www.psych.org/psych_pract/treatg/pg/prac_guide.cfm).

## Providing PTSD Care

ADSMs can ordinarily seek care for symptoms of PTSD at their military behavioral health care (BHC) clinic on base without a referral from their PCM. However, in instances where behavioral health care services are unavailable on base, ADSMs should secure a referral from either their on-base BHC clinic or PCM for treatment of PTSD from a civilian provider. For any contact or discussions (other than submission of the contractually required consult report) to occur between a civilian provider and designated third party—i.e., a military provider, either on-base BHC clinician or military treatment facility (MTF) PCM—a civilian provider may require a Health Insurance Portability and Accountability Act (HIPAA)-compliant authorization signed by the ADSM, allowing the release of information to the specified third party.

Family members and retirees can obtain PTSD coverage or other BHC services through their behavioral health benefits from military or civilian network providers.

For more information about PTSD, visit the NCPTSD Web site at [www.ncptsd.va.gov](http://www.ncptsd.va.gov). For more information about TRICARE behavioral health care benefits, resource tools for your patients or additional Web resources, visit the Provider Portal of the Humana Military Healthcare Services, Inc. Web site at [www.humana-military.com](http://www.humana-military.com). ■

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

## CONTACTS

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

**Claims**  
1-800-403-3950  
[www.myTRICARE.com](http://www.myTRICARE.com)

**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)

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*TRICARE Provider News is published by the TRICARE Management Activity. Please provide feedback at [www.tricare.mil/evaluations/feedback](http://www.tricare.mil/evaluations/feedback).*



## Providers' Top Three Q&As about TRICARE

### **Q. Where can I find more information about TRICARE and Humana Military?**

A. The nationally operated Web site for the TRICARE military health care program is [www.tricare.mil](http://www.tricare.mil). Both providers and beneficiaries can access information about the TRICARE program, its benefits, other valuable resources and Humana Military. The Humana Military Web site can be found at [www.humana-military.com](http://www.humana-military.com). It features general information about the TRICARE South region and Humana Military. Providers are encouraged to become registered users of the Web site to gain full access to secured information about eligibility, claims, referrals and prior authorizations.

### **Q. How do TRICARE beneficiaries know where to find my office?**

A. The Humana Military Web site includes an online tool to help TRICARE beneficiaries locate only TRICARE network providers in their geographical area. The "Find a Provider" tool includes several search options to find a provider.

### **Q. What if my provider office information is wrong or we have added a new location?**

A. In order for Humana Military's Provider Locator tool 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. Outdated or changed information directly impacts referral and prior authorization procedures and claims processing, and can cause unnecessary problems or delays.

TRICARE network providers can update their information by visiting [www.humana-military.com](http://www.humana-military.com) and clicking on the MyHMHS for Providers link. Non-network providers will need to contact PGBA directly by calling 1-800-403-3950 with any updates or changes in demographic information. ■