

Secure Web Tool Makes Updating Information Easy

Have you been looking for a quick and easy way to help TRICARE South Region beneficiaries find you? If your answer is “yes,” look no further than the Humana Military Healthcare Services, Inc. (Humana Military) Web site.

Visit www.humana-military.com and log on to “MyHMHS for Providers.” This secure provider portal offers you a unique way to relay updates to your provider relations representative via the “Provider Direct Entry for Updates and Changes” tool.

Available to network providers with secure access, this feature allows you to view and update your locator information online. The “Provider Direct Entry for Updates and Changes” page provides a summary of your office information, which is used to populate the provider locator and online referral selection screens.

Although it was launched near the end of 2006, the tool has only been used intermittently. Humana Military therefore encourages you to begin using this valuable, time-saving tool. It will eliminate the need for you to call or mail your office updates, and because it is available through our secure provider portal, there is less chance of your information being relayed incorrectly or to the wrong party.

“Provider Direct Entry for Updates and Changes” is currently available for individual providers (except behavioral health care providers) in the TRICARE South Region.

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Reminder: ID Cards Alone Do Not Verify TRICARE Eligibility

Because a TRICARE beneficiary’s eligibility status is subject to change, it is important to verify his or her eligibility during each visit to your office.

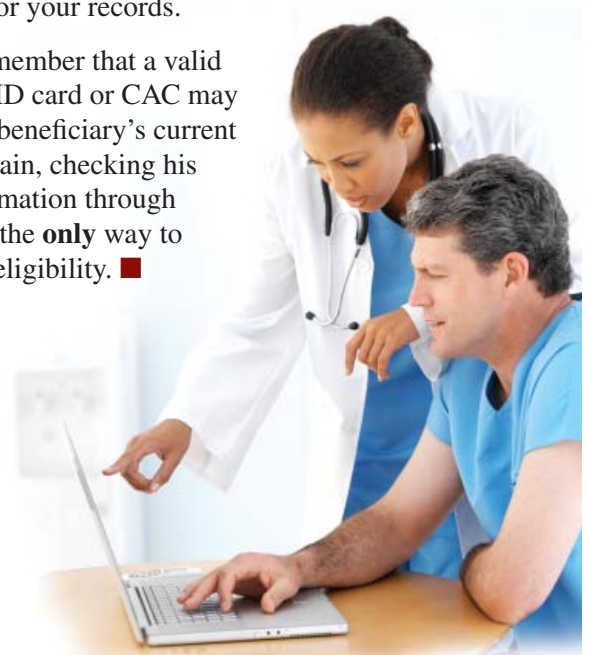
Although TRICARE beneficiaries may have several forms of identification (ID)—e.g., an enrollment card, uniformed services ID card or Common Access Card (CAC)—an ID card alone does **not** verify eligibility. In order to confirm a TRICARE beneficiary’s eligibility, you must check that he or she is registered as eligible in the Defense Enrollment Eligibility Reporting System (DEERS).

While TRICARE beneficiaries can verify their own eligibility in DEERS, the Privacy Act (Title 5, United States Code, Section 552a) does not allow providers to access DEERS directly to verify eligibility.

To verify that a patient is eligible in DEERS, you must log on to the Humana Military Healthcare Services, Inc. (Humana Military) Web site at www.humana-military.com. Before confirming eligibility, review the patient’s uniformed services ID card or CAC to ensure it is not expired and make copies of both sides for your records. If the card is expired, the beneficiary will need to update DEERS and obtain a new card.

When verifying eligibility online, you will need to provide the sponsor’s Social Security number, which is available on the patient’s uniformed services ID card or CAC. Remember to print the eligibility verification screen for your records.

It is important to remember that a valid uniformed services ID card or CAC may not always reflect a beneficiary’s current eligibility status. Again, checking his or her DEERS information through Humana Military is the **only** way to confirm TRICARE eligibility. ■



Hispanic Community Suffers from Depression

According to the U.S. Census Bureau, Hispanics are currently the fastest-growing minority group in America. By the year 2050, the Hispanic population is expected to grow to almost three times its current size, from 46.7 million to 132.8 million.¹ This means nearly one in three people living in the United States will be Hispanic.

While the Hispanic population increases, so does the incidence of depression among this population. According to a study published on the Centers for Disease Control and Prevention Web site,² Hispanics suffer disproportionately from depression compared with other ethnic groups.

Factors that may contribute to the higher rates of depression include a person's sex, socioeconomic status, culture and lack of health insurance.

An article published by the American Psychological Association (APA)³ indicated that one reason depression may be higher among Hispanics is the language barrier. While many Americans of Hispanic descent speak both Spanish and English, not all are comfortable speaking English 100 percent of the time. Some may also find it hard to fully express their emotions in English or may not feel like they are being understood by their provider. According to the APA, only about one percent of U.S. psychologists identify themselves as Hispanic.

Cultural beliefs and a "family first" mentality may also dissuade some Hispanics from seeking treatment.³ Some may see taking care of oneself as selfish or less important than taking care of the family as a whole.

Understanding these values and the importance of the family structure can help you better understand your Hispanic patients.

Another reason Hispanics often do not seek treatment for depression is because of the perceived stigma associated with having a mental disorder. Because of their reluctance to seek treatment, Hispanics are more likely to manifest depression's physical symptoms (e.g., stomachaches, headaches, dizziness or tiredness), which may lead to misdiagnosis.

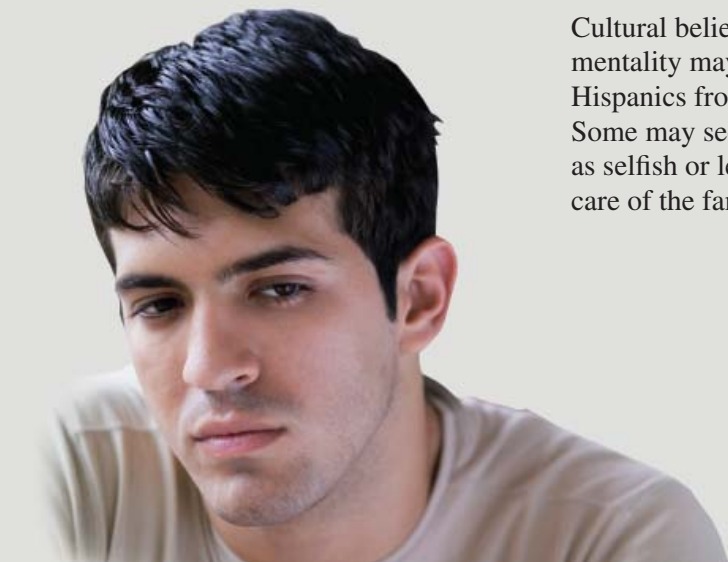
To break down the barriers that prevent this population from seeking care, it is important to become familiar with their culture and responsive to their cultural needs. Familiarizing yourself with the Spanish language can also help you to better understand your patients and lead to a successful outcome in therapy.

For more information, please visit www.promoteacceptance.samhsa.gov. ■

¹ U.S. Census Bureau Press Release, available at www.census.gov/Press-Release/www/releases/archives/population/012496.html.

² Available at www.cdc.gov/pcd/issues/2007/oct/07_0021.htm.

³ Available at www.apa.org/monitor/jan05/closingthegap.html.



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In the future, the goal is to make it available for hospitals, clinics and group settings, including physical therapy, outpatient rehabilitation and ambulatory surgical centers.

Remember, keeping your contact and location information up to date ensures that TRICARE beneficiaries can find you. And in accordance with TRICARE Prime access standards, it helps to guarantee that patients will not have to travel more than 30 minutes to see their primary care manager or more than one hour to see a specialist.

Visit www.humana-military.com and log on to "MyHMHS for Providers" to use the "Provider Direct Entry for Updates and Changes" tool whenever your contact and locator information changes. This will ensure that TRICARE beneficiaries who are looking for you are pointed in the right direction. ■

Avoid Claims Rejections, Resolve Issues

Did you know that most rejected claims are often due to a simple error? To ensure TRICARE claims are processed correctly the first time, follow these easy tips:

- **Use the correct Social Security number (SSN).** An incorrect SSN will likely cause a claim to be denied. TRICARE requires use of the sponsor's SSN. The exception is for a beneficiary who is a TRICARE-eligible former spouse of the sponsor. In this instance, use the beneficiary's SSN. All TRICARE beneficiaries have a uniformed services identification card that provides the sponsor's SSN.
- **Verify the patient's address.** Because service members move or are often in transit, ask beneficiaries to update their contact information during each visit.
- **Apply accurate coding.** Use the Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS) codes that most accurately describe the procedure or service. Do not select codes that approximate the service, and avoid using unlisted or miscellaneous codes. When no code exists, it is likely the procedure or service is not covered.
- **Assign primary and supporting codes.** You can avoid claim line denials by assigning primary and supporting codes that denote the reason for the procedure, as well as any diagnosis that affects treatment.
- **Use proper V codes.** A V code can be submitted as the primary diagnosis when it explains the reason for the visit (e.g., a routine child checkup). When submitting a claim with a V code for an ancillary service, list the underlying medical condition as the primary diagnosis. For example, if you submit a claim with the V code for a radiologic exam, you must include a primary diagnosis, such as chest pain, to explain the reason for the X-ray.
- **Verify important information.** Ensure the following information is accurate when submitting your claim:
 - Date of service
 - Patient's date of birth
 - Rendering provider's tax identification number
 - Total amount billed

When You Need Assistance

If you discover a problem with a claim, take quick action to resolve it within the TRICARE system rather than sending the issue to collections. PGBA, LLC (PGBA) is your point of contact for resolving claims issues. You can send a secure inquiry to PGBA via the "Ask Us" feature available at www.myTRICARE.com. ■



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

CONTACTS

**Humana Military
Healthcare Services, Inc.**
www.humana-military.com
1-800-444-5445

Claims
1-800-403-3950
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

National TRICARE Web Site
www.tricare.mil

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Keeping Protected Health Information Private

Maintaining the security of protected health information (PHI) is a critical aspect in providing quality health care to TRICARE beneficiaries. It is essential that you and your staff understand the rules governing the release of PHI so that you can maintain its security and confidentiality, and reduce the risk of unauthorized disclosure.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits the release of PHI without patient authorization for purposes of treatment, payment and health care operations. However, the HIPAA Privacy Rule requires that providers make reasonable effort to disclose only the minimum amount of PHI that is necessary for these purposes.

PHI is any individually identifiable health information relating to a patient's past, present or future physical or mental health and related health care services. PHI may include demographics, documentation of symptoms, examination and test results, diagnoses and treatments.

Written authorization is not needed to send copies of a patient's medical records to a specialist or other health care provider who is treating him or her. Providers are allowed to disclose PHI to primary care managers and other health care providers for treatment purposes. PHI also may be disclosed without the patient's authorization in a medical emergency to provide the necessary treatment.

Release of a minor's PHI is dependent on state or other applicable laws. These laws may allow you to release PHI to a parent or guardian without the patient's consent. When state law does not address this issue, you may use your professional discretion in the release of PHI. There are, however, some exceptions, such as releasing sensitive diagnoses and psychotherapy notes.

For more information about PHI and HIPAA, visit www.tricare.mil/tmaprivacy. ■