

## The Joint Commission’s Official “Do Not Use” Abbreviation List

In 2004, the Joint Commission created an official “do not use” list of medical abbreviations to meet a National Patient Safety Goal. TRICARE urges all providers to review this list regularly to reduce risk and prevent errors in patient care.

According to the Joint Commission, the official “do not use” list applies, at a minimum, to all orders and medication-related documents that are handwritten (including free-text computer entry), as well as preprinted forms.

### Official “Do Not Use” List

Do Not Use	Potential Problem	Use Instead
U (unit)	Mistaken for “0” (zero), the number “4” (four) or “cc”	Write “unit”
IU (International Unit)	Mistaken for IV (intravenous) or the number 10 (ten)	Write “International Unit”
Q.D., QD, q.d., qd (daily) Q.O.D., QOD, q.o.d., qod (every other day)	Mistaken for each other Period after the Q mistaken for “I” and the “O” mistaken for “I”	Write “daily” Write “every other day”
Trailing zero (X.0 mg) <sup>1</sup> Lack of leading zero (.X mg)	Decimal point is missed	Write X mg Write 0.X mg
MS MSO 4 and MgSO 4	Can mean morphine sulfate or magnesium sulfate Confused for one another	Write “morphine sulfate” Write “magnesium sulfate”

*1. Exception: A “trailing zero” may be used only where required to demonstrate the level of precision of the value being reported, such as for laboratory results, imaging studies that report size of lesions or catheter/tube sizes. It may not be used in medication orders or other medication-related documentation.*

The Joint Commission does not apply the “do not use” requirement to preprogrammed health information technology systems (e.g., electronic medical records, computerized prescription order entry systems), but that step remains under consideration. Joint Commission guidelines recommend that organizations eliminate the use of problematic abbreviations, acronyms, symbols and dose designations from software if introducing new systems or upgrading existing systems.

To view the official “do not use” list and additional items under consideration for inclusion, go to [www.jointcommission.org](http://www.jointcommission.org). Select the “Patient Safety” tab at the top of the page, then click on the “Do Not Use” link below “Safety Initiatives.” ■



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## Vaccinate and Help Prevent the Flu

According to the Centers for Disease Control and Prevention (CDC), more than 200,000 people in the United States are hospitalized each year due to flu-related causes. TRICARE covers age-appropriate doses of annual influenza vaccines based on the current CDC influenza season guidelines for all beneficiaries.

TRICARE coverage includes both the flu shot and the nasal-spray vaccine (FluMist®). Healthy patients of any age may receive the flu shot, while the nasal-spray vaccine should only be administered to healthy people ages 2 through 49, except for pregnant women.

TRICARE Prime and TRICARE Prime Remote (TPR) beneficiaries can receive the seasonal flu shot at no cost from TRICARE network providers or participating TRICARE retail network pharmacies. **Note:** TRICARE Prime and TPR beneficiaries who obtain the flu vaccine from non-network providers without referrals and authorizations may incur point-of-service charges.

TRICARE Standard and TRICARE Extra beneficiaries can get the flu vaccine from TRICARE-authorized providers or TRICARE retail network pharmacies. Deductibles and cost-shares are waived.

You or your patients can visit the Express Scripts, Inc. Web site at [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) to locate a participating pharmacy.

### High-Risk Categories

TRICARE encourages you to recommend the flu vaccine to all of your patients, particularly those who fall into one of the following high-risk groups, as identified by the CDC:

- Children ages 6 months to 18 years
- Pregnant women
- People ages 50 and older
- People with certain chronic medical conditions
- People who live in nursing homes or other long-term care facilities

People who live with, care for or otherwise interact with patients in the above categories should also receive annual flu vaccines. These people may include health care workers, caregivers and others.

For more information about TRICARE's flu vaccine coverage, visit [www.tricare.mil/flu](http://www.tricare.mil/flu). ■

## TRICARE Access Standards

TRICARE has established office and appointment access standards for both network providers and military treatment facilities. Emergency services must be available 24 hours a day, seven days a week, while maximum wait times for other appointments are as follows:

- One day for acute/urgent illness
- One day for initial urgent behavioral health care services with a behavioral health care provider
- Seven calendar days for routine visits
- Seven calendar days for initial routine behavioral health care services with a behavioral health care provider
- Four weeks (28 days) for a wellness appointment (preventive)
- Four weeks (28 days) for specialty appointments

### Office Wait Times and Missed Appointments

Office wait times for non-emergent visits should not exceed 30 minutes. Whenever your office becomes aware of a delay, your staff should notify patients in the waiting room and give them the option to wait or reschedule for another day.

If a patient misses a scheduled appointment with insufficient notice (usually less than 24 hours) for the time slot to be offered to someone else, TRICARE regulations do not prohibit civilian providers from establishing practice policies on "no-show" fees. TRICARE does not reimburse a fee for a missed appointment, so your office should ensure it has agreements on file with TRICARE patients. The burden of proof for a missed appointment and the right to charge an out-of-pocket "no-show" fee lies with the provider. ■

# Treating TRICARE Prime and TRICARE Standard Patients

Since TRICARE's introduction nearly 15 years ago, Humana Military Healthcare Services, Inc. (Humana Military) has established a robust provider network across the entire South Region to ensure access for both TRICARE Prime enrollees and TRICARE Standard beneficiaries. TRICARE network providers sign a contract with Humana Military to provide care for TRICARE beneficiaries and agree to file claims.

TRICARE Prime enrollees are treated under a health maintenance organization-style model and are assigned to primary care managers (PCMs). Beneficiaries and their PCMs are responsible for following the referral process when additional health care services are needed.

TRICARE Standard beneficiaries can choose to see any TRICARE-authorized provider, with no referral necessary. TRICARE Standard patients who elect to see network providers for their care are using the TRICARE Extra benefit, which offers lower out-of-pocket costs. The TRICARE Extra option is similar to a preferred provider organization model.

Humana Military features listings of network providers to beneficiaries through the "Find a Provider" feature at [www.humana-military.com](http://www.humana-military.com).

If you are a network provider and would like more information about the TRICARE Standard and TRICARE Extra program, you may view the *TRICARE Provider Handbook* or other materials posted to the provider portal at [www.humana-military.com](http://www.humana-military.com). You may also contact your Humana Military provider relations representative for assistance.

If you are treating TRICARE Standard patients and have questions about issues such as collecting out-of-pocket payments or determining if deductibles have been met, you can use the "Check Eligibility" feature on the secured provider portal. This feature also includes information about patients' other health insurance (OHI), if it is on file. Don't forget, most OHI will be the primary payer for TRICARE patients, so you will need to bill the OHI first. ■

## Claims Services at myTRICARE.com

Registering at [www.TRICARE.com](http://www.TRICARE.com) for myTRICARE Secure gives you convenient access to innovative features and information designed to assist you with managing your TRICARE business online.

As a registered member of myTRICARE Secure, you can:

- Check the status of your TRICARE patients' claims at any time
- Submit a confidential, secure e-mail through AskUs to inquire about a specific claim and receive a prompt response in your personal, secure myTRICARE mailbox
- File TRICARE claims online free with XPressClaim® and get instant claim results
- Check eligibility, other health insurance, catastrophic cap and deductible information for your TRICARE patients
- Print reports based on criteria you select with dataMart
- Sign up for electronic funds transfer (EFT) and electronic remittance advice (ERA) to request ERA, view remittances online and receive your payments more quickly

If you are not able to provide the information required for instant registration, Humana Military Healthcare Services, Inc.'s claims administrator, PGBA, LLC (PGBA), can send you a security code via U.S. mail to complete the registration process. If you have questions, you can call the myTRICARE help desk at 1-866-698-7422.

Once you are a registered member, signing up for EFT and ERA is simple. PGBA recently consolidated the EFT and ERA applications into one form. To sign up, members can log in to "myTRICARE Secure" and select the "Electronic Claims Filing" tab on the Welcome page. Then select "EFT and ERA." Print and complete the registration package and send it to PGBA. Once your materials are received, PGBA will send you a notification letter. You can then complete your online registration and start receiving payments electronically. For more information, visit [www.myTRICARE.com](http://www.myTRICARE.com) or contact a PGBA representative at 1-800-403-3950. ■

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## CONTACTS

**Humana Military  
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www.humana-military.com  
1-800-444-5445

**Claims**  
1-800-403-3950  
www.myTRICARE.com

**Behavioral Health**  
1-800-700-8646

**TRICARE Pharmacy Program**  
1-877-363-1303  
www.express-scripts.com/TRICARE

**TRICARE Web Site**  
www.tricare.mil



## Set Your Provider Communication Preferences

**D**id you know that you can select your preferred communications channels to receive notifications, messages and provider newsletters from Humana Military Healthcare Services, Inc. (Humana Military)?

If Humana Military sends most of your TRICARE information to your location by mail, we would like you to consider switching to electronic communications by e-mail. Distributing information to you electronically will help streamline our communications channels and ensure that you receive important notifications of TRICARE program changes, monthly provider newsletters or other pertinent and timely messages.

The screenshot to the right shows the “Provider Communication Preferences” page on the provider portal at www.humana-military.com. This feature, located under “Update Contact Preferences,” allows you to provide us with a new or updated e-mail address for your location and select how you prefer to receive communications.

By choosing the electronic option and assigning an office e-mail address, TRICARE information can be sent to the right person in a more timely manner. By using e-mail, you and your office staff can forward relevant information, print documents for distribution and store messages in an online folder for future reference. ■

HUMANA MILITARY HEALTHCARE SERVICES  
★★★★★

MyHMHS For Providers

### Provider Communication Preferences

Provider Id: 123456789  
Provider Name: THE CLINIC  
Address: 111 MAIN STREET  
SAN ANTONIO, TX 78204

I do not have an Email address     I do not wish to provide my Email address

Office/Location EMail Address: 123@humana.com  
Update Reason:   
Last Update By: Heary Jones Test  
Last Update: 6/11/2010 14:13:39

Please choose the method you would prefer to receive each type of provider communication for this location.

<b>Notifications/Memos</b>	<b>Newsletters/Bulletins</b>
<input type="radio"/> Email	<input checked="" type="radio"/> Email
<input type="radio"/> US Mail	<input type="radio"/> US Mail
<input checked="" type="radio"/> Web Site	

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