TRICARE®

Provider NEWS

Our Commitment to You

Change Healthcare Cyber Attack

New Registration Process for Live Training Webinar Sessions

Consider Quest Diagnostics for Lab Work

Health-Related Social Needs for Military Service Members and Their Families

TRICARE West Region Telehealth Options

Successfully Submit Rosters to HNFS

Benefit Corner

Autism Care Demonstration: Keeping Compliant Progress Notes

TRICARE Home Delivery and Specialty Medications

Preventive Care Visits

How Your Patients Can Benefit From Online Health Learning

TRICARE's Right of First Refusal

Learn the Basics About Submitting Consult Reports to Referring Military Providers







Our Commitment to You

Health Net Federal Services, LLC (HNFS) remains fully committed to providing exceptional health care during the rest of T2017 TRICARE contract. Our focus for 2024 will continue to be on fulfilling contract requirements for our service members, their families, and the retirees we serve. We are proud to continue partnering with you to serve military families throughout 2024.

Change Healthcare Cyber Attack

In February, Centene Corporation, the parent company of Health Net Federal Services, LLC (HNFS), became aware of the **system outage** affecting Change Healthcare, one of our third-party vendors. HNFS' internal systems were not compromised, but the full scope and extent of the cybersecurity incident on Change Healthcare's network and operations – and any related impact on data – is not yet known.

Providers who use Change Healthcare as a clearinghouse can find claims filing alternatives on our Claims Submission page. For urgent referral or pre-authorization requests that can't be submitted online, please contact us at 1-844-866-WEST (9378).

Note: Due to contractual obligations, HNFS is unable to waive referral, authorization, or claims submission requirements at this time.

New Registration Process for Live Training Webinar Sessions

Health Net Federal Services (HNFS) continues to offer live TRICARE briefings. Choose from *TRICARE 101*, which provides you with the basics of TRICARE, including plan types, claims process, provider credentialing, using self-service web tools and more. We also offer our briefing for *TRICARE West Region Authorizations and Referrals (CareAffiliate* training)*, which gives you an overview of how to use CareAffilate to submit referral and pre-authorization requests to HNFS. Both briefings are presented by our experienced TRICARE representatives and can give you the tools you need to successfully support your TRICARE beneficiaries.

New for 2024! To help us track attendance, we will now require you to pre-register for any briefing you would like to attend.

To register, visit our "Online Education" page at www.tricare-west.com and click the register link for the date you would like attend. You will receive a confirmation email with the meeting link and ID. Join us for one of our upcoming sessions (new dates are added monthly). All trainings begin at 12 p.m. Pacific Time. Find the full schedule at www.tricare-west.com > Provider > Education > TRICARE Webinars/Online Education.

Consider Quest Diagnostics for Lab Work

We know you have options for where to send patients to get lab work completed. We also understand your patients' health and well-being depends on test results to guide treatment plans and improve patient outcomes. Health Net Federal Services (HNFS) has designated Quest Diagnostics as a high-value provider and preferred laboratory in the TRICARE West Region.

To find a Quest Patient Service Center, go to www.tricare-west.com/go/directory and click on the Quest icon. (*Note:* For other network lab facilities, search for "Laboratory – Medical/Clinical" in the directory.)

Reasons TRICARE beneficiaries may benefit from using Quest include:

- Multiple locations throughout the TRICARE West Region.
- · Extensive test menu.
- · Commitment to quality and accuracy.
- Investment in cutting-edge technology and research.

To find more information about Quest's mission and goals, visit www.questdiagnostics.com.

As a reminder, most ancillary services only require a doctor's order. Search HNFS' Ancillary Services Requirements tool for guidelines.

Health-Related Social Needs for Military Service Members and Their Families

Ensuring the health and well-being of our military service members and their families is a top priority. To meet the unique challenges faced by this population, it is essential that the medical care provided to TRICARE beneficiaries meets their needs and the environments in which they live and work.

One key issue that has been identified is food insecurity, specifically the lack of access to nutritional food. Addressing this issue is crucial in promoting the overall health and readiness of our military community.

You, as a medical provider, play a vital role in addressing food insecurity among military families. By selecting food insecurity as a priority area of focus and implementing screening recommendations, you can effectively address this Health-Related Social Need (HRSN) and provide necessary support to those in need.

Addressing HRSNs such as food insecurity within our military community is vital in ensuring the health and well-being of our military service members and their families. By working together and prioritizing these issues, we can create a stronger and more resilient military community.

As a reminder, TRICARE covers the following services as part of good clinical practice. These are integrated into office visits at no additional charge:

- · Body mass index
- Patient and parent education/counseling for:
 - Accident and injury prevention
 - · Cancer surveillance
 - Depression, stress, bereavement, and suicide risk assessment
 - · Dietary assessment and nutrition

- Intimate partner violence and abuse
- · Physical activity and exercise
- Promoting dental health
- · Risk reduction for skin cancer
- Safe sexual practices
- · Tobacco, alcohol, and substance abuse



Additionally, check out low-cost or free resources for military families at www.familysupport.hnfs.com.

TRICARE West Region Telehealth Options

Having access to virtual health care gives beneficiaries options to take control of their health. To find network providers who offer telehealth, TRICARE West Region beneficiaries can use the "Telemedicine" filter in Health Net Federal Services' (HNFS) Network Provider Directory.

Do you offer telemedicine services? Let us know by submitting an updated Network TRICARE Provider Roster.

HNFS also has an expanded list of network telehealth partners offering virtual health care appointments. These include (list is subject to change):



Urgent Care

- Doctor on Demand www.doctorondemand.com/hnfs
- TeamHealth VirtualCare*- www.teamhealthvirtualcare.com/tricare

Mental Health Care (including psychiatry)

- Telemynd www.telemynd.com/hnfs
- Doctor on Demand www.doctorondemand.com/hnfs
- HealthLinkNow* healthlinknow.com/get-started
- PsychConnect* https://www.psychconnect.com/get-started-individuals.html

Other Specialty Services

- Great Speech* (speech therapy) greatspeech.com/tricare
- SimpliFed* (lactation/baby feeding support) www.simplifed.com/tricare
- Aeorflow Breastpumps (lactation support) aeroflowbreastpumps.com
- MyDiabetesTutor* (diabetes management) www.mydiabetestutor.com/contact-us

Visit www.tricare-west.com/go/telehealth for details. Referral requirements for covered telemedicine services are the same as those for in-person visits.

*Services may not be available in all TRICARE West Region states

Successfully Submit Rosters to HNFS

Health Net Federal Services, LLC (HNFS) offers a **Network TRICARE Provider Roster** template for network provider groups to add newly affiliated providers or to submit demographic updates. Please use this template to submit your provider updates.

When you use our template, you will be able to:

- · Submit newly added providers and demographic updates easily.
- Get step-by-step instructions for what to enter in your roster. This will decrease the likelihood that HNFS will need to reject your roster due to missing information.

Check out our Network TRICARE Provider Roster Tutorial for a visual walkthrough on filling out the roster template and tips for avoiding common mistakes.

If you have a delegated credentialing agreement with us, please refer to the "Roster Submission Guidelines" section of our Credentialing Overview page for more information.

Important: When submitting rosters using our template, do not convert the document to Microsoft Word or a PDF. **HNFS** can only accept Excel files.

Questions? Visit our Network TRICARE Provider Roster page for more information.





Prenatal Screening Update Under the Laboratory Developed Tests (LDT) Demonstration

Preconception and prenatal carrier screening tests help identify individuals and families at risk for having children with genetic conditions associated with shortened life expectancy. TRICARE covers preconception and prenatal carrier screening tests under its Laboratory Developed Tests (LDT) Demonstration Project. Effective Feb. 12, 2024, and retroactive to Aug. 17, 2020, preauthorization is not required for noninvasive prenatal screening for trisomy 13, 18, 21, X, and Y. To be covered, testing must comply with the most recent American College of Obstetricians and Gynecologists guidelines.

Health Net Federal Services has updated its **LDT Coverage Criteria Guide** for providers with this information.

Beneficiaries who had a claim deny for services that are now covered can request HNFS reprocess the claim. Beneficiaries who paid out of pocket for services that are now covered can submit a claim.

Ninety-Day Dispensing Available for Blood Glucose Monitoring Supplies

Continuous glucose monitoring systems (CGMS) allow ongoing, real-time monitoring and recording of blood glucose levels at set intervals. This level of monitoring can be helpful for diabetic patients who need to closely track their blood glucose levels. To align with current practices for CGMS supplies, retroactive to Jan. 1, 2024, TRICARE has changed the prescribing policy from 30-day dispensing to 90-day dispensing. Note: Any denials for 30-day supplies under the medical benefit will be revised to reflect 90-day supplies.

New Technology Add-On Payment Application Available

New Technology Add-On Payments (NTAP) allow hospitals to receive more appropriate reimbursement under the Centers for Medicare & Medicaid Services' (CMS) hospital Inpatient Prospective Payment System (IPPS) for new medical services and technology not yet included in Diagnosis-Related Group (DRG) rates. In October 2023, TRICARE added pediatric-specific and TRICARE-designated NTAPs retroactive to July 1, 2022. You can now find the TRICARE West Region (West Region)-specific NTAP application on our Forms page at www.tricare-west.com. Applications must be received by July 8 of the preceding fiscal year (FY) for which the TRICARE-specific New Technology Add-on Payment (NTAP) is to be considered. (For example, for FY 2025, not later than July 8, 2024). Note: For additional timeline information, refer to Title 42, Code of Federal Regulations, Part 412, \$412.87(f)(3).

To check the status of your application or if you have questions about how to complete or submit it, email our NTAP application reviewers at HNFS_TRICARE_NTAPS@hnfs.com.



Autism Care Demonstration: Keeping Compliant Progress Notes

Under TRICARE's Autism Care Demonstration (ACD), applied behavior analysis (ABA) providers must keep progress notes (also called narrative summaries or session notes) for each rendered session. Although ABA providers do not have to submit progress notes with their claims, Health Net Federal Services (HNFS) may ask to see progress notes during an audit. Audits identifying progress notes as insufficient related to or noncompliant with any required content may result in payment recoupment.

Progress notes must:

- · Contain all TRICARE-required elements,
- · Support the respective claim, and
- Relate to the beneficiary's approved treatment plan goals.

Visit our Progress Notes page and review our Medical Documentation Requirements guide for detailed information. Additional billing and exclusion-related content is available on our Billing and Exclusions pages.



TRICARE Home Delivery and Specialty Medications

TRICARE Home Delivery offers a convenient and reliable way for your TRICARE patients to receive routine prescriptions, including TRICARE-defined¹ specialty medications. For eligible medications, patients can get up to a 90-day supply delivered to their door. To enhance the delivery of specialty services, the Department of Defense has expanded TRICARE Home Delivery to include specialty pharmacy services provided by Accredo, an accredited specialty pharmacy that serves patients with complex and chronic health conditions.

Accredo provides support to providers and their patients through a specialized care model that includes condition-specific Therapeutic Resource Centers (TRC). The TRCs provide focused care and resources to help manage patient care needs for the following:

- · Advanced pulmonary conditions
- · Asthma and allergy
- · Blood disorders
- Cystic fibrosis
- Endocrine disorders
- Fertility

- Hepatology
- Immune and complex conditions
- Neurology and multiple sclerosis
- Oncology
- Rare diseases and gene therapy
- Rheumatoid arthritis and inflammatory conditions

In addition, Accredo offers the MyAccredoPatients.com online provider portal, which gives providers real-time updates on prescription status and a place to:

- Check the status of prescriptions and track shipments.
- Review necessary information for processing prescriptions, including prior authorization requests and renewals.
- Upload clinical documentation, including medical necessity forms, if required.
- Live chat with an Accredo agent.
- View prescription updates, including documentation of prescription receipt.

For more information about TRICARE Home Delivery and Accredo, please visit www.accredo.com/dodspecialty.

To get started with Accredo, beneficiaries can call 1-877-882-3324.

Preventive Care Visits

As a provider, you understand the importance of annual preventive care visits. These visits help establish a strong provider-patient relationship, which is essential in achieving the best health care outcomes. Establishing baseline measurements, knowing family history, and understanding unique risk factors and concerns can help you provide appropriate and culturally sensitive guidance about reducing risk for disease. Patients who report positive interactions with their health care providers demonstrate greater self-management and quality of life, as well as a reduction in emergency room visits and inpatient admissions.

Here are some tips for successful preventive care appointments:

- If you are seeing a patient for the first time, ask them to bring their medical records or obtain approval to request their records.
- Remind patients of their upcoming appointment as it approaches to avoid no shows.
- Screen for social needs that may be a barrier for care.
- If you need to refer a patient for a test or to a specialist, manage their expectations and follow-up with your patients.
- Make sure to get the credit you deserve by reporting all services provided and use all appropriate billing codes.

Visit our **Preventive Services** web page for more information.

How Your Patients Can Benefit From Online Health Learning



Technology is the way of the world. People get their news, entertainment, social connection, support, and education from computers and telephones. Some studies show that telephone-based coaching is especially effective for those with chronic diseases or health risks and conditions that can be improved by making lifestyle changes. Telephone-based coaching and classes allow the educator to focus on the patient's needs and to encourage the use of skills, such as goal setting, planning, and having a support team.

Some benefits of online learning, include:

- Comfortable learning environment from home control of your workspace and environment, clothing, food, and temperature.
- Convenience and flexibility the ability to learn according
 to your schedule, to work at your own pace, and to choose
 the type of program and support that works best for you.
 You also get the convenience of not having to drive or go
 out in bad weather. You also save money on gas and food.
- Greater ability to concentrate for some, the lack
 of distraction from other people and not having the
 environmental noise of a traditional classroom allows
 them to focus better.
- Affordability
 — many programs available are free or cost
 much less than face-to-face courses and education. Again,
 miscellaneous costs for gas, parking, books, and food can
 be reduced considerably, and materials are available online
 and can usually be downloaded and printed.

Health Net Federal Services (HNFS) offers free online courses, recorded and live telephone-based classes, and online health resources for TRICARE West Region beneficiaries. Visit the Learning Center and let your patients know about these resources.

Personalized coaching for chronic conditions. Do you have patients that could use help managing a chronic condition? Consider HNFS' chronic care/disease management programs. TRICARE beneficiaries under age 65 and who are not on Medicare are eligible to participate in individualized coaching on anxiety, asthma, coronary artery disease (CAD), chronic obstructive pulmonary disease (COPD), diabetes, depression, and heart failure. Coaching is provided by a disease management specialist, and you are kept informed of your patient's progress. Visit the Chronic Care/Disease Management provider page to nominate a patient today.

Preventive care coaching opportunities. These coaching programs offer one-on-one education and guidance to help your patients achieve goals related to a healthy lifestyle change. HNFS' Healthy Eating program focuses on a variety of nutrition topics and is tailored to an individual's needs. Stress Management coaching helps a participant accomplish personal goals around managing and reducing the effects of stress and provides a variety of techniques that can lead to long-term lifestyle habits. Encourage your patients to visit this page for more information and to register for this free service.

TRICARE's Right of First Refusal

When a TRICARE Prime beneficiary is referred for specialty care, TRICARE requires Health Net Federal Services (HNFS) to first attempt to coordinate care at a military hospital or clinic, even if the beneficiary is enrolled with a civilian primary care manager. This process is known as TRICARE's right of first refusal. Providers should include as much clinical documentation or as many details as possible when submitting referrals to HNFS, as this will help military hospitals and clinics to reasonably determine if they can effectively treat the beneficiary.

Be sure to review the details of approval letters issued by HNFS with your TRICARE patients. Each letter will specify the approved specialty provider. If a beneficiary sees a provider other than who was approved, point-of-service charges may apply. Beneficiaries and providers can access copies of approval letters through our secure Authorization Status tool (log in required).



Learn the Basics About Submitting Consult Reports to Referring Military Providers

If you are treating a TRICARE patient who was referred by a military hospital or clinic, you will need to submit consult documentation – also known as patient encounter reports or clear and legible reports (CLRs) – to the referring provider within required time frames. Consult documentation includes consultation reports, care notes, operative reports, and discharge summaries.

We encourage you and your staff to check out our online module, "Returning Consult Documentation for Your TRICARE Patients." The module, which takes less than 10 minutes to complete, covers:

- Why consult reports are important
- · The patient continuum of care
- Timeliness standards for returning consult documentation
- Where and how to submit consult documentation to military hospitals and clinics.





As a reminder, once you have rendered care, the "clock" for returning consultation or initial assessment documentation begins.

Consultation Type	Consultation Standard
Emergent care	Send within 24 hours
Urgent care	Send within 48 hours
All others (*except mental health)	Send within seven business days
Mental health assessment	Mental health care providers: Submit brief initial assessments within seven <u>business days</u> .

Visit our Consultation Reports page to learn more.



Health Net Federal Services, LLC
1-844-866-WEST (1-844-866-9378)
www.tricare-west.com

Express Scripts, Inc.
Pharmacy inquiries
1-877-363-1303

www.militaryrx.express-scripts.com

PGBA, LLC EDI/EFT Help Desk 1-800-259-0264

Visit us at www.tricare-west.com.





