



TRICARE provider news

Up-to-the-minute information for
TRICARE® providers in the East Region

ISSUE #2 | 2024

A reminder about community settings



Applied Behavior Analysis (ABA) providers should have all community settings authorized prior to rendering services, per the [TRICARE Operations Manual \(TOM\) Ch.18, Sec 4](#) (Billing for services outside of the home, clinic, office, school or telemedicine.) Certain community settings such as sporting events, camps and other setting as determined by the contractor are also excluded. Any location not listed must be reviewed and approved by the contractor.

Digital referrals and authorizations



Humana Military is preparing to move all referrals and authorizations to electronic submissions, eliminating hard copy fax receipts. Instead, you can submit multiple documents for new and existing referrals/authorizations through [provider self-service](#). If you have not yet done so, please adjust your referral/authorization processes now to prepare for this upcoming change.

If you need a [self-service](#) account to begin submitting online you can [create one](#) today! For those providers who are already submitting referrals and authorizations through provider self-service- thank you!

See [referrals and authorizations](#) or [referral/authorization demonstration](#) or [FAQs](#) for more information.

eSHARE makes monthly provider roster submissions easier!



Simplify the way you update provider data! The eSHARE electronic platform saves you time and reduces email. Using the provided template, monthly roster submissions are simpler than ever.

eShare helps providers and practices:

- Control how your data appears in Humana Military's system
- Benefit from secure, simple and fast submissions
- Have access 24/7 access
- Submit your update when it is convenient for you
- Receive instant confirmation of your acceptance
- Receive instant alerts and instructions if additional information is needed

Roster changes are processed in less than 30 days.

Contact your Humana Military TRICARE Community Liaison (TCL) to sign up and to learn more!



TRICARE Select

Did you know TRICARE beneficiaries may be enrolled in [TRICARE Select](#)? TRICARE Select is a self-managed, Preferred Provider Organization (PPO) plan available to eligible TRICARE beneficiaries who are non-active duty, not enrolled in TRICARE Prime.

How it works:

- A provider must be TRICARE-authorized (any individual, institution/organization or supplier that is licensed by a state, accredited by a national organization or meets other standards of the medical community, and is certified to provide benefits under TRICARE)
- Referrals are not required for most primary and specialty appointments
- Prior authorization may be required from Humana Military for some services

TRICARE Select beneficiaries do not have Primary Care Managers (PCM) and may self-refer to any TRICARE-authorized provider. However, certain services (e.g., inpatient admissions for substance abuse disorders and behavioral health, adjunctive dental care and home health services) require prior authorization from Humana Military.

TRICARE Select is a great choice for your patients who:

- live in an area where they can't use TRICARE Prime
- have Other Health Insurance (OHI)
- are seeing a provider who isn't in the TRICARE network and don't want to switch

Eligible beneficiaries pay an annual outpatient deductible and cost-shares (or percentage) for covered services, and Group A retirees must pay enrollment fees.

Find out more about [TRICARE Select](#) and encourage beneficiaries to enroll today!

Drug testing fraud

Humana Military is committed to the detection and prevention of healthcare fraud, including the improper billing of drug testing.



- TRICARE may cover medically necessary and appropriate drug testing.
- These services may be outsourced by ordering physicians or other authorized prescribers.
- It is illegal to entice physicians with money or gifts to refer patients for testing.
- Providers, including laboratories, that are seeking payment for drug testing services must ensure:
 - The testing services are furnished at the appropriate level of care.
 - The medical necessity meets professionally recognized standards of healthcare.
 - The services are supported by adequate medical documentation.

TRICARE excludes:

- Drug screening using blood and urine simultaneously
- Drug testing for legal purposes, employment and school compliance
- Routine drug testing
- Drug testing that will not impact the medical management of the patient

For more information regarding drug testing, please refer to [TRICARE Policy Manual 6010.60-M, April 1, 2015, Ch. 6, Sec. 4.1](#).

To report suspected fraud and/or abuse, report [online](#) or by phone at (800) 333-1620.

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[HumanaMilitary.com](https://www.humanamilitary.com)



(Photo by Maj. William Carraway)

Social Determinants of Health (SDOH)



Did you know that only 2% of military patients and their families have their Social Determinants of Health (SDOH) captured in claims? While the clinical aspects of patient health remain the highest priority for diagnosis and treatment, addressing health-related social needs helps form a more complete picture. Help us to better understand the needs of your TRICARE beneficiaries by documenting patient screening results in the Electronic Health Records (EHR)/Electronic Medical Records (EMR).

We use this information to improve beneficiaries lives by:

- better understanding the needs of beneficiaries
- sharing military and community resources
- evaluating our efforts to improve their care and eliminate barriers to health

To find out more about the SDOH of TRICARE beneficiaries, see:

[Humana Military’s SDOH guide](#): Includes additional details, statistics and the importance of using ICD-10-CM codes.

[Humana Military’s Community Resource Directory \(CRD\)](#): A multi-state search tool that provides access to comprehensive information on more than 500,000 national, state and local community-based facilities.

TRICARE does not accept CPT code G2211

On January 1, 2024, Medicare implemented CPT code G2211, which is an add-on code representing the additional time and complexity involved in providing office or other outpatient Evaluation and Management (E/M) services. It is used as an add-on to E/M CPT codes 99202

through 99215.

However, TRICARE does not accept the code, and it is on our Government No Pay list as of January 1, 2021. Using code G2211 will cause claims to deny and create balance-billing concerns.

