

TRICARE OVERSEAS PROGRAM POLICY

(Excerpt of)

TRICARE/CHAMPUS POLICY MANUAL 6010.47-M JUNE 25, 1999

TRICARE OVERSEAS PROGRAM (TOP) C-5, October 15, 1999

CHAPTER 12 SECTION 12.2 POINT OF CONTACT (POC) PROGRAM

Issue Date: October 15, 1999

Authority: 32 CFR 199.1(b)(1)

I. GENERAL

A. The contractor shall operate a specialized point of contact FAX overseas claims receipt and processing system program for designated Uniformed Services bases and locations, remotely located Defense Attaché Offices (DAOs) and Security Assistant Organizations (SAOs). These designated Points Of Contact (POCs) are established by the Uniformed Services, the Defense Intelligence Agency (DIA) and the Defense Security Assistance Agency (DSAA), with concurrence/approval by TRICARE Management Activity (TMA).

B. A written request from the Commanding Officer of a foreign military base or location, or DAOs, and SAOs will be submitted to the TRICARE Management Activity, Chief, Managed Care Support Office (MCSO), Aurora, Colorado 80011-9043. This request will include the rationale and justification for the request, will specify the name of the individual responsible as the POC, including any alternate and FAX numbers.

C. Upon receipt of the written request, the Chief, MCSO will review the request for approval. After the "REQUEST" has been approved for a designated POC, the Chief, MCSO will notify the contractor of the official POC, and will also forward a copy of the contractor's notification to the POCs Command. This same process should be followed when subsequent changes are made to a designated POC.

D. Current POC listings shall be maintained by the contractor responsible for foreign claims, in coordination with TMA.

E. The contractor shall operate a dedicated FAX for the purpose of receiving and expediting TRICARE Overseas claims and correspondence from all designated POCs. The contractor shall in turn use the FAX to request information from all POCs, when additional information is needed to process the TRICARE Overseas claim or correspondence. When information has been requested from the POC, the contractor shall pend the claim for ten (10) calendar days. If the requested information is not received from the POC by the close of business (COB) on the tenth (10th) calendar day, the claim shall be denied.

F. In those locations where a single point of dispersal has been established for all payments sent to that country, the contractor shall batch payments and EOBs by foreign country and mail the payments and EOBs in pouches using overnight mail delivery at least once every five (5) working days. The payments and EOBs in the pouches shall be separated by individual beneficiary/provider and contained in a sealed window envelope for POC distribution. If overnight mail service is not available in certain foreign locations, the contractor shall use the most expeditious service available.

G. The contractor shall have the capability to perform currency conversions and maintain historical exchange rates in order to make payments in local currency to permit payment based on the exchange rate in effect on the last date of service as required by Policy Manual, Chapter 12, Section 12.1.

II. RESPONSIBILITIES OF ALL POCs

- A. POCs will receive TRICARE Overseas claims for services provided in foreign countries from beneficiaries and providers of care, and TRICARE Europe active duty members and ensure that the claims are correctly completed.
- B. POCs will FAX claims in the proper format, containing the required information, to the contractor for processing. Guidelines for properly completing a claim form are provided in Policy Manual, Chapter 12, Section 12.3.
- C. POCs are responsible for providing the contractor with any additional information requested, via the FAX system, within ten (10) calendar days of receipt of the request. Claims will be denied if the information is not received within the specified time frame.
- D. POCs shall receive weekly payment drafts/EOBs from the claims processor via priority mail, pouch mail, or the most practical and expeditious mutually agreed upon method available.
- E. POCs shall establish a “check list” control system to track the claim(s) submitted for processing and to track payment/dispositions sent by the contractor to the POC. The POC is responsible for the distribution of payments/dispositions to beneficiaries and/or providers and/or active duty members.
- F. POCs are responsible for educating the local beneficiary and provider, and TRICARE Europe active duty members on the correct claims filing procedures.
- G. Only officially designated POC faxed claims shall be accepted by the contractor.
- H. Overseas FAX numbers shall be commercial and shall be accessible to receive data twenty-four (24) hours a day.
- I. POCs are responsible for making sure the claim form is completed and signed by the patient, or by the parent in the case of a minor. *NOTE: If the TRICARE Europe active duty member’s signature is not present on the claim form, the military command must submit a letter of explanation with the unsigned claim form prior to payment.*
- J. POCs are responsible for attaching copies of all itemized bills (not receipts) associated with the claim and maintaining hard copy backup files of claims faxed to the claims processor.
- K. POCs are responsible for ensuring that only claims for health care services provided in foreign countries are forwarded for processing. The contractor shall process only claims for services provided in foreign countries.
- L. When a claim is being returned to the contractor by a POC because it is thought to have been processed incorrectly, POCs shall refer to the claim number of the claim in question and provide a copy of the EOB with the inquiry. A new claim should not be submitted.
- M. When a family member is not enrolled in DEERS, a copy of the front and back of the family member ID card shall be sent in with the claim (unless the family member is a newborn, in which case the claims will be processed normally without an enrollment or ID card requirement).
- N. POCs shall not submit claims for care not yet received.

SAMPLE LETTER

LETTER TO TMA FOR OFFICIAL TRICARE POINT OF CONTACT
(Fax the POC Request letter to TMA at 303-676-3935)

(Embassy Letterhead)

Date

TO: TRICARE Management Activity
ATTN: Chief, Managed Care Support Operations Branch
16401 East Centretch Parkway
Aurora, CO 80011-9043

SUBJECT: TRICARE Overseas POC (Update)

1. Request approval of the following individuals as official TRICARE POCs for U.S. Embassy (City, Country):

Primary: Name, SSN, Branch of Service (if applicable)
Commercial phone #
Fax #
Email address
Address:

Alternate: Name, SSN, Branch of Service (if applicable)
Commercial phone #
Fax #
Email address
Address:

2. (POC name) is the (job title) for the U.S. Embassy in (country) until (timeframe).

3. (POC name) is the TRICARE overseas point of contact for medical claims for the U.S. (DAO or MilGrp Office) in (country).

4. Thank you for your assistance in this matter. If there are any problems with this request, please contact (POC) at (phone #).

(signature block for OIC)

TRICARE OVERSEAS POINT OF CONTACT PROGRAM

Office of the Assistant Secretary of Defense (HA)
TRICARE Management Activity
May 1999

INTRODUCTION

The Point of Contact (POC) Program for TRICARE Overseas Program (TOP) healthcare claims has been in operation since 1991. The POC Program is designed to provide beneficiaries and host nation providers assistance with filing TRICARE claims for care received in foreign countries. This liaison service is designed to ensure timely overseas claim filing and payment. With the expansion of the POC program to include TRICARE Family Member Dental Plan (TFMDP) claims, beginning May 1999, the department continues to provide another important tool to ensure beneficiary access to quality host nation healthcare. Oversight and support of a designated POC by the various Uniformed Services Branches is critical to assure the continued success of the POC program.

BACKGROUND

Military family members in foreign countries have had trouble getting medical and dental care from host nation providers for the following reasons:

- Delays in beneficiary/provider filing of TRICARE Overseas Program (TOP) claims;
- Delays in host nation mail service
- Delays in host nation provider payment by the beneficiary, upon receipt of TOP payment

To reduce these delays, TRICARE Management Activity (TMA) established dedicated foreign claims processing departments to handle TOP and TFMDP claims. Each specialized foreign claims processing department has a dedicated staff to process only TOP or TFMDP claims, dedicated data fax capabilities, and a dedicated post office box for the receipt of TOP or TFMDP claims and correspondence. The TFMDP dedicated foreign claims processing department also has electronic mail capability for receiving TFMDP correspondence.

Although the volume of TOP and TFMDP claims is small, the claims receive priority processing. The special handling provided by the dedicated TOP and TFMDP foreign claims processing departments, combined with the valuable liaison service provided by local designated POCs results in the retention of quality host nation providers to treat Department's beneficiary population while on overseas assignment.

WHO MAY QUALIFY TO BE A POINT OF CONTACT?

A designated POC must be either:

- An active duty military member; or
- A civilian employee working for, and under the oversight of, the military/U.S. Government

POC DESIGNATION

Requests for POC designation must be in writing, signed by the POC's Commanding Officer, and submitted to TMA, Chief, Managed Care Support Office, 16401 East Centretech Parkway, Aurora, CO 8001-9043 or fax to TMA at 303-676-3935. The request must include the POC's complete mailing addresses, telephone, and fax numbers, and email address when available.

Upon approval, TMA will notify the requestor and the contractors via fax and mail.

DUTIES OF THE POINTS OF CONTACT

Designated POCs must:

- Assist the Uniformed Services, TRICARE beneficiaries, active duty members, where appropriate, and host nation providers with completion of and filing TOP and TFMDP claims with the appropriate claims processor.
- Develop procedures for the coordination, control and tracking of either faxed or mailed claims from within their areas of responsibility to the appropriate claims processing contractors. This process must include the receipt of and distribution of foreign drafts/U.S. dollar checks/explanation of benefits (EOB) received from the contractors as payment for services rendered by host nation providers.
- Establish and maintain a file for the original claim and all related correspondence.
- Provide their commercial, not DSN, telephone, and fax numbers on the fax cover sheet with each fax claim submission.
- Ensure the beneficiary/provider has provided complete and accurate information prior to forwarding the claim(s) to the appropriate claims processor (i.e., authorization, Nonavailability Statement (NAS), provider address, payee designation, claim form sign by the beneficiary, etc).
- NOTE: For TFMDP dental claims, a properly completed "Non-Availability and Referral Form" must accompany the dental claim form, except for non-orthodontic services performed in remote locations. The form must be issued by the enrolled family member's servicing Overseas Dental Treatment Facility (ODTF), or the appropriate overseas lead agent, or their designee, depending on where the family member lives and the dental services that are performed. The POC may not complete this form. The TFMDP contractor has published a reference guide to assist ODTFs, overseas lead agents and POCs in the management of TFMDP dental claims. This "Authorization and Referral Manual" documents the proper procedures for the issuance of TFMDP authorizations, referrals and claims payment processes. This manual takes precedence over any potential conflicting instructions in this publication.
- Attach copies of all related itemized bills (not receipts) with the claim.
- Ensure claims for adjunctive dental care are sent to the appropriate TRICARE contractor responsible for processing medical claims and not the TFMDP contractor.
- Provide the specialized foreign claims processors any additional information that may be required by the contractor(s) to finalize the processing of a claim. All designated POCs may use fax inquiries to request information on the status of a specific claim. TFMDP claims inquiries may also be submitted via electronic mail and must include a complete return e-mail address and commercial telephone and fax numbers.
- Use priority pouch mail for receipt of foreign drafts/U.S. dollar checks/EOBs from the TRICARE contractors.
- Distribute foreign drafts/U.S. dollar checks/EOBs to appropriate sponsors/beneficiaries or host nation providers immediately upon receipt.
- Report unresolved claims problems or issues between the TRICARE contractor and the POC concerning policies or program requirements for:

- TOP issues to the TSO at: Commander DDEAMC, LASE – B38801 TLAC, Fort Gordon, GA 30905-5650.
- TFMDP TOP issues to the TSO at: Commander DDEAMC, LASE – B38801 TLAC, Fort Gordon, GA 30905-5650.
- Educate local beneficiaries and host nation providers on the correct procedures for filing their claims.
- Stress the importance of filing claims within 30 days following receipt of TOP or TFMDP since timely filing ensures prompt payment of care received.

WHAT THE TRICARE CONTRACTORS DO

The TOP and TFMDP dedicated claims processing departments must:

- Assist the TOP and TFMDP POCs, Uniformed Services, TRICARE beneficiaries, AD personnel where appropriate, and host nation providers with information on the completion of and filing of claims with the appropriate claims processor.
- Develop internal procedures for the coordination, control and tracking of faxed or mailed claims from receipt to final processing. This includes, but is not limited to, storage/maintenance of the claim and all related correspondence, microfilming/imaging of claims upon receipt, the issuance of foreign drafts/U.S. dollar checks/EOBs, and development procedures for missing information needed to process the claim to completion.
- Provide a dedicated P.O. box for the receipt of TOP and TFMDP claims.
- Provide a dedicated fax number for the receipt of the POC claims.
- Accept only faxed claims/inquiries/information faxed by an officially designated POC or an alternate POC. Electronic mail may also be used for TFMDP inquiries/information.
- Verify beneficiary eligibility for TOP or TFMDP benefits.
- For TOP claims, a copy of the front and back of the dependent ID card may be sent in with the TOP claim and may be used as eligibility verification by the contractor when the family member is not enrolled in DEERS.
- For TFMDP claims, the family member must first be enrolled in DEERS and the TFMDP, and the sponsor must pay the appropriate premium, before services can be rendered and his/her claims processed.
- The sponsor should verify on his/her Leave and Earnings Statement (LES) that the correct payroll deduction has been taken. The sponsor is also advised to contact the TFMDP contractor before receiving services to ensure that the proper enrollment information has been received and to confirm the actual coverage date.
- Review claims to ensure the beneficiary/provider has provided complete and accurate information prior to submitting claims for processing payment.
- Process TOP claims using guidelines in TRICARE Policy Manual, Chapter 12, and TRICARE Operations Manual, Part II, Chapter 22.

- Process TFMDP claims per contract requirements and the guidelines outlined in the "Authorization and Referral Manual".
- Be able to translate claims submitted in a foreign language.
- Pay claims using the exchange rate in effect on the last date of service listed on the claim.
- Make payment as follows:

For TOP Claims:

- Issue foreign currency drafts for TOP claims. Payment may not be changed to an U.S. dollar check after the TRICARE contractor has issued a foreign draft.

For TFMDP Claims:

- Issue foreign currency drafts for TFMDP claims submitted by providers via POCs.
- Issue U.S. dollar checks for TFMDP claims submitted by a sponsor/family member, via POCs. Payment may not be changed to local currency after the U.S. dollar check has been issued.

For TOP and TFMDP Claims:

- Issue foreign currency drafts for both TOP and TFMDP claims when the sponsor/family member requests payment in local foreign currency only at the time the claim is submitted.
- *Note:* Foreign drafts are good indefinitely and may be cashed at any time. U.S. dollar checks are good for a limited period of time and must be reissued by the TRICARE contractors upon expiration of the check before the check can be cashed.
- Use priority pouch mail for the mailing of foreign drafts/U.S. dollar checks/EOBs to appropriate sponsors/beneficiaries and/or host nation providers for claims submitted via POCs. The priority pouch mail must be sent using the fastest means available to the POCs location.
- Report unresolved claims problems or issues between the POC and the TRICARE contractor concerning policies or program requirements for:
- TOP issues to the TSO at: Commander DDEAMC, LASE – B38801 TLAC, Fort Gordon, GA 30905-5650.
- TFMDP issues to the TSO at: Commander DDEAMC, LASE – B38801 TLAC, Fort Gordon, GA 30905-5650.

HELPFUL HINTS

- Make sure the TOP and TFMDP claim form is completed and signed by the patient or by the parent (or responsible party) in case of a minor.
- Do not send TOP or TFMDP claims provided to two different beneficiaries by the same provider on the same claim form.
- Remember the TOP claims department processes only healthcare and adjunctive dental claims for services provided in foreign countries and TOP Prime healthcare provided in the U.S.
- Remember the TFMDP claims department processes all TFMDP claims for enrolled family members, regardless of where the service was performed.
- Remember to remind beneficiaries and providers that the TOP and TFMDP programs do not share the cost of all types of healthcare or dental care. Therefore, TRICARE payment for every service received can't be guaranteed.
- Remember to use the beneficiary's claim number listed on the EOB when making specific claims inquiries to the TOP and TFMDP contractors.

Note: Do not send a new claim when the first claim has been denied or was processed incorrectly. Contact the appropriate TRICARE contractor for assistance.

SUMMARY

The TRICARE contractors' foreign healthcare and dental claims processing department has produced excellent results for the installations using the system. However, it can only be effective if the Services designate POCs and the designated POCs understand the TOP and TFMDP programs and the claims processing requirements. The POC must also communicate with the TRICARE contractors' foreign healthcare and dental claims departments on a regular basis.

Although the POC program is not for all locations and situations, the use of the POC concept does improve the situation for accessing and ensuring prompt payment to host nation providers in countries that take full advantage of the system.

The attached flowchart summarizes the recommended foreign claims submission process.