

TRICARE provider news

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

ISSUE #4 | 2022

Military Health Systems (MHS) GENESIS



MHS GENESIS is the new Electronic Health Record (EHR) for the MHS. MHS GENESIS will improve communication within the MHS, the VA and civilian healthcare systems providing a single health record for service members, Veterans and their families. The initial rollout began in late January 2022, and implementation continues in the East Region through 2022 and 2023.

A modernized EHR will improve quality, safety and continuity of care. MHS GENESIS will offer:

- Ability to receive electronic controlled substance prescriptions
- Faster and better management of chronic, complex and time-sensitive conditions
- Automated, real-time clinical decision support for providers
- Increased engagement capabilities that allow beneficiaries to directly communicate with their providers
- Full compliance with the Department of Defense's (DoD) cybersecurity requirements

A new look for provider self-service



As we continue to update and upgrade provider self-service, we wanted to point out you may notice some new (and old) pages and branding along the way!

Appeals and reconsiderations

Filing an appeal or submitting a claim for reconsideration? Avoid errors and processing delays by ensuring you are submitting the proper documentation to the correct location via electronic form, email, fax or mail. Learn more:

- [Appeals, allowable charge appeal and claims reconsideration](#)
- [Appeals FAQs](#)
- [Reconsiderations FAQs](#)

MTF Provider Portal

The MTF Provider Portal is a secure, web-based tool that allows the safe transfer of beneficiary health information between military providers and Express Scripts. This unique tool allows you to:

- Easily register and login with or without a Common Access Card (CAC)
- Submit prescriptions for home delivery electronically
- Submit prescriptions for the Deployed Prescription Program up to 180 day supply
- Quickly respond to prescription requests and renewals
- Add surrogates to act on a provider’s behalf and trusted agents to assist in the prescription review and preparation process
- Access confidential Prescription Monitoring Program (PMP) reports with CAC login
- NEW: Single Sign On to [MyAccredoPatients.com](#) with your CAC

Getting started is easy! Simply register online at [express-scripts.com/mpp](#).

For more information, contact [ExpressScripts-MTFPharmacyTeam@express-scripts.com](#).

Things you need to know

Ensuring a more successful claim submission



When submitting your claims, please make sure your platform includes any preceding zeroes in a sponsor/beneficiary ID number, using:

- CMS1500: Insured number – Box 1a
- UB04: Insured Unique Id – Field 60

If we receive a claim without that number, the claim will be denied for DEERS because the system will not be able to identify the beneficiary.

Provider certification is moving to electronic!



As we continue to improve and enhance our provider tools and processes, we are happy to announce that our certification is moving to electronic submission! As part of an ongoing conversion to include all providers, most professional practitioners and some facilities are now able to take advantage of this update.

We encourage you to check back frequently to see when your provider type has been included!

New ePrior authorization tool available for specific procedures



Available now for facet neurotomy and breast MRIs only, this new tool allows providers to complete a medical necessity questionnaire immediately after an electronic referral request in self-service.

If the questionnaire determines the beneficiary meets medical necessity (based on Milliman Care Guidelines (MCG) and TRICARE policy) an auto-approval will be provided. This auto-approval option via questionnaire is only provided once during the electronic referral entry process, it cannot be saved or be completed at a later time.

Note: If medical necessity is not met, the authorization request will pend for review.

Cosmetic surgery and TRICARE

- Benefits may be allowed for cosmetic, reconstructive and/or plastic surgery under certain circumstances.
- The following are examples when TRICARE benefits apply. This is not an exclusive list:
 - Correction of a congenital anomaly
 - Restoration of a body form following an accidental injury
 - Revision of disfiguring scars resulting from neoplastic surgery
 - Post-mastectomy breast reconstruction when following a medically necessary mastectomy
- Cosmetic, reconstructive and/or plastic surgery that is performed primarily for the psychological or psychiatric reasons or due to the aging process is excluded from TRICARE coverage.
- When a service is determined to be a cosmetic, reconstructive and/or plastic surgery procedure that does not qualify for benefits, then all related services and supplies are excluded.
- Some cosmetic, reconstructive and plastic surgery procedures require a preauthorization.
- For non-covered cosmetic procedures, TRICARE network providers must complete a TRICARE Non-covered Services Waiver. Non-network providers can use a waiver that is equivalent to the TRICARE waiver to ensure the beneficiary is aware that the services are non-covered. The beneficiary must sign the waiver prior to receiving the services.
- If there is not a TRICARE waiver on file for the patient and the specified date of service and care, then the network provider has no recourse and must uphold the hold-harmless provision. A network provider may not bill a TRICARE beneficiary for excluded or excludable services.

Contact [Humana Military](#) for more information on cosmetic procedures or call (800) 444-5445.

TRICARE policy:

- [TRICARE Manuals: Display Chap 4 Sect 2.1 \(Change 99, May 24, 2022\) – Cosmetic, Reconstructive, and Plastic Surgery – General Guidelines](#)
- [TRICARE Manuals: Display Chap 1 Sect 1.2 \(Change 99, May 24, 2022\) – Exclusions](#)



Our on-demand webinar library is available 24/7!

Our provider webinars offer information and news on many topics including TRICARE education, provider self-service guidance and many other helpful tips.

Check out the newest webinars:

- [Recoupment summary](#) (three minutes): Provides details on overpaid info, recoupment status and receipt details and more.
- [Provider Roster Upload instructional videos](#) (four minutes): Learn how to successfully upload provider rosters, how to recognize upload failures, using templates and more.

Humana
Military



HumanaMilitary.com