



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
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TRICARE
MANAGEMENT ACTIVITY

PRD

CHANGE 163
6010.49-M
SEPTEMBER 19, 2000

PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
OPERATIONS MANUAL

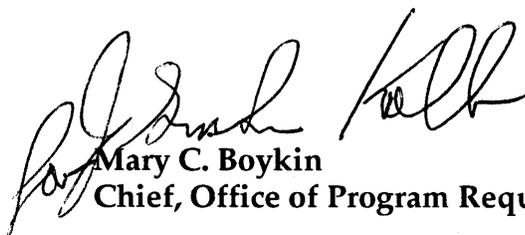
The TRICARE Management Activity has authorized the following change(s) to 6010.49-M, reissued July 1992.

PAGE CHANGE(S): See page 2.

REMOVE AND INSERT PAGE(S): See page 2.

SUMMARY OF CHANGE(S): This change revises TRICARE Senior Prime (TSP) requirements for voluntary disenrollments; lowers the TSP co-pay for renal dialysis; TSP ancillary tests ordered by a military primary care manager or ancillary services rendered as part of an authorized speciality evaluation no longer require a referral or preauthorization; clarification added to timeliness standards for TSP non-network claims; clarification added for the correction of all erroneously processed TSP claims; and requirements for drug abuse notifications were revised in Chapter 7, Program Integrity. See the summary of changes for a complete list of changes.

EFFECTIVE DATE AND IMPLEMENTATION: Voluntary disenrollment procedures are effective July 11, 2000. All remaining changes are effective upon implementation. Implementation is upon the direction of the contracting officer.


Mary C. Boykin
Chief, Office of Program Requirements

ATTACHMENT(S): 73 PAGES
DISTRIBUTION: 6010.49-M

WHEN PRESCRIBED ACTION HAS BEEN TAKEN, FILE THIS TRANSMITTAL WITH BASIC DOCUMENT

**CHANGE 163
6010.49-M
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REMOVE PAGE(S)

INSERT PAGE(S)

PART TWO

CHAPTER 7

2.7.B-3

2.7.B-3

CHAPTER 20

Table of Contents, iii through iv

Table of Contents, iii through iv

2.20.N-9 through 26

2.20.N-9 through 26

2.20.N-47 through 98

2.20.N-47 through 98

SUMMARY OF CHANGES

CHAPTER 7 - Program Integrity

1. Page 2.7.B-3. Added the requirement that the beneficiary shall receive a detailed letter stating the utilization of NMOP shall be subject to limitations.

CHAPTER 20 - Addendum N

2. Page 2.20.N-9. Corrected a telephone number.
3. Page 2.20.N-11. Voluntary disenrollments shall now be processed in accordance with the Balanced Budget Refinement Act of 1999 and OPL 113.
4. Page 2.20.N-16. Added the requirement that ancillary tests ordered by a military primary care manager or for ancillary services rendered as part of an authorized speciality evaluation or treatment do not require a referral or preauthorization.
5. Page 2.20.N-17. Added clarification to what guidelines the contractor is to follow to process non-network claims. Clarified that 100% of non-clean, non-network claims shall be paid or denied within 60 days.
6. Page 2.20.N-18. Clarified that TSP claims are excluded from TMA quarterly audits.
7. Page 2.20.N-19. Corrected office titles. Added the requirement that the contractor shall correct all erroneously processed claims in accordance with OPM Part Two Chapter 5.
8. Page 2.20.N-20. Corrected a reference.
9. Page 2.20.N-21. Corrected a reference.
10. Page 2.20.N-24. Deleted the reference to the TSP Project Status Sheet.
11. Page 2.20.N-26. Lowered the co-pay for renal dialysis.
12. Page 2.20.N-48. Revised the voluntary disenrollment language to reflect the requirements of the Balanced Budget Refinement Act of 1999 and OPL 113.

