



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE  
HEALTH AFFAIRS

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TRICARE  
MANAGEMENT ACTIVITY

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The TRICARE Management Activity has authorized the following addition(s)/revision(s).

**CHANGE TITLE:** SPONSOR ELIGIBILITY VERIFICATION FOR NEWBORN CLAIMS

**CONREQ:** 15383

**PAGE CHANGE(S):** See page 2.

**SUMMARY OF CHANGE(S):** This change revises policy to clarify eligibility requirements for newborn claims processing.

**EFFECTIVE AND IMPLEMENTATION DATE:** Upon direction of the Contracting Officer.



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Director, Operations Division

**ATTACHMENT(S):** 3 PAGES  
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**CHANGE 133**  
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**CHAPTER 8**

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TRICARE benefits: the DD Form 2642, the CMS 1500 (08/05), and the CMS 1450 UB-04. The American Dental Association (ADA) claim forms may be used in the processing and payment of adjunctive dental claims.

### **3.2.1. DD Form 2642, "Patient's Request For Medical Payment" (Figure 8-A-1)**

This form is for beneficiary use only and is for submitting a claim requesting payment for services or supplies provided by civilian sources of medical care. Those include physicians, medical suppliers, medical equipment suppliers, ambulance companies, laboratories, Extended Care Health Option (ECHO) providers, or other authorized providers. If a DD Form 2642 is identified as being submitted by a provider for payment of services, the form shall be returned to the provider with an explanation that the DD Form 2642 is for beneficiary use only and that the services must be resubmitted using either the CMS 1500 (08/05) or the CMS 1450 UB-04, whichever is appropriate. The new form may be used for services provided in a foreign country but only when submitted by the beneficiary. Contact the TMA Administrative Office to order the DD Form 2642.

## **4.0. CLAIMS RECEIPT AND CONTROL**

All claims shall be controlled and retrievable. The face of each hardcopy TRICARE claim shall be stamped with an individual Internal Control Number (ICN), which will be entered into the automated system within five workdays of actual receipt. For both hardcopy and *Electronic Media Claim (EMC)*, the ICN shall contain the Julian date indicating the actual date of receipt. The Julian date of receipt shall remain the same even if additional ICNs are required to process the claim. If a claim is returned, the date of the receipt of the resubmission shall be entered as the new date of receipt. All claims not processed to completion and supporting documentation shall be retrievable by beneficiary name, sponsor's *Social Security Number (SSN)*, *Defense Enrollment Eligibility Reporting System (DEERS) family ID*, or ICN within 15 calendar days following receipt.

## **5.0. NEWBORN CLAIMS**

**5.1.** *Claims for newborns can be processed without eligibility on DEERS as long as:*

- The newborn date of birth is within 365 days of the contractor's eligibility query; and*
- The sponsor is/was eligible for TRICARE for the dates of care on the newborn claim.*

**5.2.** *Newborns are deemed enrolled in Prime as of the day of birth if the uniform service member sponsor is showing as eligible in DEERS (enrolled or non-enrolled), or the non-active duty sponsor or another family member is enrolled in Prime. This deemed enrollment period will continue for 60 calendar days from the newborn's date of birth or until the newborn is formally enrolled in Prime, whichever is earlier. If the newborn is not formally enrolled during the 60-day period, the newborn will revert to a non-enrolled status on the 61st day. Claims for care during the deemed enrollment period will be processed with Prime copayments, according to sponsor's status in DEERS. No referrals are required and Point of Service (POS) provisions do not apply during the deemed enrollment period. See the TRICARE Policy Manual (TPM), Chapter 10, Section 3.1. For additional information on newborns under the TRICARE Retired Reserve (TRR) and TRICARE Reserve Select (TRS) programs, see Chapter 24, Sections 2 and 1 respectively.*

