

TRICARE OPERATIONS MANUAL 6010.51-M, AUGUST 1, 2002

FOREWORD

CHAPTER 1 - ADMINISTRATION

CHAPTER 2 - RECORDS MANAGEMENT

CHAPTER 3 - FINANCIAL ADMINISTRATION

CHAPTER 4 - PROVIDER CERTIFICATION AND CREDENTIALING

CHAPTER 5 - PROVIDER NETWORKS

CHAPTER 6 - ENROLLMENT

CHAPTER 7 - UTILIZATION AND QUALITY MANAGEMENT

CHAPTER 8 - CLAIMS PROCESSING PROCEDURES

CHAPTER 9 - TRICARE DUPLICATE CLAIMS SYSTEM - HCSR VERSION

CHAPTER 10 - TRICARE DUPLICATE CLAIMS SYSTEM - TED VERSION

CHAPTER 11 - CLAIMS ADJUSTMENTS AND RECOUPMENTS

CHAPTER 12 - BENEFICIARY AND PROVIDER SERVICES

CHAPTER 13 - APPEALS AND HEARINGS

CHAPTER 14 - PROGRAM INTEGRITY

CHAPTER 15 - AUDITS, INSPECTIONS, AND REPORTS

CHAPTER 16 - REGIONAL DIRECTOR/MTF AND CONTRACTOR INTERFACES

CHAPTER 17 - TRICARE PRIME REMOTE PROGRAM

CHAPTER 18 - CIVILIAN CARE REFERRED BY MHS FACILITIES

CHAPTER 19 - CIVILIAN HEALTH CARE OF UNIFORMED SERVICE MEMBERS

CHAPTER 20 - DEMONSTRATIONS

CHAPTER 21 - HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996
(HIPAA)

CHAPTER 22 - TRICARE DUAL ELIGIBLE FISCAL INTERMEDIARY CONTRACT

CHAPTER 23 - TRICARE ALASKA

CHAPTER 24 - RESERVE COMPONENT HEALTH COVERAGE PLANS

CHAPTER 25 - TRICARE YOUNG ADULT (TYA)

CHAPTER 26 - CONTINUED HEALTH CARE BENEFIT PROGRAM (CHCBP)

APPENDICES

