

Chapter 16

Addendum B

Specified Authorization Staff (SAS) Review: Protocols And Procedures

1.0 INTERCONNECTIVITY BETWEEN THE CONTRACTOR AND SAS

1.1 ADP Protocols

1.1.1 The contractor shall provide access for entry and edit of referrals into existing systems supporting this contract. The contractor shall propose one of the following access options:

- Government staff physically located in Great Lakes, IL, accessing the contractor's system, or
- Contractor staff physically located in Great Lakes, IL, accessing the contractor's system, and Government personnel performing a backup role in the event contractor personnel are unavailable due to annual or sick leave or another reason.

1.1.2 For all referrals meeting the criteria for SAS review, the contractor shall provide a status code indicating SAS review is required.

1.1.3 The contractor shall create a standard management listing for all pending referrals requiring SAS review. The listing will be made available on-line to the SAS. The contractor shall propose the design for the listing to the SAS for approval 30 days prior to health care delivery.

1.1.4 The contractor shall provide the capability to edit the status and entry of a 13 digit disposition code indicating if the referral was approved for Military Treatment Facility (MTF) or civilian network treatment (see [paragraph 1.2](#)). This disposition code may be used during the claims adjudication process.

1.1.5 The contractor shall provide the logic to automatically approve the referral if the SAS determination is not received within two work days of referral entry.

1.1.6 The contractor shall provide the telecommunications, hardware, and software necessary for data entry and report printing from the Defense Health Agency-Great Lakes (DHA-GL) location. The contractor shall provide initial and ongoing application training and support on an "as needed" basis.

1.1.7 The contractor shall provide a data dictionary of available data elements to be sent to the DHA-GL automated information system. The contractor shall send all care referral records to the DHA-GL in a tab delimited data flat file. The method of transfer can be File Transfer Protocol (FTP) or an e-mail attachment.

1.1.8 The contractors shall provide the **DHA-GL** read only access to their subcontractor's claims history database. The contractors shall provide the necessary training to the **DHA-GL** staff in order to access the claims history database.

1.2 SAS Referral Data

1.2.1 The format of the referral number will be "DMISYYJJNNNS" where:

1.2.1.1 "DMIS" = the DMIS ID Code of the issuing facility--(5203 = **DHA-GL**);

1.2.1.2 "YY" = the year in which the referral number was issued;

1.2.1.3 "JJJ" = the Julian date on which the referral number was issued;

1.2.1.4 "NNN" = the Facility Sequence Number;

1.2.1.5 "S" = Status (the type of provider)

- "C" = Civilian Care (refer to [Section 2, paragraph 5.3.1.2](#) for referral requirements)
- "M" = Military Care (military MTF or clinic)
- "V" = Veterans' Affairs (VA) Care (VA hospital or medical facility)
- "P" = Care rendered under the Department of Defense/Department of Veterans Affairs (DoD/DVA) Memorandum of Agreement (MOA) for "Referral of Active Duty Military Personnel Who Sustain Spinal Cord Injury, Traumatic Brain Injury, or Blindness to Veterans Affairs Medical Facilities for Health Care and Rehabilitative Services" (refer to [Section 4, paragraph 2.2](#) for referral requirements).

1.2.2 The format of the effective date is "YYYYMMDD" where:

- "YYYY" = the year in which the **SAS** referral is effective;
- "MM" = the month in which the **SAS** referral is effective; and
- "DD" = the day on which the **SAS** referral is effective. A retroactive authorization is indicated by an effective date prior to the issue date.

1.2.3 The format of the expiration date is "YYYYMMDD" where:

- "YYYY" = the year in which the **SAS** referral expires;
- "MM" = the month in which the **SAS** referral expires; and
- "DD" = the day on which the **SAS** referral expires.

1.3 Data Elements

The following data elements are the minimum elements required by **DHA-GL** for determining fitness-for-duty and for determining if care not covered under TRICARE Prime will be covered under TPR. The **DHA-GL** will return the data elements furnished by the contractor when responding to a request for a fitness-for-duty or coverage/benefit determination. If the contractor is asking for a coverage/benefit determination, the contractor shall include the applicable elements marked with asterisks (*) below. If, for example, the contractor cannot authorize the care it is not a **covered** benefit under **TRICARE**, the contractor will include "Not a benefit." If the contractor cannot

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authorize the care because the care is not medically necessary, the contractor will include **Not medically necessary. If the contractor cannot authorize the care because the provider is not an authorized provider, the contractor shall include ***Provider not authorized.

| DATA ELEMENT | CONTRACTOR TO DHA-GL | DHA-GL TO CONTRACTOR |
|---|-----------------------------|-----------------------------|
| Patient Name | X | X |
| Patient's DOB | X | X |
| Patient's Sex | X | X |
| Contact Date (for retroactive authorizations) | X | X |
| Service Member SSN | X | X |
| Service Member Branch of Service | X | X |
| Duty Status | X | X |
| PCM Location Code | X | X |
| DMIS-ID | X | X |
| Contractor's Authorization Number | X | X |
| Effective Date of Authorization | X | X |
| *Not a Benefit | *If applicable | |
| **Not Medically Necessary | **If applicable | |
| ***Provider Not Authorized | ***If applicable | |
| SAS Fitness-for-Duty Referral Number or Benefit Determination Number | | X |
| Effective Date of SAS Referral | | X |
| Expiration Date of SAS Referral | | X |
| Status of Authorization (may be imbedded number) | | X |
| Number/Frequency of Services Requested for SAS Referral | X | X |
| Diagnosis | X | X |
| Procedure Code Range | X | X |
| Type of Service | X | X |
| Place of Service | X | X |
| Free Text (for available clinical information) | X | |

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