



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
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TRICARE
MANAGEMENT ACTIVITY

OD

CHANGE 25
6010.56-M
SEPTEMBER 14, 2010

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE OPERATIONS MANUAL (TOM), FEBRUARY 2008**

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

CHANGE TITLE: NATIONAL DEFENSE AUTHORIZATION ACT (NDAA), FISCAL YEAR (FY)
2009, SECTION 732, FINAL IMPLEMENTATION OF EXTENDED CARE
HEALTH OPTION (ECHO) CAP

CONREQ: 15033

PAGE CHANGE(S): See page 2.

SUMMARY OF CHANGE(S): This change package eliminates the \$2,500 per month limit for the following ECHO benefits; diagnostic services, treatment, respite care, assistive services, and durable equipment.

EFFECTIVE DATE: August 9, 2010.

IMPLEMENTATION DATE: Upon direction of the Contracting Officer.

This change is made in conjunction with Feb 2008 TPM, Change No. 37 and Feb 2008 TRM, Change No. 36.

Reta M. Michak
Director, Operations Division

ATTACHMENT(S): 2 PAGES
DISTRIBUTION: 6010.56-M

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REMOVE PAGE(S)

CHAPTER 9

Addendum B, pages 3 and 4

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Chapter 9, Addendum B

Reason Codes

FIGURE 9.B-2 NON-DUPLICATE REASON CODES

REASON CODE	DESCRIPTION	EXPLANATION	ADDITIONAL EXPLANATION REQUIRED?
This claim is not a duplicate because it involves:			
N100	Twins	This is not a duplicate payment since the claim involves a patient who is a twin of the patient on the other claim(s).	No
N101	Ambulance services - separate transport.	This is not a duplicate payment since the claim involves ambulance services for a separate transport from that paid on the other claim(s).	No
N102	Same procedure(s)/service(s) but different encounters (dates of service).	This is not a duplicate payment since the claim involves different dates of service from those paid on the other claim(s).	No
N103	Same condition but different equipment/supplies.	This is not duplicate payment since the claim involves different equipment/supplies than those paid on the other claim(s) for the same condition.	No
N104	Different psychological tests billed under same procedure code(s).	This is not a duplicate payment since the claim involves different psychological tests billed under the same procedure code than those paid on the other claim(s).	No
N105	Additional services not previously billed.	This is not a duplicate payment since the claim involves additional services not paid on the other claim(s).	No
N106	Same procedure codes/ different provider types (e.g., surgeon/assistant surgeon).	This is not a duplicate payment since the services paid on this claim are for assistant surgeon services rendered by a different provider or type of provider than the provider or type of provider paid on the other claim(s).	No
N107	ECHO prorated Durable Equipment (DE)	This is not a duplicate payment since the services paid on this claim are for different ECHO prorated DE than that paid on the other claim(s). <i>This code is obsolete as of the implementation date of elimination of prorating ECHO DE but will be retained for historical purposes only.</i>	No
N108	Technical or facility component/professional component.	This is not duplicate payment since the services paid on this claim involve the technical or facility/ professional services not paid on the other claim(s).	No
N109	Same procedure codes but different procedure code modifiers.	This is not a duplicate payment since the services paid on this claim have different procedure code modifiers than those on the other claim(s).	No
N110	Resubmission (Tracer Claim) of previously denied line item(s).	This is not a duplicate payment since these services had been previously denied but were resubmitted with corrected procedure codes.	No
N111	Multi-page claim entered separately.	This is not a duplicate payment since this claim contained more than one page which were entered separately as two or more claims.	No

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Reason Codes

FIGURE 9.B-2 NON-DUPLICATE REASON CODES (CONTINUED)

REASON CODE	DESCRIPTION	EXPLANATION	ADDITIONAL EXPLANATION REQUIRED?
N112	Multiple services rendered on the same date or within the same date range.	This is not a duplicate payment since the multiple services rendered on the same date were legitimate and acceptable or the multiple services billed were rendered on different dates within the date range of the other claim(s).	Yes
N200	Data conversion errors.	This is not a duplicate payment since the services paid on this claim are different from those paid on the other claim(s), but due to data conversion errors they appear to be the same.	Yes
N201	Multi-suffix claim.	This is not a duplicate payment since the services paid on this claim suffix are different from those paid on the other suffix(es). NOTE: To use this reason code, the additional suffix listed cannot contain any payments contained in a previous suffix. If the additional suffix was issued to pay a different provider, or it reflects a payment issued under a previous suffix and a cancellation of the previous suffix has been issued or will be issued for the previous suffix, it is still a duplicate payment and the claim should be assigned "Y" Dupe? and an "Actual Duplicate Reason Code" used.	Yes
N300	Claim belongs to FI 99	The claim belongs to FI 99. This non-duplicate reason code may be used to enable resolution of a set where the FI 99 claim is not the BASE claim. If the FI 99 claim is the BASE claim, the other claim(s) may be flagged with "Y" or "N" Dupe? and reason codes, recoupment amounts entered, and corresponding adjustments flagged as usual. If the FI 99 claim is not the BASE claim, it should be flagged with an "N" Dupe? and an N300 reason code. In either case, no FI 99 adjustments should be flagged.	No
N900	Other		Yes

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