

Chapter 7

Section 2

Preauthorizations

Revision:

1.0 GENERAL

Preauthorization review shall be performed for all care and procedures listed below. The contractor may propose additional authorization reviews. (See [Section 1](#) for additional guidance.) The admissions/procedures are subject to change over time based upon the Government’s assessment of the efficacy of the review. The changes will include adding and/or removing admissions/procedures. When the beneficiary has other insurance that provides primary coverage, exception to the preauthorization requirements shall apply as provided in the TRICARE Policy Manual (TPM), [Chapter 1, Section 6.1, paragraph 1.10](#). When the contractor is acting as a secondary payor any medically necessary reviews shall be performed on a retrospective basis.

THE FOLLOWING INPATIENT ADMISSIONS SHALL BE PREAUTHORIZED:
Adjunctive Dental
Mental Health
Substance Abuse
Skilled Nursing Facility (SNF) care for dual eligible beneficiaries
<p>Note: Effective for dates of service June 1, 2010, SNF care received in the U.S. and U.S. territories must be preauthorized for TRICARE dual eligible beneficiaries. The TRICARE Dual Eligible Fiscal Intermediary Contract (TDEFIC) contractor shall preauthorize SNF care beginning on day 101, when TRICARE becomes primary payer.</p>
Organ and Stem Cell Transplants

THE FOLLOWING OUTPATIENT SERVICES SHALL BE PREAUTHORIZED:
Adjunctive Dental
<p>Mental Health Care after the eighth visit each fiscal year. Primary Care Manager (PCM) referral is not required; however, the contractor shall steer all beneficiaries who contact them to the Military Treatment Facility (MTF)/Enhanced Multi-Service Market (eMSM) or appropriate network provider. Additionally, the contractor shall expound upon the benefits of using the MTF/eMSM and network providers during all appropriate beneficiary and provider briefings.</p>
<p>Note: Service members require preauthorization before receiving mental health services. The contractor shall comply with the provisions of Chapters 16 and 17 when processing requests for active duty personnel.</p>

TRICARE Operations Manual 6010.59-M, April 1, 2015

Chapter 7, Section 2

Preauthorizations

THE FOLLOWING SERVICES WILL BE PREAUTHORIZED IN ANY SETTING:

Extended Care Health Option (ECHO) Services

Hospice

Psychiatric Residential Treatment Center (RTC) Care

Dental Anesthesia and Institutional Benefits

2.0 INPATIENT MENTAL HEALTH AND RTC CARE

As indicated above, inpatient mental health and RTC requires preauthorization. However, in the event that services were not preauthorized, the contractor shall obtain the necessary information and complete a retrospective review. Penalties for failing to obtain preauthorization apply (see [32 CFR 199.15](#)).

3.0 EFFECTIVE AND EXPIRATION DATES

The preauthorization shall have an effective date and an expiration date. For organ and stem cell transplants, the preauthorization shall remain in effect as long as the beneficiary continues to meet the specific transplant criteria set forth in the TPM, or until the approved transplant occurs.

- END -