



DEFENSE
HEALTH AGENCY

PAT&IS

OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS
16401 EAST CENTRETECH PARKWAY
AURORA, CO 80011-9066

CHANGE 80
7950.2-M
DECEMBER 1, 2015

PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE SYSTEMS MANUAL (TSM), FEBRUARY 2008

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

CHANGE TITLE: PROVISIONAL COVERAGE FOR EMERGING SERVICES AND SUPPLIES

CONREQ: 17551

PAGE CHANGE(S): See page 2.

SUMMARY OF CHANGE(S): This change adds the special processing code "PC" for Provisional Coverage for Emerging Services and Supplies.

EFFECTIVE DATE: January 1, 2016.

IMPLEMENTATION DATE: January 4, 2016.

This change is made in conjunction with Feb 2008 TOM, Change No. 157 and Feb 2008 TPM, Change No. 147.

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Kenneth C. Jacobs
Team Chief, Performance, Analysis,
Transition, & Integration Section (PAT&IS)
Defense Health Agency (DHA)

ATTACHMENT(S): 6 PAGES
DISTRIBUTION: 7950.2-M

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REMOVE PAGE(S)

CHAPTER 2

Section 2.8, pages 5, 6, and 13 through 16

INSERT PAGE(S)

Section 2.8, pages 5, 6, and 13 through 16

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Chapter 2, Section 2.8

Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SECONDARY OPERATION/NON-SURGICAL PROCEDURE CODES			
RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-350 --1-373	24	Yes ¹
PRIMARY PICTURE (FORMAT) Seven (7) alphanumeric characters.			
DEFINITION Secondary OP/NSP Codes. Codes identifying the procedures, other than the principal procedure, performed during the period reported on the TED record. The secondary OP/NSP code(s) shall not duplicate the primary OP/NSP code. Do not duplicate secondary OP/NSP codes.			
CODE/VALUE SPECIFICATIONS Use the most current procedure code edition (ICD-9-CM or ICD-10-PCS) as directed by DHA . Must code the most detailed procedure. Do not code the decimal point.			
ALGORITHM N/A			
SUBORDINATE AND/OR GROUP ELEMENTS			
SUBORDINATE			GROUP
N/A			N/A
NOTES AND SPECIAL INSTRUCTIONS:			
¹ Required if available.			

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Chapter 2, Section 2.8

Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SECONDARY TREATMENT DIAGNOSIS/PRESENT ON ADMISSION (POA) INDICATOR

RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-305 -- 1-328	24	Yes ¹
Non-Institutional	2-116 -- 2-138, 2-340	24	Yes ¹

PRIMARY PICTURE (FORMAT) Eight (8) alphanumeric characters.

DEFINITION Secondary Treatment Diagnosis: Code corresponding to additional conditions that co-exist at the time of admission or during the treatment encounter. The secondary treatment diagnosis code(s) shall not duplicate the primary treatment diagnosis code. Do not duplicate secondary treatment diagnosis codes.

POA Indicator: Diagnosis present at the time the order for inpatient admission occurs.

CODE/VALUE SPECIFICATIONS Secondary Treatment Diagnosis (Positions 1 through 7): Use the most current diagnoses edition (ICD-9-CM or ICD-10-CM) as directed by DHA. Must code the most detailed procedure. Do not code decimal point.

POA Indicator (Position 8):

Valid POA values are:

⊖	Not reported
1	Unreported/Not Used - Exempt from POA reporting
N	No - Not present at time of admission
U	Unknown - Documentation insufficient to determine if the condition was present at time of admission
W	Clinically Undetermined - The provider is unable to clinically determine if the condition was present at time of admission
Y	Yes - Present at time of admission

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	N/A

NOTES AND SPECIAL INSTRUCTIONS:

¹ Required if available.

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Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SPECIAL PROCESSING CODE

RECORDS/LOCATOR NUMBERS			
RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-185	4	Yes ¹
Non-Institutional	2-305	4/Up to 99	Yes ¹
PRIMARY PICTURE (FORMAT) Four occurrences of two (2) alphanumeric characters per occurrence/line item for non-institutional.			
DEFINITION Code indicating care that requires special processing.			
CODE/VALUE SPECIFICATIONS			
	0	Hospice non-affiliated provider	
	1	Medicaid	
	3	Allogeneic bone marrow recipient (Wilford Hall referred only prior to 10/01/1997 and PCM/HCF referred after 12/31/2002)	
	4	Allogeneic bone marrow donor (Wilford Hall referred only prior to 10/01/1997 and PCM/HCF referred after 12/31/2002)	
	5	Liver transplant (effective for care before 03/01/1997, or between 02/20/1998 and 08/31/1999 and after 05/31/2003)	
	6	Home Health Care (HHC) (non-institutional only)	
	7	Heart Transplant	
	10	Active duty cost-share ambulatory surgery taken from professional claim	
	11	Hospice	
	12	Capitated Arrangements	
	14	Bone marrow transplants (BMTs) - DHA approved	
	16	Ambulatory Surgery Facility charge	
	17	VA medical provider claim (care rendered by a VA provider)	
	49	Hospital reimbursement reduced by manufacturer credit/replacement of device during warranty period	
	50	Hospital reimbursement reduced by manufacturer credit/recalled device	
	A	Partnership Program (internal providers with signed agreements)	
	E	HHC/CM Demonstration (After 03/15/1999, grandfathered into the Individual Case Management Program (ICMP)) ²	

NOTES AND SPECIAL INSTRUCTIONS:

- ¹ Required if TED record processing is applicable to special processing conditions. Can report from 0 to 4 codes, left justify and blank fill. Do not duplicate. Each occurrence consists of two characters.
- ² Whenever SPECIAL PROCESSING CODE = 'E' (grandfathered HHC claims) is coded, SPECIAL PROCESSING CODE 'CM' must be present.
- ³ Whenever SPECIAL PROCESSING CODE = 'AU' (AUTISM DEMONSTRATION) is coded, SPECIAL PROCESSING CODE 'PF' (ECHO) must be present.
- ⁴ Whenever SPECIAL PROCESSING CODE = 'RB' (Respite Benefit for Seriously Injured or Ill ADMS) is coded, SPECIAL PROCESSING CODE 'SE' (SHCP- TRICARE Eligible) must be present.

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Chapter 2, Section 2.8

Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SPECIAL PROCESSING CODE (Continued)		
CODE/VALUE SPECIFICATIONS (CONTINUED)	Q	Active Duty Delayed Deductible
	R	Medicare/TRICARE Dual Entitlement First Payor - not a Medicare Benefit (Effective 10/01/2001)
	S	Resource Sharing - External
	T	Medicare/TRICARE Dual Entitlement (formally normal COB processing (Effective 10/01/2001 process as Second Payor))
	U	BRAC Medicare Pharmacy (Section 702) claim (Terminated 04/01/2001)
	V	Financially underwritten payment by contractor
	W	Non-financially underwritten payment by financially underwritten contractor
	X	Partial hospitalization - provider not contracted with or employed by the PHP billing for psychotherapy services in a PHP
	Y	Heart-lung transplant
	Z	Kidney transplant
	AB	Abused dependent of discharged or dismissed member (Effective 07/28/1999)
	AC	Access To Care (ATC) Demonstration (South Region only)
	AD	Foreign active duty claims (Effective 06/30/1996)
	AE	Abortion performed due to rape
	AF	Abortion performed due to incest
	AG	Abortion performed due to life endangering physical condition
	AN	SHCP - Non-MTF-Referral Care (Effective 10/01/1999 through 05/31/2004)
	AP	Applied Behavior Analysis (ABA) Pilot
	AR	SHCP - Referred Care (Effective 10/01/1999 through 05/31/2004)
	AS	Comprehensive Autism Care Demonstration
	AU	Autism Demonstration (Effective 03/15/2008) ³
	BA	Applied Behavior Analysis (ABA) (Interim Benefit)
	BD	Bosnia Deductible (Effective 12/08/1995)
	CA	Civil Action Payment (Effective 07/01/1999)

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- ³ Whenever SPECIAL PROCESSING CODE = 'AU' (AUTISM DEMONSTRATION) is coded, SPECIAL PROCESSING CODE 'PF' (ECHO) must be present.
- ⁴ Whenever SPECIAL PROCESSING CODE = 'RB' (Respite Benefit for Seriously Injured or Ill AD/SM) is coded, SPECIAL PROCESSING CODE 'SE' (SHCP- TRICARE Eligible) must be present.

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Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SPECIAL PROCESSING CODE (Continued)

CODE/VALUE SPECIFICATIONS (CONTINUED)	CE	SHCP - CCEP (Effective 10/01/1999)
	CL	Clinical Trials Demonstration (Enrollment Effective 03/17/2003 through 03/31/2008)
	CM	ICMP claims (Effective 03/15/1999)
	CP	Cancer Clinical Trials (Enrollment Effective on or after 04/01/2008)
	CT	CCTP (Effective 12/28/2001)
	DC	DCPE-DVA - C&P exams used to determine fit for duty
	DE	TDRL physical exams (Effective 03/30/2009)
	EF	TRICARE Reserve and National Guard Family Member Benefits (Reservists and National Guard members called to active duty for more than 30 days in support of a contingency operation) (Effective 11/01/2009)
	EU	Emergency services rendered by an unauthorized provider (Effective 06/01/1999)
	FF	TFL (First Payor - Not A Medicare Benefit) (Effective 10/01/2001)
	FG	TFL (First Payor - No TRICARE Provider Certification, i.e., Medicare benefits have been exhausted) (Effective 10/01/2001)
	FS	TFL (Second Payor) (Effective 10/01/2001)
	GF	TPR for eligible ADFM residing with a TPR Eligible ADSM (Effective 10/30/2000 through 08/31/2002)
	GU	ADSM enrolled in TPR (Effective 10/01/1999)
	KO	Allied Forces - Kosovo (Effective 06/01/1999)
	LD	Laboratory Developed Tests (LDTs) Demonstration
	L2	Non-FDA Approved LDTs Demonstration
	MH	Mental Health Active Duty Cost- Share
	MM	Maryland Multi-Payer Patient-Centered Medical Home Program (MMPMHP)
	MN	TSP (Non-Network) (Effective 01/01/1998 through 12/31/2001)
	MS	TSP (Network) (Effective 01/01/1998 through 12/31/2001)

NOTES AND SPECIAL INSTRUCTIONS:

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- ³ Whenever SPECIAL PROCESSING CODE = 'AU' (AUTISM DEMONSTRATION) is coded, SPECIAL PROCESSING CODE 'PF' (ECHO) must be present.
- ⁴ Whenever SPECIAL PROCESSING CODE = 'RB' (Respite Benefit for Seriously Injured or Ill ADSM) is coded, SPECIAL PROCESSING CODE 'SE' (SHCP- TRICARE Eligible) must be present.

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Data Requirements - Institutional/Non-Institutional Record Data Elements (Q - S)

DATA ELEMENT DEFINITION

ELEMENT NAME: SPECIAL PROCESSING CODE (Continued)

CODE/VALUE SPECIFICATIONS (CONTINUED)		
	NE	Operation Noble Eagle/Operation Enduring Freedom Demonstration (Reservists called to active duty under Executive Order 13223) (Effective 09/14/2001 through 10/31/2009)
	PC	Provisional Coverage for Emerging Services and Supplies
	PD	Pharmacy Redesign Pilot Program (Effective 07/01/2000 through 04/01/2001)
	PF	ECHO (formerly PFPWD)
	PH	Philippines Demonstration Project
	PO	TRICARE Prime - Point of Service
	PS	Specialty Pharmacy Service (MOP Only)
	PV	Retail Network Pharmacy Services for DVA Beneficiaries (TPharm Retail Pharmacies Only)
	RB	Respite Benefit for Seriously Injured or Ill ADMS ⁴
	RI	Resource Sharing - Internal
	RS	Medicare/TRICARE Dual Entitlement (First Payor - No TRICARE Provider Certification, i.e., Medicare benefits have been exhausted) (Effective 10/01/2001)
	SC	SHCP - Non-TRICARE Eligible (Effective 10/01/1999)
	SE	SHCP - TRICARE Eligible (Effective 10/01/1999)
	SM	SHCP - Emergency (Effective 10/01/1999)
	SN	TSS (Non-Network) (Effective 04/01/2000 through 12/31/2002)
	SP	Special/Emergent Care (Effective 06/01/1999)
	SS	TSS (Network) (Effective 04/01/2000 through 12/31/2002)
	ST	Specialized Treatment (Effective 03/01/1997 through 05/31/2003)
	WR	Mental Health Wraparound Demonstration (Effective 01/01/1998 through 06/30/2001)

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
N/A	PROCESSING INFORMATION

NOTES AND SPECIAL INSTRUCTIONS:

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- END -