

CHAPTER 12
SECTION 9.2

TRICARE OVERSEAS PROGRAM PRIME - PRIMARY CARE MANAGERS (PCM)

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I. POLICY

A. TRICARE Overseas Program (TOP) prime enrollees shall select or have assigned to them primary care managers (PCMs) according to guidelines established by the TOP Military Treatment Facility (MTF) Commander, Lead Agent, or designee. The TOP PCM:

1. May be an individual professional provider, a group practice, military clinic, treatment site, or other health care delivery arrangement that is either part of the MTF or is a member of the Lead Agent TOP civilian preferred provider network.

2. May be a host nation internist, family practitioner, pediatrician, general practitioner, obstetrician/gynecologist, physician assistant, nurse practitioner, or certified nurse midwives when determined by the TOP MTF commander, Lead Agent or designee to meet governing country rules and licensure.

3. May also act as a HCF, when dual responsibility is necessary, as determined by the MTF commander or Lead Agent.

B. A TRICARE Overseas Program Prime enrollee must seek all his or her primary health care from the TOP PCM with the exception of care listed in [Chapter 12, Section 8.2](#), "TOP Clinical Preventive Services." If the TOP PCM is unable to provide the care, the TOP PCM is responsible for referring the enrollee to another TOP primary care provider. A TRICARE Overseas Program Prime enrollee must have a referral/authorization by the TOP PCM. Failure to obtain a TOP PCM referral/authorization when one is required for care may result in the service being paid under TOP Point of Service procedures with a deductible for outpatient services and cost-shares for in- and outpatient services (refer to [Chapter 12, Section 10.2](#)).

II. POLICY CONSIDERATIONS

A. The TOP PCM is responsible for notifying the TOP Health Care Finder (HCF) that a referral/authorization is being made/requested. The TOP Health Care Finder will assist the TRICARE Overseas Program Prime enrollee and other DoD beneficiaries in locating an MTF or TOP network provider to provide the care and in scheduling an appointment. The TOP Health Care Finder will work with the appropriate Lead Agent on developing procedures for electronic submission of referral/authorization to the claims processor to ensure proper

claims payment; this will permit the services to be reimbursed under TOP Prime rules. The contractor may, instead of an electronic authorization, accept as authorization, a locally produced document that contains HCF approval. If the contractor has no record of an authorization, prior to denial/payment, the contractor will follow the procedures outlined in [OPM Part Two, Chapter 22, Section II](#). for TOP Point of Service rules, assuming the service would otherwise be covered under the provisions of TRICARE Standard.

A. TOP MTF PCMs may be delegated authority by the TOP MTF Commander or Lead Agent to authorize referrals within the MTF. All referrals/authorizations to OCONUS civilian providers and all referrals/authorization made by a TOP designated civilian PPN-PCM must be made through the TOP Health Care Finder and must receive an authorization.

B. See [Chapter 12, Section 4.2](#) for information on TOP Health Care Finder services and [Chapter 12, Section 10.2](#) for information on the Point of Service option.

C. Refer to [OPM Part Two, Chapter 22](#), for additional information on processing requirements related to referral and authorization.

III. EXCEPTIONS

TOP PCM referral is not required for the following services:

- A. Services provided directly by OCONUS Partnership providers.
- B. Emergency care.
- C. Drugs.
- D. The first eight (8) outpatient mental health visits in a fiscal year.
- E. Ancillary services.
- F. CONUS travel.
- G. Services provided as part of the comprehensive clinical prevention program offered to TOP eligible Prime enrollees. (Refer to [Chapter 12, Section 8.2](#).)
- H. Services provided in Lead Agent designated exempt countries (see [OPM Part Two, Chapter 22](#)).

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