

POINT OF CONTACT (POC) PROGRAM

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I. DESCRIPTION

The TOP Point of Contact (POC) Program is a liaison service designed to provide beneficiaries and host nation providers assistance with filing TRICARE/TOP/TRICARE Dental Program (TDP) claims to ensure timely overseas claims filing and payment and continued beneficiary access to quality host nation health care. The POC program was established in 1991 and continues to be successful because of the ongoing oversight and support by various Uniformed Services Branches of designated POCs. The POC Program was expanded in 1999 to include TRICARE Dental Plan (TDP) overseas claims.

II. GENERAL

A. Designated Points Of Contact (POCs) are established by the Uniformed Services, the Defense Intelligence Agency (DIA) and the Defense Security Assistance Agency (DSAA), with concurrence from the overseas Regional Director nomination and final approval by TRICARE Management Activity (TMA).

B. A written request from the Commanding Officer of a foreign military base or location, or Defense Attache Offices (DAOs), and Security Assistant Organizations (SAOs) must be submitted to the TRICARE Management Activity, Chief, Claims Operations Office, 16401 East Centretech Parkway, Aurora, CO 80011. The request should include, name of the primary POC, name of the alternate POC (if any), 24 hour fax number, phone number, e-mail address, and a valid and secure mailing address (for pouch mail). This same process and information should be followed/submitted when subsequent changes are made.

C. POC designation is usually limited to one primary POC and one or two alternate POCs. Additional alternate POC may be designated upon justification from the Commanding Officer. This justification should be included with the request.

D. Upon receipt of the written request, the Chief, Claims Operations Office will review the nomination for approval. After the nomination has been approved, the Chief, Claims Operations Office will notify the Managed Care Support Contractor (MCS) of the official POC designation. A copy of the MCS contractor notification will be sent electronically or faxed to the Regional Directors, the POC's Command and the TDP.

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E. POC designation by TMA, Chief, Claims Operations Office, is “purple suited” and not Uniformed Service specific, nor is designation limited to a specific category of TOP beneficiary (i.e., retiree, ADSM, etc.) or for a specific category of TRICARE benefit (i.e., medical, drug, maternity, etc.).

F. POC requests for updates to their 24 hour fax number, phone number, e-mail address, and a valid and secure mailing/pouch mail address, shall be e-mail to the MCS contractor.

III. POC RESPONSIBILITIES

For POC duties and responsibilities see the TOP and TDP Point of Contact Program booklet at [Figure 12-12.2-11](#). This booklet should be used as a guide by TMA, designated POCs.

IV. MANAGED CARE SUPPORT CONTRACTOR (MCS) RESPONSIBILITIES

The MCS contractor shall:

A. Maintain a current listing of POCs, in coordination with TMA.

B. Assist the TOP or POCs, Uniformed Services, TRICARE beneficiaries, active duty members where appropriate, and host nation providers with information on the completion of and filing of claims with the appropriate claims processor.

C. Developmental procedures for the coordination, control and tracking of faxed or mailed claims from receipt to final processing. This includes, but is not limited to, storage/maintenance of the claim and all related correspondence, microfilming/imaging of claims upon receipt, the issuance of foreign drafts/U.S. dollar checks/EOBs, and development procedures for missing information needed to process the claim to completion.

D. Provide a dedicated P.O. box for the receipt of TOP claims.

E. Provide an updated POC list to the TMA, Chief, Claims Operation Office and to each TOP Regional Director, via fax or e-mail as POC updates/changes are made.

F. Operate a dedicated point of contact telefax/e-mail overseas claims receipt and processing system program for designated Uniformed Services bases and locations, remotely located Defense Attache Offices (DAOs) and Security Assistant Organizations (SAOs) for the purpose of receiving and expediting TRICARE Overseas claims and correspondence from all designated POCs.

G. Provide a dedicated fax number for the receipt of POC claims. Ensure the designated POC overseas FAX numbers are commercial and are accessible to receive data twenty-four (24) hours a day.

H. Use the designated POC telefax/e-mail to request information from all POCs, when additional information is needed to process the TRICARE Overseas claim or correspondence. When information has been requested from the POC, the MCS contractor shall pend the claim for ten (10) calendar days. If the requested information is not received by the MCS

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contractor from the POC by the close of business (COB) on the tenth (10th) calendar day, the MCS contractor shall deny the claim.

I. Accept only faxed claims/inquires/information faxed by an officially designated POC or an alternate POC. Electronic mail may also be used for TOP inquiries/information.

J. Verify beneficiary eligibility for TOP benefits.

K. Follow the inquiry process outlined in this section for POC requests for claims status update and for POC requests for changes to mail, fax numbers, etc.

L. Upon receipt of a POC inquiry and once the inquiry is completed, fax the response back to the person identified as the POC contact. The MCS contractor shall follow the faxed POC inquiry with a phone call, if necessary.

M. Accept for TOP claims, a copy of the front and back of the dependent ID card which must be sent in with the TOP claim and may be used as eligibility verification by the MCS contractor when the family member is not enrolled in DEERS.

N. Shall report POC fax inquiries as routine correspondence as outlined in the TRICARE Operations Manual, [Chapter 1, Section 3](#).

O. Review claims to ensure the beneficiary/provider has provided complete and accurate information prior to submitting claims for processing/payment.

P. Process TOP claims using guidelines in this chapter.

Q. Be able to translate claims submitted in a foreign language.

R. Pay claims using the exchange rate in effect on the last date of service listed on the claim.

S. Make payment as follows:

1. For TOP Claims:

a. Issue foreign currency drafts for TOP claims. Drafts may not be changed to a U.S. dollar check after the MCS contractor has issued a foreign draft.

b. Issue foreign currency drafts for TOP claims when the sponsor/family member requests payment in local foreign currency only at the time the claim is submitted.

NOTE: Foreign drafts are good for 190 days and may be cashed at any time. U.S. dollar checks are good for a limited period of time and must be reissued by the MCS contractor upon expiration of the check before the check can be cashed.

T. Use priority pouch mail for the mailing of foreign drafts/U.S. dollar checks/EOBs to appropriate sponsors/beneficiaries and/or host nation providers for claims submitted via POCs. The priority pouch mail must be sent using the fastest means available to the POC's

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location. Shall in those locations where a single point of dispersal has been established for all payments sent to that country, the MCS contractor shall batch payments and TEOBs by foreign country and mail the payments and TEOBs in pouches using overnight mail delivery at least once every five (5) working days. The payments and TEOBs in the pouches shall be separated by individual beneficiary/host nation provider and contained in a sealed window envelope for POC distribution. If overnight mail service is not available or is not timely in foreign locations, the claims processing MCS contractor shall use the most expeditious address provided by the POC, such as the U.S. Embassy address, or mail service available.

U. Report unresolved claims problems or issues between the POC and the TRICARE MCS contractor for TOP issues to the TRICARE Management Activity, Chief, Claims Operations Office, 16401 East Centretch Parkway, Aurora, CO 80011.

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