

CLINICAL PREVENTIVE SERVICES (PRIME/STANDARD)

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I. POLICY

A. See Chapter 7, [Sections 2.1](#) and [2.2](#), for listing of TOP (Prime/Standard) clinical preventative services.

B. Generally, for overseas enrolled beneficiaries there is no preauthorization or referral required for the TOP Prime clinical preventative services. However, active duty member preauthorization or referral requirements for clinical preventive services may differ in each overseas region. Regional specific requirements may be obtained by contacting the appropriate overseas Regional Director.

C. There shall be no co-payments for TOP Prime associated with the individually TRICARE/TOP reimbursable clinical preventive services. Verification of codes are not required for payment of enhanced services under the TRICARE Overseas Program (TOP). The Managed Care Contractor does not have to establish additional edits to identify claims within the age, sex, race or clinical history perimeters included within the table outlined in Chapter 7, [Sections 2.1](#) and [2.2](#).

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