CHAPTER 4
SECTION 1.1

MHS ENTERPRISE WIDE REFERRAL AND AUTHORIZATION SYSTEM (EWRAS)

1.0.   GENERAL

The Government will operate and maintain an electronic MHS Enterprise Wide Referral and Authorization System (EWRAS) capable of accepting and sending referrals and authorizations. Through a component module the EWRAS will also generate and send Non-Availability Statements (NASs) to all Managed Care Support Contractors (MCSCs). The system will receive and route electronic referral and authorization transactions between the various MHS direct care and purchased care contractors, e.g., Military Treatment Facilities (MTFs) and MCSCs. For auditing and other administrative purposes, the system will capture and store the referral and authorization data. The system will be able to receive, process and send non-HIPAA-compliant ASC X12N 278 Health Care Services Review – Request for Review and Response transactions. The EWRAS system will be available at a future date. As a contingency plan, the MCSC shall develop, with the MTF Commanders, a two-way process for transmitting referral information between the parties. This process shall be codified in an MOU between the MCSC and each MTF Commander. NASs will be sent to the MCSCs using non-HIPAA compliant but standard 278 transactions (see paragraph 4.0. below for additional information regarding NASs). In addition to being Electronic Data Interchange (EDI) capable, the system will contain a web-application component that will be instantly accessible by the MHS community from the DoD enterprise wide web site, TRICARE Online (TOL). The future system will route network referral requests from the MCSCs to the appropriate MTFs for first right of refusal, allowing care availability determinations by MTFs prior to referrals being made to the civilian network by the MCSCs. The system will also transmit NASs to the appropriate MCSCs for claims processing purposes. The MCSCs are required to maintain their own internal referral and authorization system and files.

2.0.   REFERRALS

2.1.   Referrals to the MCSCs may be requested from health care providers via letter, facsimile, or electronic means. If requested electronically, referrals will be sent via HIPAA-compliant ANSI ASC X12N 278 standard transactions. The contractor must be able to send and receive the HIPAA-compliant ANSI ASC X12N 278 transactions. If received by means other than electronic, the MCSC can access the EWRAS and manually enter the referral request into the EWRAS or enter the referral into their own system and securely send it through the EWRAS to the appropriate MTF via ANSI ASC X12N 278 standard transactions. All referrals generated or received by the contractors shall be loaded to their internal referral and authorization systems where they will be accessible to the claims processing and customer service systems.

2.2.   The government requires first right of refusal for referrals for specialty care requested by network providers. All requests for specialty care referrals from network providers must be sent to the appropriate MTFs to determine care availability within the

MTF before referrals are made to the civilian network in a format consistent with the Memorandum of Understanding (MOU). Generally, responses to the referral request to the MTFs will be received by the MCSC within 24 hours. MCSCs may not assume a refusal until an actual reply from the MTF is received. MCSCs shall address acceptable referral response turnaround times in the MOUs with each MTF. The four week maximum wait time for a specialty care appointment begins from the time the beneficiary requests an appointment.

2.3. MCSCs (and other MHS contractors using the EWRAS) shall work with TMA to develop and implement appropriate electronic transactions that can be used with the ANSI ASC X12N 278 standard transaction to convey specialty consultation, referral reports and discharge summaries within the EWRAS. Should accreditation standards organizations or federal law or regulation (such as HIPAA) or TMA mandate standard electronic transactions to convey reports, the contractor shall adopt those transactions upon contract modification.

3.0. AUTHORIZATIONS

3.1. Authorizations issued by the MTF or contractor may be sent via letter, facsimile, or electronic means. If sent electronically, authorizations shall be sent using HIPAA-compliant ANSI ASC X12N 278 standard transactions.

3.2. Authorizations issued by the MTF may be sent via letter, facsimile, or electronic means. If sent electronically, authorizations may be sent using HIPAA-compliant ANSI ASC X12N 278 standard transactions. Contractors shall receive electronic authorizations from MTFs generated through the EWRAS via ANSI ASC X12N 278 standard transactions, when EWRAS is implemented.

3.3. All authorizations generated or received by the contractors shall be loaded to their internal referral and authorization systems where they will be accessible to the claims processing and customer service systems.

4.0. NON-AVAILABILITY STATEMENTS (NASs)

4.1. Non-Availability Statements are issued to TRICARE non-enrolled beneficiaries and permit care outside of a MTF as stipulated by policy and the MTF Commanders. MCSCs shall receive NAS information via unsolicited ANSI ASC X12N 278 Health Care Service Review transactions from the EWRAS.

NOTE: While ANSI ASC X12N 278 Health Care Service Review transactions will be used by the EWRAS to transmit NAS data to the MCSCs, NASs are not considered a HIPAA-covered transaction. NASs are not referrals or authorizations as defined under HIPAA. As their name indicates, NASs are statements of non-availability. They communicate to beneficiaries and to TRICARE claims processors that required care is not available within an MTF. NASs make no referrals to specific providers nor do they request or grant authorization for specific procedures. They advise that an MTF cannot provide the needed care and that the patient is

permitted to seek treatment outside of the MTF. The HIPAA Transaction and Code Set Final Rule defines a Referral Certification and Authorization as follows:

"The Referral certification and authorization transaction is any of the following transmissions:

(a) A request for the review of health care to obtain authorization for the health care.

(b) A request to obtain authorization for referring an individual to another health care provider.

(c) A response to a request described in paragraph (a) or paragraph (b) of this section."

NASs do not meet the above definition and are, therefore, not considered a HIPAA-required transaction.

4.2. NASs will be created by MTFs, translated into ANSI ASC X12N 278 Health Care Services Review transactions by the EWRAS, and routed to the MCSCs as unsolicited 278s. MCSCs shall load all NAS data received to their internal referral and authorization systems where they will be accessible to the claims processing and customer service systems.

5.0. EWRAS ACCESS THROUGH TRICARE ONLINE (TOL)

5.1. The EWRAS is located on the TOL platform and access to TOL will be required. MCSCs and other contractors that use the EWRAS will be given specific privileges within TOL which will allow them to perform all contract required functions within the EWRAS.

5.2. TOL Authentication

5.2.1. Each MCSC, or other contractor required to use the EWRAS, shall identify a primary and a backup "TOL Administrator." Contractors shall coordinate with the TOL Program Office to complete administrative requirements necessary to establish the TOL Administrator roles.

5.2.2. TOL Administrators will have the authority to authenticate contractor personnel who need access to functionality on TOL to perform their work and assign appropriate permissions to each user. TOL Administrators shall also activate and deactivate user TOL accounts.

5.2.3. Contractors shall ensure that all user names and passwords associated with TOL are secure and maintained in accordance with all government security requirements.

5.3. Should TOL or the EWRAS go down, contractors should contact the TOL Tier 2 Help Desk at: 1-800-501-8662. If there are planned system maintenance or downtime, the TOL Tier 2 Help Desk will notify the contractors of the consequent non-availability of the system. All contractors using TOL and the EWRAS shall identify and provide the Tier 2 Help Desk with the names, telephone numbers, and e-mail addresses of contractor points of contact (POC)

who can be notified by the TOL Tier 2 Help Desk of system problems. Contractors shall provide the TOL Tier 2 Help Desk with POC updates on a quarterly basis or more frequently should contractor POCs change.

5.4.   Contractor users of the EWRAS shall complete all required TOL and EWRAS web-based training courses as defined by the TOL Program Office.

5.5.   Contractors who will exchange electronic transactions with the EWRAS shall provide the TOL Program Office with the electronic addresses to which the EWRAS should send the transactions in sufficient time (as defined through coordination discussions between the TOL Program Office, the contractors, and the Contracting Officers) to permit testing and production implementation. The TOL Program Office will also provide the EWRAS electronic addresses to the contractors. Any changes to electronic addresses must be coordinated in advance with the TOL Program Office.