

A

Accommodation Of Discounts Under Provider Reimbursement Methods 12

Allowable Charges

CHAMPUS Maximum Allowable Charges (CMAC)	5	3
Non-Network Providers	5	1

Ambulance Services (SNF) 8 Addendum E

Ambulance Services 1 14

Ambulatory Surgery Procedures

On Or After 11/01/2003	9	Addendum B
On Or Before 11/01/2003	9	Addendum A

Ambulatory Surgical Center Reimbursement For

All Services Prior To June 1, 2007 And Thereafter, For Services Not Otherwise Reimbursed Under Hospital OPPS	9	1
--	---	---

Anesthesia 1 9

Assistant Surgeons 1 17

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
B		
Benefits And Beneficiary Payments Under The TRICARE Program	2	Addendum A
Birthing Center Rate Non-Professional Component Reimbursement	10 10	Addendum A 1
Bonus Payments In Health Professional Shortage Areas (HPSA) And In Physician Scarcity Areas (PSA)	1	33

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
C		
Catastrophic Loss Protection	2	2
Certified Psychiatric Nurse Specialist	1	6
Charges For Provider Administrative Expenses	1	19
Claims Auditing Software	1	3
Consolidated Billing (SNF)	8 8	2 Addendum E
Cost-Shares And Deductibles	2	1

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
D		
Discounts	3	3
Double Coverage		
Coordination Of Benefits	4	3
Review And Processing Of Claims	4	2
Specific Double Coverage Actions	4	4
Double Coverage	4	1
Durable Medical Equipment		
Prosthetics, Orthotics, And Supplies (DMEPOS)	1	11
Rental vs. Purchase Of DME	1	Addendum B

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX

CHAPTER

SECTION

E

Economic Interest In Connection With Mental
Health Admissions

1

8

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
F		
Freestanding Ambulatory Surgical Center Reimbursement	9	1
Freestanding and Hospital-Based Birthing Center Reimbursement	10	1
Freestanding Psychiatric Partial Hospitalization Program		
Maximum Rates (FY 2005 - FY 2007)	7	Addendum B
Reimbursement	7	2

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
H		
Health Benefit Program Agreement	6	Addendum A
Home Health Care		
Annual HHA PPS Rate Updates		
CY 2004	12	Addendum L (CY04)
CY 2005	12	Addendum L (CY05)
CY 2006	12	Addendum L (CY06)
Annual HHA PPS Wage Index Updates		
CY 2005	12	Addendum M (CY05)
CY 2006	12	Addendum M (CY06)
FY 2003 Indices For FY 2004 Updates	12	Addendum M (FY04)
CMS Form 485 - Home Health Certification And Plan Of Care Data Elements	12	Addendum D
Coverage And Reimbursement		
Benefits And Conditions For Coverage	12	2
Claims And Billing Submission Under HHA PPS	12	6
General Overview	12	1
Medical Review Requirements	12	8
Pricer Requirements And Logic	12	7
Primary Provider Status And Episodes Of Care	12	5
Prospective Payment Methodology	12	4
Data Elements Used In Determination Of Outlier Payments	12	Addendum N
Definitions And Acronym Table	12	Addendum A
Examples Of Claims Submission Under HHAPPS	12	Addendum O
HAVEN Reference Manual	12	Addendum K
HIPPS Table For Pricer	12	Addendum J
Home Health Resource Group (HHRG) Worksheet	12	Addendum I
ICD9-CM Diagnosis Codes For HHRG Assignment	12	Addendum H
Non-Routine Supply Codes	12	Addendum B
OASIS Items Used For Home Health Agency/ Prospective Payment System	12	Addendum G
Outcome And Assessment Information Set (OASIS-B1)	12	Addendum F
Primary Components Of A Home Care Patient Assessment	12	Addendum E
Therapy Codes	12	Addendum C
Hospice Rate Information		
Crosswalk Of Counties By State for FY 2006	11	Addendum D (FY06)
Participation Agreement	11	Addendum E
Rates For Hospice Care		
FY 2005	11	Addendum A (FY05)
FY 2006	11	Addendum A (FY06)
FY 2007	11	Addendum A (FY07)

H (Continued)

Reimbursement For Hospice Wage Indexes		
For Rural Areas		
FY 2005	11	Addendum C (FY05)
FY 2006	11	Addendum C (FY06)
FY 2007	11	Addendum C (FY07)
For Urban Areas		
FY 2005	11	Addendum B (FY05)
FY 2006	11	Addendum B (FY06)
FY 2007	11	Addendum B (FY07)
Hospice Reimbursement		
Conditions For Coverage	11	3
Coverage/Benefits	11	2
General Overview	11	1
Guidelines For Payment Of Designated Levels Of Care	11	4
Hospital Reimbursement		
Billed Charges Set Rates	1	21
Other Institutional Reimbursement	3	2
Other Than Billed Charges	1	22
Outpatient Services For All Services Prior To June 1, 2007 And Thereafter, For Services Not Otherwise Reimbursed Under Hospital OPPS	1	24
Payment When Only SNF Level Of Care Is Required	1	24
Philippines	1	34
TRICARE/CHAMPUS DRG-Based Payment System		
Adjusted Standardized Amounts	6	7
Adjustments To Payment Amounts	6	8
Applicability Of The DRG System	6	4
Basis Of Payment	6	3
Charges To Beneficiaries	6	10
Determination Of Payment Amounts	6	5
DRG Weighting Factors	6	6
General Description Of System	6	2
General	6	1
Information Provided By TMA	6	9
TRICARE/CHAMPUS Inpatient Mental Health Per Diem Payment System	7	1
Hospital-Based Birthing Room	1	32

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
Individual Consideration Cases	5	4
Insulin	1	15

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
L		
Laboratory Services	1	13
Legal Obligation To Pay	1	27
Legend Drugs	1	15
Locality-Based Reimbursement Rate Waiver	5	2

INDEX	CHAPTER	SECTION
N		
National Health Service Corps Physicians Of The Public Health Service	1	5
Network Provider Reimbursement	1	1
Newborn Charges	1	31
Nurse Practitioner	1	6

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
O		
Orthotics	1	11
Outpatient Prospective Payment System (OPPS) - Ambulatory Payment Classifications (APCs)		
Billing And Coding Of Services Under APC Groups	13	2
Claims Submission And Processing Requirements	13	4
Development Schedule For TRICARE OCE/APC Quarterly Update	13	Addendum A1
General	13	1
Medical Review Under The OPPS	13	5
OCE Notification Process For Quarterly Updates	13	Addendum A2
Prospective Payment Methodology	13	3
Oxygen And Related Supplies	1	12

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
P		
Partial Hospitalization Programs (PHPs)		
Freestanding Psychiatric Reimbursement	7	2
Maximum Rates (FY 2005 - FY 2007)	7	Addendum B
Psychiatric Reimbursement For All Services Prior To June 1, 2007 And Thereafter, For Services Not Otherwise Reimbursed Under Hospital OPPS	7	2
TRICARE/CHAMPUS Standards For Inpatient Rehabilitation	7	Addendum D
Participation Agreement		
Freestanding Psychiatric Partial Hospitalization Program	7	Addendum J
Hospice Program Services For TRICARE/CHAMPUS Beneficiaries	11	Addendum E
Hospital-Based Psychiatric Partial Hospitalization Program	7	Addendum I
Residential Treatment Center (RTC)	7	Addendum E
Substance Use Disorder Rehabilitation Facility (SUDRF) Services For TRICARE/CHAMPUS Beneficiaries	7	Addendum C
Payment For Professional/Technical Components Of Diagnostic Services	5	5
Payment Reduction	3	4
Pharmacy Benefits Program - Cost Shares	2	Addendum B
Physician Assistants	1	6
Point Of Service Option	2	3
Postoperative Pain Management	1	10
Preferred Provider Organization (PPO) Reimbursement	1	25
Professional Services, Obstetrical Care	1	18
Prosthetics	1	11
Psychiatric Hospitals And Units Regional Specific Rates (FY 2005 - FY 2007)	7	Addendum A

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
R		
Reduction Of Payment For Noncompliance With Utilization Review Requirements	1	28
Regional Specific Rates For Psychiatric Hospitals And Units With Low TRICARE Volume (FY 2005 - FY 2007)	7	Addendum A
Reimbursement Administration	3	5
Reimbursement In Teaching Setting	1	4
Reimbursement Of		
Assistant Surgeons	1	17
Birthing Center	10	1
Certified Psychiatric Nurse Specialist	1	6
Covered Services Provided By Individual Health Care Professionals And Other Non-Institutional Health Care Providers	1	7
Emergency Inpatient Admissions To Unauthorized Facilities	1	29
Freestanding Ambulatory Surgical Center	9	1
Freestanding and Hospital-Based Birthing Center	10	1
Freestanding Psychiatric Partial Hospitalization Program	7	2
Individual Health Care Professionals And Other Non-Institutional Health Care Providers	3	1
Nurse Practitioners	1	6
Physician Assistants	1	6
Prime Travel Expenses	1	30
Psychiatric Partial Hospitalization Program Reimbursement For All Services Prior To June 1, 2007 And Thereafter, For Services Not Otherwise Reimbursed Under Hospital OPPS	7	2
Residential Treatment Center (RTC)	7	4
Substance Use Disorder Rehabilitation Facilities (SUDRF)	7	3
Residential Treatment Center (RTC) For Payment Of Services Provided On Or After		
10/01/2004	7	Addendum G (FY05)
10/01/2005	7	Addendum G (FY06)
10/01/2006	7	Addendum G (FY07)
Guidelines For The Calculation Of Individual RTC Per Diem Rates	7	Addendum F

R (Continued)

Residential Treatment Center (RTC) (Continued)

Participation Agreement	7	Addendum E
Reimbursement	7	4

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

INDEX	CHAPTER	SECTION
S		
Skilled Nursing Facility (SNF)		
Basic Requirements	8	Addendum A
Case-Mix Adjusted Federal Rates		
Associated Indexes - Rural		
FY 2005	8	Addendum F (FY05)
FY 2006 (01/01/2006 - 09/30/2006)	8	Addendum F (FY06)
FY 2006 (10/01/2005 - 12/31/2005)	8	Addendum F (FY06)
FY 2007	8	Addendum F (FY07)
Associated Indexes - Urban		
FY 2005	8	Addendum F (FY05)
FY 2006 (01/01/2006 - 09/30/2006)	8	Addendum F (FY06)
FY 2006 (10/01/2005 - 12/31/2005)	8	Addendum F (FY06)
FY 2007	8	Addendum F (FY07)
Labor And Non-Labor Component - Rural		
FY 2005	8	Addendum F (FY05)
FY 2006 (01/01/2006 - 09/30/2006)	8	Addendum F (FY06)
FY 2006 (10/01/2005 - 12/31/2005)	8	Addendum F (FY06)
FY 2007	8	Addendum F (FY07)
Labor And Non-Labor Component - Urban		
FY 2005	8	Addendum F (FY05)
FY 2006 (01/01/2006 - 09/30/2006)	8	Addendum F (FY06)
FY 2006 (10/01/2005 - 12/31/2005)	8	Addendum F (FY06)
FY 2007	8	Addendum F (FY07)
Criteria For Skilled Services And The Need For Skilled Services	8	Addendum B
Example Of Computation Of Adjusted PPS Rates And SNF Payment For FY 2007	8	Addendum D (FY07)
Fact Sheet Regarding Consolidated Billing And Ambulance Services	8	Addendum E
Illustration Of Per Diem Rate Calculations For SNF		
FY 2005	8	Addendum D (FY05)
FY 2006	8	Addendum D (FY06)
Letter To Skilled Nursing Facility (SNF) RE New Participation Agreement	8	Addendum I
Prospective Payment System (PPS)	8	2
Reimbursement	8	1
RUG-44 Category (RUG-III Before January 1, 2006)	8	Addendum C
RUG-53 Category (RUG-III Effective January 1, 2006)	8	Addendum C
Wage Indexes		
Rural Areas		
FY 2004	8	Addendum H (FY04)
FY 2005	8	Addendum H (FY05)
Rural Areas Based On CBSA Labor Market Areas		
FY 2007	8	Addendum H (FY07)
Transition Wage Indexes (Rural and Urban Areas)		
FY 2006	8	Addendum G (FY06)

S (Continued)

Skilled Nursing Facility (SNF) (Continued)		
Wage Indexes (Continued)		
Urban Areas		
FY 2005 (01/01/2005 - 09/30/2005)	8	Addendum G (FY05)
FY 2005 (10/01/2004 - 09/30/2005)	8	Addendum G (FY05)
FY 2005	8	Addendum G (FY05)
Urban Areas Based On CBSA Labor Market Areas		
FY 2007	8	Addendum G (FY07)
State Agency Billing		
Sample State Agency Billing Agreement	1	Addendum A
State Agency Billing	1	20
Substance Use Disorder Rehabilitation Facilities (SUDRFs)		
Reimbursement	7	3
TRICARE/CHAMPUS Standards For Inpatient		
Rehabilitation	7	Addendum D
Supplemental Insurance	1	26
Surgery	1	16

T

TRICARE/CHAMPUS DRG-Based Payment System

Adjusted Standardized Amounts

FY 2005	6	Addendum B (FY05)
FY 2006	6	Addendum B (FY06)
FY 2007	6	Addendum B (FY07)

DRG Weights

FY 2005	6	Addendum C (FY05)
FY 2006	6	Addendum C (FY06)
FY 2007	6	Addendum C (FY07)

TRICARE-Approved Ambulatory Surgery Procedures

On Or After 11/01/2003	9	Addendum B
On Or Before 10/31/2003	9	Addendum A