

## Chapter 1

## Section 7.1

### Primary Care Managers (PCMs)

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#### 1.0 POLICY

**1.1** TRICARE Prime enrollees shall select or have assigned to them PCMs according to guidelines established by the Military Treatment Facility (MTF) Commander/Enhanced Multi-Service Market (eMSM) Manager and Director, TRICARE Regional Offices (TROs).

**1.1.1** A PCM may be a network provider, or an MTF/eMSM PCM by name/supported by a team. If a group practice is listed as a network provider, all members of the group practice must be TRICARE-authorized providers.

**1.1.2** The following types of individual professional providers are considered primary care providers and may be designated PCMs, consistent with governing State rules and regulations: internists, family practitioners, pediatricians, General Practitioners (GPs), obstetricians/gynecologists (OB/GYNs), Physician Assistants (PAs), Nurse Practitioners (NPs), and Certified Nurse Midwives (CNMs).

**1.2** A TRICARE Prime enrollee must seek all his or her primary health care from the PCM with the exception of Clinical Preventive Services. If the PCM is unable to provide a primary care service, the PCM is responsible for referring the enrollee to another primary care provider. A TRICARE Prime enrollee must be referred by the PCM for specialty care or for inpatient care. **For mental health and Substance Use Disorder (SUD) care, all inpatient and outpatient services, except office-based, outpatient treatment provided by a network provider, require a referral. However, if the non-office based, outpatient mental health or SUD provider is a network provider, a request for preauthorization from the network provider to the contractor may be accepted in lieu of PCM referral.** Failure to obtain a PCM referral when one is required will result in the service being paid under Point of Service (POS) procedures with a deductible for outpatient services and cost-shares for in- and outpatient services.

**1.3** The PCM is responsible for notifying the contractor that a referral is being made. The contractor will assist the Prime enrollee in locating an MTF/eMSM or network provider to provide the specialty care and in scheduling an appointment. Additionally, the contractor will conduct a prospective review and authorize the service in accordance with the contractor's best practices.

#### 2.0 EXCEPTIONS

PCM referral is not required for the following services:

**2.1** Services provided directly by the PCM.

**TRICARE Policy Manual 6010.60-M, April 1, 2015**

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- 2.2** Emergency care.
- 2.3** Services provided as part of the comprehensive clinical prevention program offered to Prime enrollees.
- 2.4** Outpatient, office-based, mental health and Substance Use Disorder (SUD) visits.

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