

## 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.

**2.5** Physical Therapy/Occupational Therapy (PT/OT) services referred by a network podiatrist as set forth in Chapter 8, Section 11.1, paragraph 2.5.

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