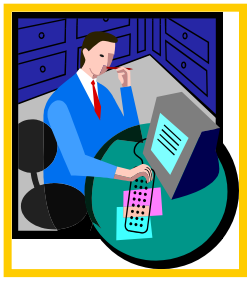
TRICARE Processing Flow Chart

(New Patients or Patients with changed Eligibility only)

TRICARE contacted to verify patient is eligible for care as a TRICARE Patient.

Clerk enters Patient info into VistA using Registration screens.
(New Patients or Patients with changed Eligibility only)

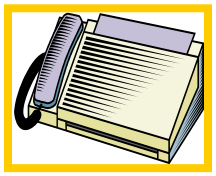


TRICARE ELIGIBILITY
Patient Type: TRICARE
Veteran (Y/N)? N
Primary Eligibility Code: TRICARE/CHAMPUS
Secondary Eligibility Code: (optional)
Period of Service: T – Other/Non Veteran

DUAL ELIGIBILITY – Veteran Primary/TRICARE Secondary
Patient Type: NSC VETERAN
Veteran (Y/N)? Y
Primary Eligibility Code: NSC VETERAN
Secondary Eligibility Code: TRICARE/CHAMPUS
Period of Service: Veteran's Period Of Service (WWII, VIETNAM ERA, PERSIAN GULF WAR, etc.)

ACTIVE DUTY
Patient Type: ACTIVE DUTY
Veteran (Y/N)? N
Primary Eligibility Code: SHARING AGREEMENT
Secondary Eligibility Code (optional): TRICARE/CHAMPUS
Period of Service: (SERVICE NAME – ACTIVE DUTY)

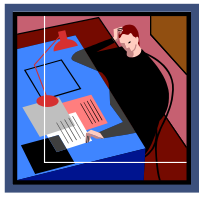
TRICARE Health Care Finder (HCF) contacted to obtain authorization for patient to receive specialty care.



Patient receives treatment. Care documented in medical record.

Utilization Review Nurse coordinates care and communication.

Biller creates and authorizes TRICARE bill.



Accounts Receivable Technician audits bill.

Receives/Analyzes EOB from TRICARE.
Processes payment.
Initiates appeal if necessary.

Forwards Patient Cost Share, Copayment, and Deductible info to Billing (if appropriate).

Biller creates and authorizes Patient bill(s) for Cost Share, copayment, and deductible.