The Military Medical Support Office (MMSO) is located on Naval Station Great Lakes, IL. MMSO supports remotely located Active Duty, Reservist, and National Guard service members in the Army, Navy, Marine Corps, Air Force, and Coast Guard who must receive health care through civilian health care systems. MMSO also provides support to other service member populations such as new acquisitions en route to their first permanent duty station.

MMSO functions include, but are not limited to, authorization of specialty medical care, dental care, and claim payment determinations. These functions are outlined in this brochure and may be found in detail on the MMSO website.

DEERS REGISTRATION CRITICAL!

Errors in the DEERS database can cause problems with health/dental preauthorizations and claim payments, so it is critical to maintain your DEERS information!

Mailing Address:

Jan '08

Officer-In-Charge Military Medical Support Office P.O. Box 886999 Great Lakes, IL 60088-6999

Toll Free Number: 888-647-6676 Commercial: 847-688-3950

DSN: 792-3950

Web site: http://www.tricare.mil/mmso

Military Medical Support Office



MMSO Operations Brochure

GREAT LAKES, ILLINOIS





RESERVE PHARMACY REIMBURSEMENT

Reservist or National Guard members who have pre-paid or have been billed for pharmaceuticals in conjunction with a LOD injury or illness, should follow these steps to be reimbursed.

Note: Most over-the-counter drugs and any non-covered pharmaceuticals will not be reimbursed.

Follow these steps:

Member completes and signs a CHAMPUS Claim-Patient's Request for Medical Payment, DD 2642; and MMSO Medical Eligibility Verification form, MMSO Form 01. (form is on our website)

Member FAXs or mails the DD 2642, pharmacy invoice, LOD, and MMSO Medical Eligibility Verification form to the below address or FAX to 847-688-6460.

Make sure the claim printout/paid pharmacy invoice contains the following information:

- Drug Name
- National Drug Code (NDC) number
- Quantity
- Cost share or amount charged
- Date of service, and
- Name of Retail Pharmacy

Military Medical Support Office Attn: RC Retail Pharmacy Reimbursement P.O. Box 886999 Great Lakes, IL 60088-6999

APPEALS

Active Duty not TRICARE enrolled to an MTF, Reservist and National Guard members (with an approved LOD) may submit an appeal to MMSO to request payment of a previously denied health/dental care bill or denied pre-authorization for health/dental care. *Note: All medical treatments must be medically necessary.*

Follow these steps:

Contact unit medical representative to ensure the decision was made by MMSO and not by a MTF.

Unit medical representative contacts appropriate MMSO service point of contact to ensure denial of the pre-authorization or claim was not made in error:

Unit medical representative assists the member in developing and mailing the appeal request package to MMSO at the below address:

Appeal Package must consist of:

Formal Appeal Request Form, MMSO-0)4
(form is on our website)	

- Copy of the Explanation of Benefits (EOB), if applicable
- ADA Claim Form or radiographs (if applicable)
- ☐ If reservist, copy of LOD (if not on file at MMSO)

Military Medical Support Office Attn: (branch of service or Dental) Appeals

P.O. Box 886999

Great Lakes, IL 60088-6999

LINE OF DUTY PROCESS

Line of Duty (LOD) documents legally authorize Reservist and National Guard members who were injured or became ill while in a duty status to receive health care at government expense.

MMSO is responsible for managing civilian LOD health care for Reservist and National Guard members who reside 50 miles or more from a Military Treatment Facility (MTF).

Follow these steps:



Respective service issues the LOD.



Unit medical representative completes MMSO Medical Eligibility Verification form, MMSO Form 01. (form is on our website)

Unit medical representative mails or FAXs the LOD, copy of orders, or drill attendance sheet along with MMSO Medical Eligibility Verification form to the following address/FAX:

Military Medical Support Office Attn: Reserve Eligibility P.O. Box 886999 Great Lakes, IL 60088-6999

FAX: 847-688-6138 or 6460

OUT-OF-POCKET REIMBURSEMENT

Active duty, Reservist and National Guard members who pre-paid for medical care may be reimbursed. However, they must be eligible in DEERS, or Reservist and National Guard member must have eligibility documentation on file at MMSO for the illness or injury. Please note that all health care must be a covered benefit and medically necessary.

Follow these steps:



Member completes and signs a CHAMPUS Claim - Patient's Request for Medical Payment, DD Form 2642.

Forward the DD Form 2642, bill, and proof of payment (i.e. copy of paid receipt, cancelled check, credit card statement, etc) to the appropriate Managed Care Contractor for your region:

North Region Claims - PGBA

P.O. Box 870140 Surfside Beach, SC 29587-9740 1-877-874-2273



TRICARE South Region

Claims Department P. O. Box 7031 Camden, SC 29020-7031 1-800-403-3950

WPS/West Region Claims

P.O. Box 77028 Madison, WI 53707-7028 1-888-874-9378

PRE-AUTHORIZATION REQUEST

MMSO is responsible for pre-authorizing remote health care for eligible Reservist and National Guard members who have been injured or became ill while in a duty status. *Note: An LOD must be on file at MMSO prior to requesting non-emergent care.*

Follow these steps:

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Find a TRICARE Network Provider who can provide the care. *Note: Use the TRICARE Provider Directory to locate a Network Provider.*



Obtain a treatment care plan from the Network Provider.

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Member and unit medical representative complete a Pre-Authorization Request for Medical Care, MMSO Form 02, and sends the treatment plan and MMSO Form 02 to the following FAX or address:

Military Medical Support Office Attn: Medical Pre-Authorizations P.O. Box 886999 Great Lakes, IL 60088-6999

FAX: 847-688-7394

DEBT COLLECTION

MMSO Debt Collection Assistance Officer (DCAO) will advocate for the Active duty, Reservist, and National Guard members who are TPR eligible or have a valid LOD managed by MMSO to resolve debt collection issues.

Follow this step:



Member completes and mails or FAXs the following documentation to MMSO DCAO:

- Authorization For Disclosure of Medical or Dental Information, DD Form 2870
- Notice of the Role of the DCAO form (form is on our website)
- ☐ Copy of the final notice letter from the collection agency/credit bureau, stating this information has been noted on the member's credit report
- LOD (if appropriate)

Military Medical Support Office Attn: Debt Collection Action Officer P.O. Box 886999 Great Lakes, IL 60088-6999

FAX: 847-688-2134













