



TRICARE provider news

Up-to-the-minute information for
TRICARE® providers in the East Region

ISSUE #1 | 2025

Get familiar with the changes for the newest TRICARE East Region contract!



Humana Military's new contract for the TRICARE East Region began on January 1, 2025. While many processes and systems remain the same, some of the highlighted changes include*:

Claims updates

Beginning January 1, 2025, Humana Military's claims processor will be PGBA LLC. How does this impact you? Please find the process changes for claims and authorizations and claims-related processing:

- EDI claims: The 2025 TRICARE East Payer ID is 99727.
- Claims-related document submissions:
 - XPressClaims will be the online claims-related document submission system beginning January 1, 2025, and will be available in provider self-service.
 - For the clearinghouse, new direct submitters must file a trading partner agreement and enrollment form to be assigned a mailbox/submitter ID. If your clearinghouse already files claims to PGBA for other lines of business, you need to ensure that the TRICARE East payer ID 99727 is made available as an option. If your clearinghouse does not submit to PGBA, providers, vendors or clearinghouses that can create an ANSI X12 electronic file, and have telecommunications capabilities, files can be uploaded to PGBA directly. Batch claims processing is available through our EDI Gateway mailbox system. More

resources to come for how to submit claims-related documents. Providers must file a PGBA EDI Provider Agreement to submit claims electronically.

- Document and claims submission during payer transition:
 - For claims with 2024 Dates of Service (DOS):
 - From January 1, 2025, to April 30, 2025, the current payer organization (WPS) will continue to process claims with a 2024 DOS. After April 30, 2025, claims with a 2024 DOS will no longer be accepted via 2024 processes. To assist with processing a 2024 claim to completion prior to April 30, 2025:
 - Submit payer requested claim documentation timely.
 - Submit claim requests/disputes related to claim denials timely to allow for current payer processing.
 - Beginning May 1, 2025, submit 2024 claims and claims-related documents to XPressClaims through provider self-service or the clearinghouse.

Providers should sign up for [ERA/EFT](#) to ensure timely receipts of remittances and payments. Even if you have EFT/ERA currently, you will need to sign up again for EFT/ERA by January 1, 2025. **Please note:** T17 EFT/ERA applications will not be accepted after January 1, 2025.

*Not all contract changes are listed. See [provider updates](#) for more information.



TRICARE Select claims



As a reminder, providers should accept assignment on their TRICARE Select claims to receive payment directly instead of to the beneficiary. At the time of the visit, just collect any copayments, cost-shares or deductibles from the beneficiary and the remaining TRICARE-allowable amount will be sent directly to you. To get more information and see reimbursement rates for your TRICARE patients you see, visit [Rates and Reimbursements](#).

Paper claim submissions



We encourage submitting claims electronically to save time and money. When choosing the option to submit by paper, the non-network provider's signature or an acceptable facsimile is required on all participating claims. Providers who elect to use a facsimile signature on a TRICARE claim, or have a representative sign on his or her behalf, must have a notarized signature authorization on file with us. If a claim does not contain an acceptable signature, or there is no signature authorization on file, the claim will be returned. Providers may use the Authorized Signer form to meet this requirement. Review [TRICARE Operations Manual \(TOM\), Ch. 8, Sec. 4](#) for additional information.

Note: The provider's signature block Form Locator (FL) has been eliminated from the CMS 1450 UB-04. As a work around, the National Uniform Billing Committee (NUBC) has designated FL 80, "Remarks", as the location for the signature, if signature on file requirements do not apply to the claim.

Keep your provider information accurate!



Keeping your information up-to-date in our directory helps ensure TRICARE beneficiaries can easily find you and your practice. Accurate data also guarantees that claims payments reach you and that referrals can be assigned to you appropriately.

The Defense Health Agency (DHA) requires providers to update their data at least every six months. Providers who do not update their data, are required to be removed from the directory.

Our eShare tool was created for the purpose of easier and more streamlined demographic data submissions by roster. The eShare platform allows for:

- Controlling how your data appears in Humana Military's directory
- Designating only those staff members you want to have access to the account
- Obtaining instant confirmation that your submission has been accepted and receiving alerts and instructions if additional information is needed.

Most updates are completed in 48 hours!

If you would like to sign up for **eShare** and schedule a demonstration, contact your TRICARE representative in provider self-service.

[Create a self-service account or view webinars and other resources.](#)

Changes to the Autism Care Demonstration (ACD) beginning January 1, 2025



Humana Military's new contract for the TRICARE East Region began on January 1, 2025. Changes to the ACD effective January 1, 2025 include:

- ACD TOM moved from Chapter 18 Section 4 to Chapter 18 Section 3 for T5
- CPT code 97158 will require minimum of 1 hour (4 units) to authorize
- 8.11.6.1.6.7 The contractor shall only authorize CPT code 97158 units at a minimum of four, 15-minute units (one hour) and shall not exceed six, 15-minute units (1.5 hours) per day.

In addition, Applied Behavior Analysis (ABA) providers should be aware that as of January 1, 2025, all TRICARE ACD beneficiaries are now assigned Autism Services Navigators (ASN). Retirees who did not qualify for care management are now required to enroll with an ASN as of January 1.

- 6.1 The contractor shall assign an autism-specific care manager known as the ASN (see paragraph 11.11) to each beneficiary participating in the ACD who serves as the primary advocate for the beneficiary and family.

Other changes to the referring provider section include:

- 11.13.1 ASD diagnosing and referring providers include: TRICARE-authorized PCMs and specialized ASD diagnosing providers. TRICARE authorized PCMs for the purposes of the diagnosis and referral include: TRICARE authorized pediatrician, family medicine physicians, and pediatric or family Nurse Practitioners (NPs). Authorized specialty ASD diagnosing providers include: TRICARE-authorized physicians board-certified or board-eligible in developmental-behavioral pediatrics, neurodevelopmental pediatrics, child neurology, child psychiatry; doctoral-level licensed clinical psychologists, or board certified Doctors Of Nursing Practice (DNP). For DNPs credentialed as developmental pediatric providers, dual American Nurses Credentialing Center (ANCC) board certifications are required as follows: 1) either a

pediatric NP or a family NP; and 2) either (Family, or Child/Adolescent) Psychiatric Mental Health Nurse Practitioner (PMHNP) or a (Child/Adolescent) Psychiatric and Mental Health Clinical Nurse Specialist (PMHCNS).

- 11.13.2 For DNPs credentialed as psychiatric and mental health providers, single ANCC board certification is required as follows: as either a (Family or Child/Adolescent) PMHNP or a PMHCNS.
- 11.13.3 Diagnoses and referrals from Physician Assistants (PAs) or other providers not having the above qualifications shall not be accepted.
- 11.13.4 Co-signature from an approved ASD diagnosing/referring provider is required when a requirement is completed by non-approved ASD diagnosing/referring providers as defined in paragraph 11.13.

Note: Adult beneficiaries participating in the ACD who age out of the diagnosing/referring provider pediatric scope of practice may only be diagnosed/referred by a clinical psychologist.





Expansion of Assisted Reproductive Technology (ART) benefits

In March, TRICARE [updated its policy](#) on Assisted Reproductive Technology (ART) for qualifying Active Duty Service Members (ADSM) with a Category II or III illness through the extended benefits authorized under 10 USC 1074(c)(4) under the Supplemental Health Care Program (SHCP). Now, in addition to the qualifying service member and their spouse, the following people may also receive ART services for the service member's benefit:

- TRICARE-enrolled unmarried partners
- TRICARE-enrolled third-party gestational carriers (if not being paid)

To obtain benefits for these parties, the referring provider must complete a DHA 407 form into the Electronic Health Record (EHR) for the service member and the TRICARE-enrolled designee(s) and place a referral for the specific ART service being requested under the SHCP extended benefit.

It's important to note, that if an authorization is on file, the provider cannot charge the beneficiary for services upfront.

For more information, visit the [TRICARE Operations Manual \(TOM\) Ch. 17, Sec. 3](#). You can also read more at [TRICARE.mil](#).

Provider readiness designation (mental health)

The Provider Readiness Designation in our directory highlights mental health providers who are familiar with military culture and evidence-based treatments. This

includes a wide range of professionals such as psychiatrists, psychologists, psychiatric nurse specialists, clinical social workers, marriage and family therapists, mental health counselors, and pastoral counselors under a physician's supervision. It's important to note that this designation does not extend to the TRICARE Overseas Program (TOP).

To earn this designation, providers must complete four specific courses offered by the Center for Deployment Psychology at the Uniformed Services University of the Health Sciences:

- Military Culture: Core Competencies for Health Care Professionals (Module 1)
- Cognitive Processing Therapy for PTSD in Veterans and Military Personnel
- Prolonged Exposure Therapy for PTSD in Veterans and Military Personnel
- Depression in Service Members and Veterans

Mental Health care providers who have earned the Department of Defense (DoD) TRICARE Provider Readiness Designation (TPRD), as indicated by a check mark icon, have specific knowledge of military culture and awareness of evidence informed treatments for mental health concerns common among members of the Armed Forces.

Upon completion, Humana Military will receive a quarterly list from the DoD to be recognized in our provider locator with the readiness designation.