Humana Military | TRICARE®



TRICARE provider news

ISSUE 4 | 2026

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

Childbirth and Breastfeeding Support Demonstration extended through December 31, 2031

TRICARE recently announced that the Childbirth and Breastfeeding Support Demonstration (CBSD) has been extended through December 31, 2031.

This demonstration allows Certified Labor Doulas (CLD), lactation consultants or lactation counselors to provide care to eligible beneficiaries. This extension allows these beneficiaries to continue accessing childbirth and breastfeeding support services under the demonstration.

No other changes regarding the demonstration are being announced at this time. Providers and beneficiaries should continue to follow current CBSD guidance and requirements.

For more information, refer to the TRICARE Operations Manual (TOM), Ch. 18, Sec. 11 and Childbirth and Breastfeeding Support Demonstration (CBSD) page.



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TRICARE East vaccine coverage and access

Vaccines help protect TRICARE beneficiaries from serious illness. They may also make symptoms less severe if someone gets sick. The TRICARE pharmacy benefit covers age-appropriate vaccines recommended by the Centers for Disease Control and Prevention (CDC). Coverage is updated when the CDC recommends new vaccines.

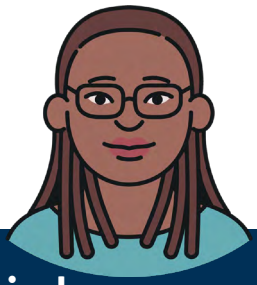
TRICARE beneficiaries can get covered vaccines at:

- **Military hospitals or immunization clinics**
  Beneficiaries can get covered vaccines at military hospitals or clinics. Before visiting, they should check whether the vaccine they need is available. Find a military hospital or clinic that offers vaccines.
- **TRICARE network retail pharmacies**
  Covered vaccines are free when given by a pharmacist at a participating network retail pharmacy. Beneficiaries can find a pharmacy near them and should contact the pharmacy before they go to make sure the vaccine is available. **Note:** A pharmacist must administer the vaccine. If another type of provider gives the vaccine at a pharmacy, out-of-pocket costs may apply.
- **Civilian and TRICARE-authorized providers**
  Beneficiaries may also get vaccines from civilian and TRICARE-authorized providers . TRICARE covers vaccines at no cost, but copayments or cost-shares may apply for the office visit or for other services received during the visit. Amounts are based on the beneficiary's TRICARE plan.



These options help beneficiaries get CDC-recommended vaccines at a location that works best for them.

For more information about TRICARE-covered vaccines and where to get them, visit Express Scripts' Vaccine Resource Center.



Claims submission reminder

Network providers should submit claims using the online portal. If the provider chooses to submit via physical mail, there could be substantial delays to processing. Please submit future claims on the Claims page to ensure claims are processed quickly.

Below, view the life cycle of a claim to understand the steps required.

Life cycle of a claim

1. Verify eligibility and benefits
2. Assign standardized medical codes
3. Submit to Humana Military for processing
4. Humana Military reviews and evaluates the claim
5. Reimbursement and billing
6. Appeals

2027 Autism Care Demonstration (ACD) audit education process updates

Starting in 2027, audits identified as 2027 ones and conducted in year three of the contract, will include updates to the provider education process.

Existing providers who pass their annual audit with a score of 85% or higher will no longer receive an education call unless a recoupment is identified as part of the audit findings. Instead, these providers will only receive an education letter that includes an extract of the errors identified during the audit.

The TRICARE Operations Manual (TOM) mandates new providers receive audit review of submitted claims. Results of this audit are shared with the new autism corporate service providers (ASCP)/sole provider to deliver educational content and address inconsistencies with program requirements. This process will continue for new providers.

Documentation reminder: Rendering provider signature and date

Providers are reminded that medical documentation/session notes must include the signature of the rendering provider with the date signed, as outlined in TRICARE Operations Manual (TOM), Ch. 18, Sec. 3.

While the TOM does not specifically state that a signature must be legible, auditors must be able to validate that the individual who signed the medical documentation/session note is the same individual who rendered the service. Initials may be accepted when they can be clearly associated with the rendering provider.

If a signature or initials are unclear, providers are encouraged to include a typed name alongside the signature. This helps support audit validation and confirms that the session note was signed by the actual rendering provider, rather than another individual.



Keep your 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 you to:

- Control how your data appears in Humana Military's directory
- Designate only those staff members you want to have access to the account
- Obtain instant confirmation that your submission has been accepted and receive 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.

Avoid mistakes when submitting claims!

When verifying patient eligibility and submitting claims, providers must use the correct patient identifier in provider self-service: either the 11-digit Department of Defense Benefits Number (DBN) or the 9-digit sponsor social security number (SSN), along with the patient's date of birth. Eligibility checks and claim submissions will be rejected if the ID and date of birth do not match.



Both network and non-network providers can save time by using provider self-service tools to verify eligibility and submit electronic claims. Providers can find guidance on locating the DoD Benefits Number on the back of the patient's ID card on the Eligibility page.

Providers should also review common electronic data interchange (EDI) submission errors that may cause delays or rejections, including:

- Submitting duplicate claims that have already been paid
- Submitting duplicate claims of ones submitted already in the same day
- Submitting imbedded blanks in the sponsor's name
- Submitting invalid patient last names
- Submitting total charges and line charges of zero

Discover more on the Claims page.

Check us out on Facebook!

Be sure to follow us on Facebook to get all the latest from Humana Military and TRICARE East: Facebook.com/HumanaMilitary



Provider plug-in

GET PLUGGED IN ON TRICARE CERTIFICATION APPLICATIONS!

Providers **must** be TRICARE-certified to file claims and receive payment for TRICARE services. Certified providers must meet the licensing and certification requirements of TRICARE regulations and practice for that area of healthcare.

Provider certification FAQs

View application status

TRICARE participation required provider types

