



## THE ASSISTANT SECRETARY OF DEFENSE

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WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

MAY 02 2013

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER AND  
RESERVE AFFAIRS)  
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND  
RESERVE AFFAIRS)  
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER  
AND RESERVE AFFAIRS)  
HEALTH AND SAFETY DIRECTOR OF THE COAST  
GUARD

SUBJECT: Waiver of Primary Care Manager Referral Requirements for the TRICARE West  
Region Beneficiaries

Start-up issues with the new TRICARE West Region contract are preventing a large number of TRICARE Prime beneficiaries from obtaining timely access to specialty care. TRICARE Prime enrollees are experiencing inordinate delays in obtaining authorizations for care to which they have been referred by their Primary Care Managers (PCMs). Enrollees who obtain specialty care without an authorization to do so are normally subject to point-of-service (POS) charges. Due to the TRICARE West Region contractor's failure to meet the contract requirements for referral and authorization management, it is necessary to grant a limited-time waiver so that TRICARE Prime enrollees in the Region who receive a referral for specialty care from their PCMs, but not an authorization for the care from the contractor, may obtain the care without incurring POS charges.

As a result of these extraordinary circumstances, and in order to provide needed assistance to TRICARE beneficiaries affected by this current situation, it is necessary for the Department of Defense to make a limited, temporary change to the existing rule for PCM referral authorizations under TRICARE Prime. TRICARE requires PCM referrals in certain cases for TRICARE Prime and TRICARE Prime Remote enrollees under Title 32, Code of Federal Regulations (CFR), Part 199.17 (n) (2) (ii) (B), and Title 32, CFR, Part 199.16 (e) (4). Given the contract start-up issues and the need to respond quickly to the medical needs of TRICARE beneficiaries in the TRICARE West Region, the portion of the TRICARE regulation noted above, is temporarily waived.

For West Region TRICARE Prime enrollees, the waiver of the requirement for having an authorization for specialty care applies to any referrals obtained for care received subsequent to March 31, 2013 and prior to May 18, 2013, or for other care received during this period. This waiver may be extended if necessary.