



# RODRIGUEZ ARMY HEALTH CLINIC

## Understanding Your Referral Process

REFERRAL PROCESS STEPS	Phase 1 Referral	Phase 2 Authorization	Phase 3 Appointment	Phase 4 Documents	Phase 5 Continuity of Care
<p><b>A Primary Care Provider (PCM) determines the medical need for referring an eligible beneficiary to a TRICARE Network Specialist.</b></p> <p><b>Eligible beneficiaries are:</b></p> <ul style="list-style-type: none"> <li>- TRICARE Overseas Prime</li> <li>- Transitional Assistance Management Program (TAMP) 180 days</li> <li>- Temporary Disability Retirement List (TDRL)</li> <li>- Line of Duty (LOD) with Unit Memorandum within 30 days &amp; during the following 12 months for an approved LOD condition</li> </ul>	<p>A referral to a Specialist could be Urgent or Routine.</p> <p>URGENT referral – Immediately after your visit with a PCM <b>AND</b> prior leaving the clinic, the Managed Care (MC) Nurse will assist you by coordinating the appointment (appt) and authorization for Urgent Specialty Care</p> <p>ROUTINE referral - MC staff reviews the referral and sends to ISOS within 24hrs to process for authorization</p> <p><b><u>Before leaving the clinic,</u></b> verify that all your contact information (phone, email address, etc.) are current</p>	<p>Authorizations are issued by ISOS. After reviewing your eligibility, covered-benefits and medical information, ISOS emails your Authorization Letter (or denial) to your email and sends a copy to RAHC.</p> <p>If you don't receive it within 72hrs of your appt, call ISOS at 877-451-8659 to obtain the authorization or for questions regarding your authorization, the assigned provider or location</p> <p>Upon request, ISOS can change provider and location assigned</p>	<p>Make an appointment with the assigned TRICARE Network provider; provider's information is on the Authorization Letter.</p> <p>Go to the appointment with your authorization in-hand. Failure to bring your authorization may result on denied care.</p> <p>After the appointment with a network provider, always request copy of the medical documents / recommendations.</p>	<p>Forward your medical documents to your PCM through:</p> <ul style="list-style-type: none"> <li>- Relay Health Secure Messaging</li> <li>- Ask the Network Provider to forward them directly to RAHC through fax or email</li> <li>- <b>e-fax: 855-410-0653</b></li> <li>- <b>email: 8554100653@amedd.labusa.com</b></li> </ul> <p>Medical documents must be forwarded to your PCM for Continuity of Care and to be added to your Electronic Health Record (EHR)</p>	<p>When referred Network services are completed, contact your PCM through Relay Health Secure Messaging to verify that all medical documentation has been uploaded into your EHR, and follow your PCM's guidance.</p> <p>Referral will be closed.</p> <p><b><u>ALWAYS</u></b> verify if you need a Referral for any additional healthcare services.</p>
<p><b>TIMEFRAME</b></p> <p><b><u>Additional Information</u></b></p> <p><b>EMERGENCY CARE - Go to the nearest Emergency Room. Call ISOS within 24hrs. Inform your PCM.</b></p> <p><b>URGENT CARE - Call your PCM team during clinic business hours.</b></p> <p><b>For AFTER-HOURS CARE call International SOS (ISOS) Medical Assistance line at 215-942-8320</b></p>	<p><b>Referrals are reviewed/transmitted within 24hrs</b></p> <p>LOD Referrals are issued <b><u>ONLY</u></b> for approved LOD conditions on Memorandum</p> <p>Labs and Radiology services need a Medical Order; some services may need a referral</p> <p>Some Preventive Services do not need referrals; verify with RAHC Health Benefits Advisors</p>	<p><b>Authorizations are issued by ISOS within 72hrs</b></p> <p>Read your Authorization carefully. Your authorization:</p> <ul style="list-style-type: none"> <li>- Expires in 90 days</li> <li>- Is for a specific service</li> <li>- Specific number of visits</li> </ul> <p>If your authorization expires, you will have to request an appt with your PCM to determine if a new referral is needed</p>	<p><b>Appointments within 10 days &amp; before authorization expires in 90 days</b></p> <p>Make your appointment within 10 days.</p> <p>Request copies of the medical documents at each visit. If you wait until the treatment is complete, you might be charged for the medical record.</p>	<p><b>Documents to PCM within 10 days of visit to Specialist</b></p> <p>AudioCare Referral Telephone Reminder will automatically call beneficiaries that have not utilized their referral and have not provided the medical documentation from their Network Provider visit to their PCM.</p>	<p><b>Per PCM guidance</b></p> <p><b>Follow-up Appointments</b> can be obtained through:</p> <ul style="list-style-type: none"> <li>- TRICARE On Line (TOL)</li> <li>- Relay Health Secure Message</li> <li>- RAHC Appointment line at 787-707-4393</li> </ul>
<p><b>WHO DO I CONTACT ?</b></p>	<p>For Referrals, call RAHC Managed Care <b><u>Health Benefits Advisor 787-707-2028 / 4053</u></b></p>	<p>For Authorizations, call <b><u>International SOS at 877-451-8659</u></b></p>	<p>For appointments, call TRICARE Network Provider assigned on the authorization</p>	<p>For documents, ensure to obtain medical documents from Network Provider</p>	<p>For Follow up Care, contact your PCM team through Relay Health Secure Messaging</p>