



TRICARE South Region  
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Fax 803-403-2688

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www.myTRICARE.com or HHS

State Vaccine Program  
Participation Agreement

## TRICARE STATE VACCINE PROGRAM APPLICATION

### TRICARE PARTICIPATION AGREEMENT FOR STATE VACCINE PROGRAMS (SVPs)

In order to receive payment under TRICARE, \_\_\_\_\_  
aka \_\_\_\_\_, as the provider of services agrees:

1. Not to charge a beneficiary for the following:
  - a) Services for which the provider is entitled to payment from TRICARE;
  - b) Services for which the beneficiary would be entitled to have TRICARE payment made had the provider complied with certain procedural requirements;
  - c) Services not medically necessary and appropriate for the clinical management of the presenting illness, injury, disorder or maternity;
  - d) Services for which a beneficiary would be entitled to payment but for a reduction or denial in payment as a result of quality review; and
  - e) Services rendered during a period in which the provider was not in compliance with one or more conditions or authorization.
2. To comply with applicable provisions of 32 CFR 159 and related TRICARE policy;
3. To accept the TRICARE determined allowable payment combined with the cost-share, deductible, and other health insurance amounts payable by, or on behalf of, the beneficiary, as full payment for TRICARE allowed services;
4. To permit access by the Director, DHA, or designee, to the clinical record of any TRICARE beneficiary, to the financial and organizational records of the provider, and to reports of evaluations and inspections conducted by state or private agencies or organizations; (this requirement may not apply to a SVP participation agreement);
5. To provide to the Director, DHA, or designee (e.g., Managed Care Support Contractor), prompt written notification of the provider's employment of an individual who, at any time during the twelve months preceding such employment, was employed in a managerial, accounting, auditing, or similar capacity by an agency or organization which is responsible, directly or indirectly, for decisions regarding Department of Defense payments to the provider;
6. To cooperate fully with a designated utilization and clinical quality management organization which has a contract with the Department of Defense for the geographic area in which the provider renders services;
7. Comply with all applicable TRICARE authorization requirements before rendering designated services or items for which TRICARE cost-share/copayment may be expected;

# Tricare South Region Provider Manual Dme

**United States. Congress. House.  
Committee on Ways and Means**

## **Tricare South Region Provider Manual Dme:**

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Hospital Billing and Coding 3rd Edition helps you understand complete and submit the UB 04 claim form that is used for all Medicare and privately insured patients It describes how hospitals are reimbursed for patient care and services showing how the UB 04 claim form reflects the flow of patient data from the time of admission to the time of discharge Written by coding expert Debra P Ferenc this book also ensures that you understand the essentials of ICD 10 CM and develop skills in both inpatient coding and outpatient ambulatory surgery coding UB 04 Claim Simulation on the companion Evolve website lets you practice entering information from source documents into the claim form Over 300 illustrations and graphics bring important concepts to life Detailed chapter objectives highlight what you are expected to learn Key terms acronyms and abbreviations with definitions are included in each chapter Concept Review boxes reinforce key concepts Test Your Knowledge exercises reinforce lessons as you progress through the material Chapter summaries review key concepts Practice hospital cases let you apply concepts to real life scenarios Updated Claim Forms chapter covers the UB 04 claim form Updated information covers diagnosis and procedural coding with guidelines and applications Updated claim forms and names are used throughout *Uniformed Services Almanac, 2007, 2007* **MR, 2003** **Commerce Business Daily**, 1999-08 Congressional Record United States. Congress, 2003 The Congressional Record is the official record of the proceedings and debates of the United States Congress It is published daily when Congress is in session The Congressional Record began publication in 1873 Debates for sessions prior to 1873 are recorded in The Debates and Proceedings in the Congress of the United States 1789 1824 the Register of Debates in Congress 1824 1837 and the Congressional Globe 1833 1873 **Defense health care disability programs need improvement and face challenges : report to congressional committees** , Health Insurance Today - E-Book Janet I. Beik, 2014-04-04 With an emphasis on preparing and filing claims electronically Health Insurance Today 4th Edition features completely updated content on ICD 10 coding ARRA HI TECH Version 5010 electronic health records the Health Insurance Reform Act and more The friendly writing style and clear learning objectives help you understand and retain important information with review questions and activities that encourage critical thinking and practical application of key concepts Clear attainable learning objectives help you focus on the most important information What Did You Learn review questions allow you to ensure you understand the material already presented before moving on to the next section Direct conversational writing style makes reading fun and concepts easier to understand Imagine This scenarios help you understand how information in the book applies to real life situations Stop and Think exercises challenge you to use your critical thinking skills to solve a problem or answer a question HIPAA Tips emphasize the importance of privacy and following government rules and regulations Chapter summaries relate to learning objectives provide a thorough review of key content and allow you to quickly find information for further review Key coverage of new topics includes medical identity theft and prevention National Quality Forum NQF patient safety measures ACSX12 Version 5010 HIPAA transaction standards EMS rule on mandatory electronic claims submission and standards and

implementation specifications for electronic health record technology Increased emphasis on producing and submitting claims electronically gives you an edge in today's competitive job market UPDATED Additional ICD 10 coding content prepares you for the upcoming switch to the new coding system NEW Content on ARRA HI TECH and the Health Insurance Reform Act ensures you are familiar with the latest health care legislation and how it impacts what you do on the job

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