



28th Medical Group In-Processing Guide



Welcome to the 28th MDG!

Our Mission

Multi-Capable Medics generating total force readiness and high reliability healthcare

Our Vision

Comprehensive, integrated healthcare cultivating ready forces for global strike and nuclear deterrence



*Trusted Care, Anytime,
Anywhere*

Medical In-Processing Checklist

Welcome to Ellsworth Air Force Base! Below, you will find a checklist of the items that you will need to complete for your medical group in-processing. You MUST follow this checklist in the order listed below to prevent any delays. **This checklist is intended to guide you through your medical in-processing and will not be collected upon completion.**

- 1)_____ Contact TRICARE West for enrollment with the 28th Medical Group.
 - Enroll ADSM and all dependents at Ellsworth AFB. – **Instructions on page #12**
 - 2)_____ Contact Tricare Operations and Patient Administration (TOPA) to register in MHS Genesis.
 - Call or visit Patient Admin (385-3219) to register in MHS Genesis **after** enrollment to the 28th Medical Group through TRICARE West.
 - Register for MHS Genesis Patient Portal – **Instructions on page #13**
 - 3)_____ Flight Medicine (FM)
 - Call or visit the Flight Medicine (385-3002) clinic for a review of your IMR requirements.
 - 4)_____ Dental Clinic
 - Call or visit the dental clinic (385-3657) for a review of your IMR requirements.
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NOTE: AFMAN 41-210; 4.4.2. Provide patients or their designated representatives' access to their health records upon written request. **The original record is always retained at the MTF, but copies will be provided if requested.**



Welcome to the 28th Medical Group!

Clinic Hours: 0730 – 1630, M, T, Th, Fr
Wed: 0730-1130

To schedule an appointment

- Call the Appointment Line: 605-385-6700

NOTE: A referral is required for Active Duty Service Members (ADSMs) to be seen at an urgent care clinic. Please call appointment line. Referral not required for emergency services (ER).

Services offered at the MTF

ADSM Only:

- Optometry
- Dental: 605-385-3657
- Mental Health/ADAPT: 605-385-3656
- Flight Medicine

ADSMs & ADFMs:

- Diagnostic Imaging
- Family Advocacy Program
- Family Health
- Immunizations
- Laboratory
- Pediatrics
- Pharmacy
- Physical Therapy
- Public Health
- Women's Health

NOTE: For all other 28 MDG clinics, please call: 605-385-6700

NOTE: For services in the local area, visit: <https://www.tricare.mil/FindDoctor>

Patient Advocate: Patient Advocates focus on your needs and helps to resolve concerns about the quality of your care. Each section has an assigned Patient Advocate that is available upon your request.

Stay informed of 28th Medical Group happenings!



<https://www.facebook.com/28thMedicalGroup/>

<https://www.facebook.com/groups/368575116544329/>

<https://www.facebook.com/EllsworthAirForceBase/>



TriWest APPROVED URGENT CARE CLINICS



BLACK HILLS URGENT CARE LLC: Located in Baken Park

741 Mountain View Rd.

Rapid City, SD 57702

Phone: (605) 399-9565

Fax: (605) 399- 9584

Hours of operation: (Call or walk in)

Mon – Fri: 7 A.M to 7 P.M

Sat & Sun: 8 A.M to 6 P.M

Drive time: 20 minutes

Miles: 13.7

BLACK HILLS URGENT CARE LLC:

1730 Haines Ave.

Rapid City, SD 57701

Phone: (605) 791-7788

Fax: (605) 791-7755

Hours of operation: (Call or walk in)

Mon – Fri: 7 A.M to 7 P.M

Sat & Sun: 8 A.M to 6 P.M

Drive time: 15 minutes

Minutes Miles: 10.3

MONUMENT HEALTH RAPID CITY URGENTCARE:

1303 North Lacrosse

St. Rapid City, SD

57701 **Phone: (605)**

755-2273

Fax: (605) 755-3901

Hours of operation:

Daily 7 A.M to 7 P.M

Drive time: 15 minutes

Minutes Miles: 9.7

BLACK HILLS URGENT CARE LLC:

120 East Michigan Street

Spearfish, SD 57783

Phone: (605) 722-7777

Fax: (605) 559-2490

Hours of operation: (call or walk in 7 days a week)

Mon – Fri: 7 A.M to 7 P.M

Sat & Sun: 8 A.M to 6 P.M

Drive time: 56 Minutes

Miles: 56.9

Take Command: Urgent Care Now Easier to Access

1/23/2018 at: www.tricare.mil

As of Jan. 1, 2018, non-active duty [TRICARE Prime](#) enrollees no longer need a referral for urgent care visits and point-of-service charges no longer apply for urgent care claims. This change replaces the previous policy, which waived referrals for the first two urgent care visits per year. Active duty service members (ADSMs) should continue to visit military hospitals and clinics for care. ADSMs enrolled in [TRICARE Prime Remote](#) who don't live near a military hospital or clinic don't need a referral when seeking an urgent care visit.

"We wanted our service members' families and others to have easier access to urgent care," said states TRICARE Health Plan within the Defense Health Agency. "Beneficiaries can go visit an urgent care center right away anytime they have a need."

If you use [TRICARE Select](#) or any other TRICARE plan, you may visit any TRICARE-authorized provider (A TRICARE authorized provider is any individual, institution/organization, or supplier that is licensed by a state, accredited by national organization, or meets other standards of the medical community, **and** is certified to provide benefits under TRICARE.) There are two types of TRICARE-authorized providers: network or non-network, for urgent care.

[Urgent care](#) is care you need for a non-emergency illness or injury requiring treatment within 24 hours. Examples of urgent care conditions include a sprain, rising temperature or sore throat. It isn't an emergency and doesn't threaten life, limb or eyesight.

If you're unsure whether to seek urgent care, call the 24/7 [Nurse Advice Line](#) at 1-800-TRICARE (874-2273)—Option 1. You can speak with a registered nurse who can answer your questions and give advice. The nurse can also assist you with finding a provider and scheduling an appointment.

If you need care after hours, while traveling, or if your primary care manager is unavailable, urgent care is a great option. Contact your [regional contractor](#) to help you find an appropriate urgent care facility or provider. You may also use the [TRICARE provider search tool](#).

Any [TRICARE Overseas Program Prime](#) enrollees requiring urgent care while on temporary duty or on leave status in the 50 United States and the District of Columbia, may access urgent care without a referral or an authorization. However, the ADSMs must follow up with their primary care manager in accordance with applicable DoD and Service regulations concerning ADSM care outside military hospitals and clinics.

This is your benefit. Learn more about [TRICARE changes](#) and take command of your health.

*ADDENDUM: Rapid City, SD: using the Black Hills Orthopedic & Spine Center for routine appointments or their "walk-in urgent care" track does require all TRICARE Prime beneficiaries to have a referral and an authorization from the Regional Contractor. (Author: Ms. Lemley/Tricare/28MDG)

***ALL ACTIVE DUTY SERVICE MEMBERS REQUIRE A REFERRAL & PRIOR AUTHORIZATION FOR ALL NON-EMERGENT CARE (TO INCLUDE URGENT CARE) REGARDLESS OF WHERE THEY ARE, THE TIME OF DAY, OR THE DAY OF THE WEEK. CONTACT YOUR PCM OR THE NURSE ADVICE LINE! (Author: Ms. Lemley/Tricare/28MDG)**

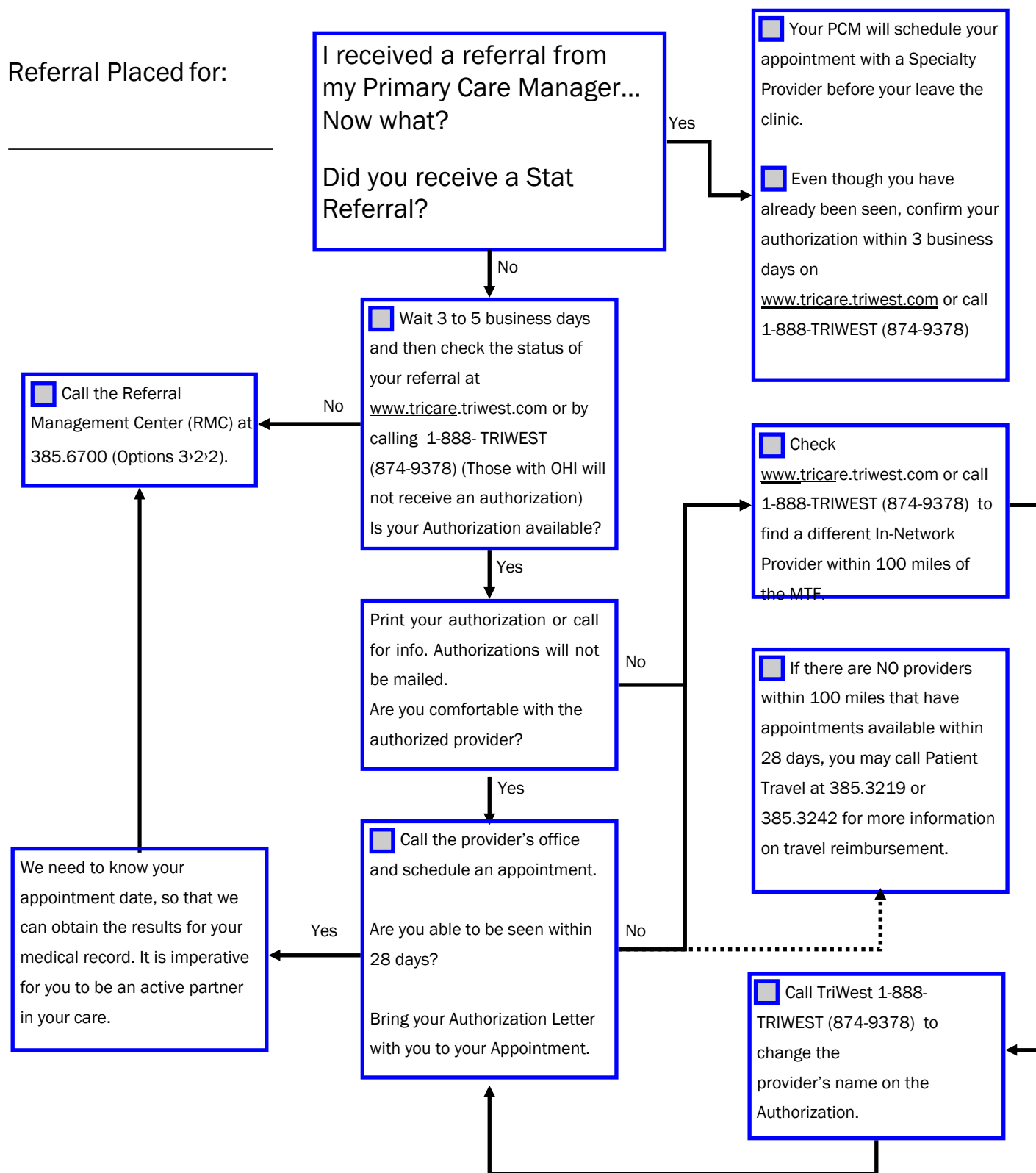


Trusted Care at Ellsworth AFB

The Referral Management Process



Referral Placed for:





Trusted Care at Ellsworth AFB

Referral Management FAQs



How do I get a specialty care referral?

Referrals are placed by your Primary Care Manager (PCM).

I received an automated call stating that I have an open referral, what should I do?

If you have already made or attended your appointment, you should follow the prompts to speak with the RMC and notify them of the date and time of your appointment.

If you do not plan to use your referral, you should follow the prompts to speak with the RMC to cancel it.

If you have any questions about your open referral, you should call TriWest www.tricare.triwest.com for more information.

Do I need a referral for an Urgent Care Visit?

Only Active Duty need a referral to urgent care.

Dependents, Retirees and retiree dependents do not need prior authorization to go to urgent as of 10 January 2018.

Do I need a referral for an Emergency Department Visit?

No, a referral is not required for the ER. Contact the Appointment Line within 24 hours of your visit to notify your PCM or to schedule any follow up appointments.

What if I see a specialist without a referral?

If you do not have a referral to see a provider, you are choosing the Point of Service option, in which you may be liable for a portion of the bill.

Hours of Operation

M, Tu, Th, Fr

0730 - 1630, 0730-1130 Wed

TriWest Healthcare Alliance

tricare.triwest.com

1-888- 874-9378

Referral Management Center (RMC)

605.385.6700 (Option 3)

Appointment Line

605.385.6700

Patient Travel

605.385.3219

605.385.3242

What should I do if I receive a bill for care that has been authorized?

If you receive a bill for authorized care, please go to www.tricare.triwest.com to see why your claim was not processed.

If you disagree with a claim denial, you may file a formal appeal in writing within 90 days. You should include any information or documents that you believe would help support your case. All appeals should be sent by fax to 844-802-2527. If you need assistance, please visit the RMC Office.

What should I do if I want to see a different provider?

1. Go to www.tricare.triwest.com and search "find a provider" to find an In-Network Provider.
2. Make an appointment using your valid Authorization Number.
3. Call TriWest with the new provider to ensure payment.
4. Call the RMC with the time of your appointment.

Who should make my Specialty Care Appointment?

Stat Appointments are scheduled by your PCM. You must confirm your authorization by your second visit.

Routine Appointments are scheduled by the patient for the provider specified on the authorization.

Does having Other Health Insurance (OHI) or Medicare change the referral process?

Yes, all other insurances are primary and you will not receive an authorization for care. Please follow the rules of your Primary Insurance carrier.

When will I receive my authorization and how do I check its status?

Authorizations are available online within 3-5 business days and can be checked at www.tricare.triwest.com or by calling [1-888-874-9378](tel:1-888-874-9378). It is the patient's responsibility to ensure that a referral is approved and to verify the number of visits and end date.

1. Go to www.tricare.triwest.com
2. Click on *Beneficiaries*
3. Click on *Register* (if not registered) and complete the registration process or *Logon*
4. Click on *My Referrals and Prior Authorizations*
5. Click on the requested Authorization and print it. This must be brought to the appointment with you.

If you have opted out of receiving online authorizations, it may take up to two weeks to receive your Authorization Letter in the mail.

What if I received a referral from a specialty clinic in the medical group, such as Mental Health?

The information in this FAQ may not apply to you. Please contact the Appointment Line or the clinic that wrote your referral if you have any questions.

FAQ - How do I...?

Change my Primary Care Manager (PCM)?

- Visit the Patient Admin office in the MDG to obtain a PCM change request form.
 - All ADSM requests must have justification and will be reviewed before approval.
- <https://tricare.mil> – “Find a Doctor”, “Change My Primary Care Manager” (Off base providers)

Schedule/cancel an appointment?

- Call appointment line – 605-385-6700

Contact Mental Health?

- Call Mental Health/ADAPT – 605-385-3656

Contact Pharmacy/refill medication?

- Call Pharmacy & Refills – 605-385-6700, then option 2
- <https://patientportal.mhsgenesis.health.mil>

Access medical services outside of clinic hours?

- Call Nurse Advice Line – 1-800-874-2273

Access emergency medical services after hours?

- Call 911 or go to nearest emergency room
- Call Nurse Advice Line – 1-800-874-2273

File a civilian medical or dental claim?

- TRICARE network providers are required to submit claims on your behalf
 - Call Beneficiary Counseling and Assistance Coordinator (BCAC) – 605-385-3259/3341

Check the status of a claim?

- <https://www.tricare.triwest.com> – “Beneficiary Login”, “Claim Status”

See co-payment/cost share/deductible fees for non-network care?

- <https://tricare.mil> – “Costs”, “Copayments & Cost Shares”

See services in the local area?

- <https://www.tricare.triwest.com> – “Network Provider Directory”
- Call Nurse Advice Line – 1-800-874-2273

Get copies of medical records?

- Contact Outpatient Records (OPR) – 605-385-3255
- Visit OPR at 28 MDG

TRICARE Prime

Eligibility:

- Those eligible for TRICARE Prime include:
 - Active duty service members (ADSMs) – *required to enroll in TRICARE Prime or TRICARE Prime Remote*
 - Family members and survivors of ADSMs
 - National Guard and Reserve members called to active duty for more than 30 consecutive days, and their families

Important Info:

- Beneficiaries must be registered in the Defense Enrollment Eligibility Reporting System (DEERS) and must choose a PCM where TRICARE Prime is offered.
- New active duty family member (ADFM) enrollment into a TRICARE plan is automatic, once registered in DEERS.
 - The ADFM will have 90 days to determine if he/she wants to stay enrolled in Prime or switch enrollment to TRICARE Select.
- Beneficiaries who remain eligible will be automatically re-enrolled each year unless they elect a different option or disenroll during the open enrollment season.



www.tricare.mil/prime



www.tricare.triwest.com

1-888-TRIWEST (874-9378)

TRICARE Prime Continued

Who Can Participate?

- Active duty service members and their families
- Retired service members and their families*
- Activated Guard/Reserve members and their families
- Non-activated Guard/Reserve members and their families who qualify for care under the [Transitional Assistance Management Program](#)
- Retired Guard/Reserve members at age 60 and their families*
- Survivors
- Medal of Honor recipients and their families
- Qualified former spouses

*When retired service members and their families become eligible for Medicare based on age, they aren't eligible to enroll in TRICARE Prime.

How it Works

You have an assigned primary care manager (PCM) who provides most of your care.

- Military or network provider
- Refers you to specialists for care he or she can't provide
- Works with your regional contractor for referrals/authorization
- Accepts your copayment and files claims for you

What You Pay

- Active duty service members pay nothing out-of-pocket.
- Active duty family members pay nothing unless using the [point-of-service option](#).
- All other beneficiaries pay [annual enrollment fees](#) and [network copayments](#).

[>>View TRICARE Prime Costs](#)

Is TRICARE Prime Right for You?

- If you're on active duty, you have to enroll in TRICARE Prime.
- All others can choose to enroll in TRICARE Prime or TRICARE Select.
- TRICARE Prime offers fewer out-of-pocket costs than TRICARE Select, but less freedom of choice for providers.
- If you have other health insurance, TRICARE Prime might not be right for you.

TRICARE Dental Program (TDP)

Voluntary program that covers:

- Exams, cleanings, fluorides, sealants, and X-rays
- Fillings, including white fillings on back teeth
- Orthodontics and braces
- Additional cleaning for pregnant women*
- **PLUS MUCH MORE!!!**
 - For more services, visit: <https://tricare.mil/CoveredServices/Dental/TDP>

Enroll:

- Telephone (CONUS): 1-844-653-4061
- TRICARE Dental Program (United Concordia)
 - <https://www.uccitdp.com/>



www.tricare.mil/prime

UNITED CONCORDIA®

<https://www.uccitdp.com>

1-844-866-9378



28th Medical Group In-processing Reference

Clinic Hours: 0730-1630, M, Tu, Th, Fr; 0730-1130 Wed

Appointment Line: 605-385-6700

Patient Administration (PAD) Office: 605-385-3219

Step 1: Enroll with Ellsworth AFB clinic via TRICARE West
(See next block)

NOTE: Required regardless of previous enrollment region.

Step 2: Visit the PAD office within the MDG for registration and information briefing.

Step 3: Visit the flight medicine clinic to verify IMR requirements.

Step 4: Visit the dental office to verify IMR requirements.



Additional 28 MDG information can be found at: <https://www.ellsworth.tricare.mil>

TRICARE WEST ENROLLMENT BY PHONE

<https://www.tricare.triwest.com>

If at any point you run into issues dial 0 to speak with a representative.

1. Contact Tricare West
 - 1-888-TRIWEST (874-9378)
2. Select option 2 for “beneficiary/sponsor”
3. Press 1 after listening to privacy info.
4. Enter your social security number
5. Enter your date of birth (MM DD YYYY)
6. Enter your current zip code if known
 - 57706 (Ellsworth AFB)
7. Choose option 4 for “enrollment, payment, or primary care manager changes”

Press option 3 for “enrolling in Tricare West”

You will be asked for your residential address, if you do not have one use the following 28 MDG clinic address:

2900 Doolittle Dr.
Ellsworth AFB, SD 57706

NPI#/DMIS ID: 0106

Unit Identification Code (UIC) is found in box 9 of your orders. (Example: FF####)

Urgent Care Clinic Info

As of Jan. 1, 2018, **non-active duty** TRICARE Prime enrollees no longer need a referral for urgent care visits and point-of-service charges no longer apply for urgent care claims.

Urgent care is care you need for a non-emergency illness or injury requiring treatment within 24 hours.

If you're unsure whether to seek urgent care, call the 24/7 Nurse Advice Line at 1-800-TRICARE (874- 2273)—Option 1. You can speak with a registered nurse who can answer your questions and give advice. The nurse can also assist you with finding a provider and scheduling an appointment.

***ALL ACTIVE DUTY SERVICE MEMBERS REQUIRE A REFERRAL & PRIOR AUTHORIZATION FOR ALL NON-EMERGENT CARE (TO INCLUDE URGENT CARE) REGARDLESS OF WHERE THEY ARE, THE TIME OF DAY, OR THE DAY OF THE WEEK. CONTACT YOUR PCM OR THE NURSE ADVICE LINE!**

Approved Urgent Care Clinics

BLACK HILLS URGENT CARE LLC:

1730 Haines Ave., Rapid City, SD 57701
Phone: (605) 791-7788 Fax: (605) 791-7755
M-F: 7 A.M. to 7 P.M. **Sat & Sun:** 8 A.M. to 6 P.M.

MONUMENT HEALTH RAPID CITY URGENT CARE:

1303 North Lacrosse St., Rapid City, SD 57701
Phone: (605) 755-2273 **Fax:** (605) 755-3901
Daily: 7 A.M. to 7 P.M.

BLACK HILLS URGENT CARE LLC (Baken Park)

741 Mountain View Rd., Rapid City SD 57702
Phone: (605) 399-9565 **Fax:** (605) 399-9584
M-F: 7 A.M. to 7 P.M. **Sat & Sun:** 8 A.M. to 6 P.M.

BLACK HILLS URGENT CARE LLC (Spearfish)

120 East Michigan St., Spearfish, SD 57783
Phone: (605) 722-7777 Fax: (605) 559-2490
M-F: 7 A.M. to 7 P.M. **Sat & Sun:** 8 A.M. to 6 P.M.

MHS GENESIS Patient Portal

MHS GENESIS is the new secure patient portal for TRICARE. It will eventually deploy to all military medical and dental facilities worldwide and replace the TOL Patient Portal.

MHS GENESIS Features

With the MHS GENESIS Patient Portal, you'll have a direct view and 24/7 access into your current medical and dental health records.

- View, download and transmit your health data
- Book or cancel appointments
- Request prescription refills
- View clinic notes and certain laboratory/test results
- Exchange messages with your health care team
- Complete a pre-visit, dental health history questionnaire online (active duty only)
- Look up health information related to your health concerns, results, and prescriptions

What You Need to do to Use MHS GENESIS

Save the new portal location: <https://patientportal.mhsgenesis.health.mil>

- Login with a DS Premium Level 2 Account
- Remember your username and password

As soon as your record is created, you'll be able to see your health data in MHS GENESIS.

Using a DS Logon

Many TRICARE secure online patient services, including the MHS GENESIS and TOL patient portals, require a DS logon account through the Defense Manpower Data Center (DMDC). The DS Logon user ID and password ensures your personal and health information is secure while allowing you the convenience of online access to your health information and self-service tools.

To sign up* for a DS Logon account, visit the [DS Logon Help Center](https://myaccess.dmdc.osd.mil/identitymanagement/help.do?execution=e1s1):
<https://myaccess.dmdc.osd.mil/identitymanagement/help.do?execution=e1s1>

TRICARE does not manage the DS Logon program. For technical issues and support with DS Logon, contact the DMDC Support Center at (800) 538-9552.

Levels of access

There are two different levels of access for DS Logon accounts: Basic and Premium. Each level has different requirements for identity verification and offers different access to health information.

- DS Logon Basic (Level 1): This account provides limited access to benefits features. You can apply easily online and upgrade to a Premium account at any time by verifying your identity.
- DS Logon Premium (Level 2): This account offers the highest level of access to website features and requires that you verify your identity. If you have a CAC card, you are automatically receive a Premium account.

** When signing up for a DS Logon account, you will be asked for personal and financial information to verify your identity as an added security measure to protect you and your health information.*