How to Submit a Request for Pre-authorization for Line of Duty (LOD) Medical Care to DHA-GL

Who this is for	National Guard and Reservist
Background and Purpose	Defense Health Agency Great Lakes (DHA-GL) is responsible for pre- authorizing all civilian medical care for eligible National Guard and Reservist who have been injured or became ill in the line of duty during a period of qualified duty and are <u>not</u> in the catchment area of a Military Treatment Facility (MTF).
Eligibility	 You must meet the following criteria: National Guard or Reservist and have been issued a Line of Duty Determination (LOD) and are <u>not</u> in the catchment area of a MTF. Have medical eligibility documentation on file at DHA-GL prior to requesting care. See DHA-GL process guide "<u>How to Forward Medical Eligibility Documentation to DHA-GL</u>" for complete instructions.

Filing Process	Follow these steps to receive pre-authorization for civilian health care:
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Step	Action
1	Member or unit medical representative finds a Network Provider who can
	provide the care. <u>NOTE</u> : Call your Regional TRICARE Contractor or
	www.tricare.mil/welcome to locate a Network Provider.
2	Unit medical representative completes a Pre-Authorization
	Request for Medical Care <u>DHA-GL Worksheet-02</u> (select from
	drop-down box under Request Worksheets).
	Note: Ensure specific medical care requested (e.g. orthopedic visit and 3 f/u
	visits or 12 PT visits, etc.), to include CPT codes, is listed in block 13 of the
	DHA-GL Worksheet-02. If a surgical pre-authorization is requested,
	complete and submit Pre-Authorization Request for Surgical Care
	DHA-GL Surgical Pre-Authorization Worksheet-06 (select from drop-down
	box under Request Worksheets).

Step	Action
3	Unit medical representative faxes or mails DHA-GL Worksheet-02, service approved
	LOD, clinical documentation, profile information (if applicable) and DHA-
	GLWorksheet-06 (if applicable) to the following \underline{FAX} or address:
	NOTE: <u>All Army National Guard</u> requests are required by the National Guard
	Bureau to be submitted by the Electronic Medical Processing System (eMMPS). Ref
	NGB-ARP memo, dtd 3 Feb 06, subj: Army National Guard (ARNG) Line of Duty
	(LOD) Module. ARNG LOD Module at https://medchart.ngb.army.mil/LOD. Army
	Reserve is strongly encouraged to use the module as well.
	• FAX: 847-688-7394
	Mailing Address:
	Defense Health Agency Great Lakes (DHA-GL)
	Attn: Medical Pre-Authorizations
	Bldg 3400 Ste 304
	2834 Green Bay Road
	Great Lakes IL 60088
	Great Lakes IL 60088

Results	Once all appropriate documentation has been received a pre-authorization will be	
and	issued by DHA-GL to the TRICARE Regional Contractor within seven (07)	
Follow-up	working days. If the Unit Med Rep has not heard from DHA-GL within seven working days contact the DHA-GL Pre-Authorization department.	

Website for Worksheets

- Pre-Authorization Request for Medical Care, DHAGL Worksheet-02
- <u>Pre-Authorization Request for Surgical Care, DHA-GL Worksheet-06</u> Note: Select from drop-down box under Request Worksheets

Point ofIf you have questions or need additional assistance beyond the information**Contact**provided here, contact:

Division	Medical Care Branch
Position	Customer Service Representative
Phone	888-647-6676
Fax	847-688-7394

Privacy Act Statement: This statement serves to inform you of the purpose for collecting information required by the Defense Health Agency Great Lakes (DHA-GL) and how it will be used. **AUTHORITY**: 10 U.S.C. Chapter 55, Medical and Dental Care; 32 CFR 199.17, TRICARE program; and E.O. 9397 (SSN), as amended. **PURPOSE**: To collect information from Military Health System beneficiaries in order to determine their eligibility for coverage under the TRICARE Program. **ROUTINE USES**: Use and disclosure of your records outside of DoD may occur in accordance with 5 U.S.C. 522a (b) of the Privacy Act of 1974, as amended, which incorporates the DoD Blanket Routine Uses published at: http://dpclo.defense.gov/privacy/SORNs/blanket_routine_uses.html. Any protected health information (PHI) in your records may be used and disclosed generally as permitted by the HIPPA Privacy Rule (45 CFR Parts 160 and 164), as implemented within DoD by 6025.18-R. Permitted uses and discloses of PHI include, but are not limited to, treatment, payment, and healthcare operations. **DISCLOSURE**: Voluntary; however, failure to provide information may result in the denial of coverage.