

Attestation of Referral for POS Claims Adjustment For Participating US Family Health Plan Providers

Receiving specialty care without a health care provider's referral is considered "self-referral," and claims for this care will generally apply the Point-of-Service (POS) option, which has a higher member cost share than the standard TRICARE Prime benefit.

If the specialist did not provide Martin's Point Health Care with evidence of a referral on file, and a claim has applied the POS Option, beneficiaries have two options to provide proof of referral.

Option A (fastest): Ask the provider who performed the service to send a corrected claim with the referring provider information.

Option B: Have the provider who made the referral to complete this attestation form. Once the attestation is received and validated by the health plan, the claim will be adjusted to apply the standard TRICARE Prime benefit.

Beneficiary:		Member ID:	
First Date of Service:			
Servicing Specialist:			

To be filled out by the referring provider office:

Please sign this form to attest that the beneficiary above was referred by your office to the servicing specialist or servicing specialist office above.

Referring Provider: *(print name and location)*

National Provider Identifier: *(print NPI)*

Office Staff Signature*:

Date: / /

Beneficiary Next Steps:

Once completed and signed by your PCP, please mail it to the health plan directly.

Please allow up to 30 days from submission for processing.

Once the attestation is received and validated by the health plan, the claim will be adjusted to apply the standard TRICARE Prime benefit.

Beneficiaries can view claims adjustments in the Member Portal.

Upon completion return to:

Martins Point US Family Health Plan
Claims Department
Referral Attestation
PO Box 11410
Portland, Maine 04101