

## Letter of Referral (LOR)

Physician Referral Form for TRICARE beneficiaries accessing care with Licensed  
Mental Health Counselors, Licensed Professional Counselors, or Pastoral Counselors.  
**(803) 462-3990**

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Sponsor #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Patient Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Reason for Referral/Disposition: \_\_\_\_\_

\_\_\_\_\_

ICD-9/DSM-IV Diagnosis: \_\_\_\_\_

Name of LPC receiving this referral: **Jim Soward LPC, LISAC, 5350 E. Broadway  
Suite 108, Tucson AZ 85711 520-584-0343**

The referring physician is providing: REFERRAL AND OVERSIGHT/SUPERVISION

**Please Note:** TRICARE Policy Manual 6010.54M, Chapter 11, Section 3.1, states that in order for Mental Health Counselors (LMHCs and LPCs), and Pastoral Counselors (PCs) to be considered for benefits on a fee-for-service basis by TRICARE, the beneficiary/patient must be evaluated by a physician who provides a diagnosis and referral to the LMHC, LPC, or PC, prior to the start of treatment. A physician must also provide continued and ongoing oversight and supervision of treatment. Oversight and supervision documentation must be submitted with claims. Failure to follow this requirement may result in non-payment. Beneficiaries will be held harmless. It is the responsibility of the civilian provider (the LPC, not the beneficiary) to ensure referral and oversight is obtained.

### Referring Physician Information

Print Name: \_\_\_\_\_

Is the Physician a PCM? \_\_\_\_\_ YES \_\_\_\_\_ NO

Practice Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Physician Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return completed LOR by fax to Jim Soward LPC, LISAC  
520-584-0343 (please call number first to confirm)

## **CHAPTER 11 SECTION 3.1**

### **PHYSICIAN REFERRAL AND SUPERVISION**

ISSUE DATE: December 18, 1985

AUTHORITY: [32 CFR 199.6\(c\)\(3\)\(iii\)\(K\)](#)

#### **I. ISSUE**

A. In order to be considered for benefits on a fee-for-service basis, the services of the following individual professional providers of care may be provided only if the beneficiary / patient is referred by a physician for the treatment of a medically-diagnosed condition.

B. A physician must also provide continuing and ongoing oversight and supervision of the program or episode of treatment provided by these individual providers:

1. Licensed Registered Nurses.
2. Nurse Anesthetists.
3. Licensed Practical or Vocational Nurse.
4. Audiologist.
5. Speech Therapists (Speech Pathologists).
6. Licensed Registered Physical Therapists.
7. Pastoral Counselors
8. Mental Health Counselors.
9. Licensed Registered Occupational Therapists.

#### **II. POLICY**

A. A physician must establish a diagnosis which, in order to be considered for benefits, must describe a covered condition. This means the physician must actually see the patient, do an evaluation and arrive at an initial diagnostic impression prior to referring the patient. Any change in the referral diagnosis must be coordinated with the referring physician.

B. The overall management of the patient rests with the physician and, in order to assure appropriate case management, coordination must be made with the referring physician on an ongoing basis. Physician supervision means the physician provides overall medical management of the case. The referring physician does not have to be physically located on the premises of the provider to whom the referral is made. Communication back to the referring physician is an indication of medical management.

C. Military physicians may refer patients to civilian providers. Because of the mobility of military physicians due to transfers, retirements and discharges, if the original referring physician has relocated, another military physician may assume responsibility for the case upon review of the military treatment facility clinical record, a narrative of the patient's present status and the proposed treatment plan.

### III. EXCLUSION

Any services provided prior to examination and subsequent referral by a physician.

- END -

#### **Let Counselors Practice Independently Under TRICARE**

Ask Your Rep. to Cosponsor H.R. 3839

For many years now TRICARE, the health care program operated by the Department of Defense for service members and their dependents, has covered licensed professional counselors and all other recognized mental health professionals. **Since 1990, though, LPCs have been the only mental health professionals required to operate under physician referral and supervision; all other mental health specialties are allowed to practice independently.**

At a time when our nation's military and their families are under severe stress--with no end in sight--this is no longer just an outdated policy, it's dangerous. Service member and their family members should be able to pick up the phone and call a licensed counselors, instead of having to go through a physician first, not to mention find one who is willing to undertake the time, energy, and paperwork involved in 'supervising' the counselors' services. Professional counselors are licensed for independent practice throughout the country, and TRICARE's physician referral and supervision requirement places a needless roadblock to patient care.

**Ask your Representative to take a common-sense, no-cost step to improve access to outpatient mental health treatment for service members and their families by cosponsoring H.R. 3839, bipartisan legislation introduced by Rep. Tom Rooney (R-FL).**

Congressman Rooney's bill would allow licensed mental health counselors to practice independently, just as marriage and family therapists and clinical social workers have been allowed to do for many, many years.