Referral Guidebook
Colorado Military Treatment Facilities
Integrated Referral Management Appointing Center (IRMAC)

June 2026

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Key Terms/Definitions

- **2nd Opinion:** Request for a different opinion about your diagnosis or treatment options; Allows for evaluation from a second provider, only to review plan of care, not undergo treatment
- **Authorization:** Approval document for a referral which identifies the details (specialty, services/procedures, # visits, office/provider sent to, contact for provider/office, etc.) of the referral
- **Colorado Military Treatment Facilities:** The military hospitals and clinics in Colorado which collaborate to maximize the services available to patients. Every attempt is made to navigate patients to a military hospital or clinic provider first if there is capability and access to care that meets the needs of the patient.
- **Continuity of Care**: 6 months from the end of a referral authorization/treatment
- **CPT/Procedure Codes:** Specific type of procedure (i.e. evaluation and treatment of nerve damage to neck) indicated on a referral which guides what the off-base provider is allowed to bill TRICARE for
- **Difference Between Referral On-Base versus Network:** Referrals for specialty care are either determined to be able to be treated within a military hospital/clinic (on-base) or to a provider in the local community (Network) which requires navigation by the TRICARE managed care support contractor (TriWest)

Key Terms/Definitions

- **MHS Genesis Patient Portal Messages:** Message locations that patients can utilize to communicate referral issues, questions, and concerns
  - DHA Colorado MHS Central Referral Management Messaging, USAF Academy Referral Management, USAF Peterson Referral Management, USAF Buckley Referral Management, USA Ft Carson Referral Management
- **Out of Area:** Care requests that are outside of 100 miles from the patient's enrolled MTF; May require MTF travel approval and TRICARE medical necessity review to determine if care capabilities are available within your local area
- **Patient Appointing Services (PAS):** Appointment line which conducts calls to patients in order to book first specialty appointment for a referral retained at a military hospital or clinic
- **Point of Service (POS) Option:** Allows patients to pay out of pocket for services obtained directly in the network but often comes with large costs near full prices for services
- **Referral:** Decision by PCM or MTF provider to request additional care evaluation or treatment by a specialty service/provider
- **TRICARE-West Beneficiary Portal:** Online portal requiring registered logon to access TRICARE benefits status to include authorizations for referrals
- **TriWest:** TRICARE managed care support contractor who administers the health care benefit for TRICARE beneficiaries to include referrals

CO Referral Management Contacts

- Central Referral Center: Available for assistance for all MTFs
  - Phone: 719-524-1000
  - Fax: 630-570-5260
  - MHS Genesis Message Pool: DHA Colorado MHS Central Referral Management Messaging
- EACH Referral Management Center:
  - Phone: 719-524-1000
  - Fax: 630-570-5325
  - MHS Genesis Message Pool: USA Ft Carson Referral Management
- Buckley Referral Management Center:
  - Phone: 720-847-7645
  - MHS Genesis Message Pool: USAF Buckley Referral Management
- Peterson/Schriever Referral Management Center:
  - Phone: 719-524-1000
  - Fax: 630-570-5258
  - MHS Genesis Message Pool: USAF Peterson Referral Management
- USAFA Referral Management Center:
  - Phone: 719-524-1000
  - Fax: 630-570-6360
  - MHS Genesis Message Pool: USAF Academy Referral Management

TRICARE TriWest Contacts

- TriWest Help Desk: 888-874-9378
- TriWest Patient Portal Log In: https://tricare-bene.triwest.com/signin

How a Referral is Navigated

Day 0

MTF Provider Writes Referral

Day 1

Referral is reviewed by the CMHS Referral Management Center to determine whether a specialty clinic has capability or capacity within access to care standards to retain the referral within the military clinic or defer to an off base/post provider.

Referral is sent to a military specialty clinic

Days 2-3

Patient Appointing Services/MTF clinic will call within 3 business days to book referral within military specialty clinic.

- If patient does not receive a call within 3 business days, contact PAS at 719-524-2273, option 1 (Mon – Fri 6:00 am to 4:30 pm)
- After 3 unsuccessful attempts to contact by phone, patient is sent a MHS Genesis Patient Portal message to notify the patient they can call to schedule an appointment for specialty care

Days 3-5

The Patient has the right to be scheduled within a military clinic appointment within 28 days of calling to make an appointment.

- If an appointment is not available within 28 days, the patient may request a referral to a different provider or clinic.
- NOTE: Specialty care off-base may also be limited and scheduling outside of 28 days.

Days 6-35

Referral is sent to an off-base specialty provider.

Referrals off-base will be processed within 3-5 business days.

- The patient is responsible for booking an appointment for a referral that is sent off-base.
- A patient can identify where the referral has been authorized to from the TRICARE contractor (TriWest) patient portal.
- The patient **must** contact the provider office on the authorization to initiate an appointment or request a change of providers from TriWest.
- Instructions to navigate the TRICARE contractor patient portal for a referral authorization are in the attached guide.

The Patient has the right to be scheduled within 28 days of calling a provider office.

- If an appointment is not available within 28 days, the patient may request a referral to a different provider or clinic (see attached guide)
- If an appointment is not available within 28 days with a network provider, the patient may request a referral to a non-network provider or clinic. A non-network provider must be requested through TriWest at 888-874-9378

Referral FAQs - 1

- Q: How do I get access to my authorization?
  - Your referral authorization is only accessible through the TRICARE (TriWest) online portal (https://tricare-bene.triwest.com/signin) using a unique login registered with TriWest. Your referral authorization will not be mailed to you unless you are age 65+/Medicare enrolled. Only TRICARE Plus (age 65+/Medicare+military clinic enrollment) patient receive a letter of their referral mailed by the military clinic. These authorizations will be used to navigate (location/phone #) where to book your specialty care appointment or obtain Durable Medical Equipment.
- Q: How many visits am I authorized?
  - The number of visits authorized on a referral can vary but the number of visits is located on the authorization document accessible to you via the TRICARE (TriWest) online portal. See page 13 of guide. Many referrals are written with one evaluation visit and additional visits for treatment. For example: MRIs are diagnostic with one visit authorized; Referrals to Neurology may include authorization for one evaluation visit and 4-5 treatment visits.
- Q: When does my authorization expire?
  - Referral authorizations can range from 30-365 days. The service period is listed directly on the authorization document. See page 18 of guide for end date example. When this referral authorization expires, a new referral will be required from the MTF ordering provider.

Referral FAQs - 2

- Q: Can I request an off-base referral for specialty care?
  - TRICARE Prime patients enrolled to a military treatment facility will be offered specialty care within an MTF if there is availability within access to care standards, as required under the TRICARE Prime benefit. Each referral is reviewed for capability and continuity of care. If a history of care does not exist within the previous 6 months, continuity of care is not established and the patient will be directed to the MTF. Patients may choose the Point of Service (POS) option to choose a medical specialty in the civilian network, but will pay extensive out of pocket costs. More information can be found at https://www.tricare.mil/pointofservice.
- Q: My referral was captured by the MTF (military hospital/clinic). How does it get released?
  - Referrals will not be released by the MTF if access to care and capability are available. The referrals have been reviewed by the CO Central Referral Center for capability and continuity. It is recommended that patients go to their first appointment with a specialist in the MTF and discuss care options with the provider. Patients may choose the Point of Service option, as described above.

Referral FAQs - 3

- Q: How long does it take for the referral to be processed?
  - Referrals kept within a MTF are processed within 1-2 business days, with initial scheduling contact beginning at 2-3 business days from referral placement. Referrals deferred to the off-base network are processed within 3-5 business days. The patient may not be contacted by the off-base provider; the patient should check their https://tricare-bene.triwest.com/signin patient portal after 3 business days if not contacted by the MTF, to find their authorization and begin scheduling with a network specialist.
- Q: How do I activate my referral?
  - Patients do not need to activate a referral. If the patient is not contacted by the MTF PAS, they should follow up on their care by checking https://tricare-bene.triwest.com/signin after 3-5 business days. The patient must schedule if the referral is deferred to an off-base provider.
- Q: Where can I call to get more help with my referral?
  - If the referral has been deferred to an off-base provider, it is recommended that the patient contact TriWest for further assistance at 1-888-874-9378. If the referral has been retained within a MTF, contact CO Referral Management via MHS Genesis Patient Portal messaging (reference page 4).

Referral FAQs - 4

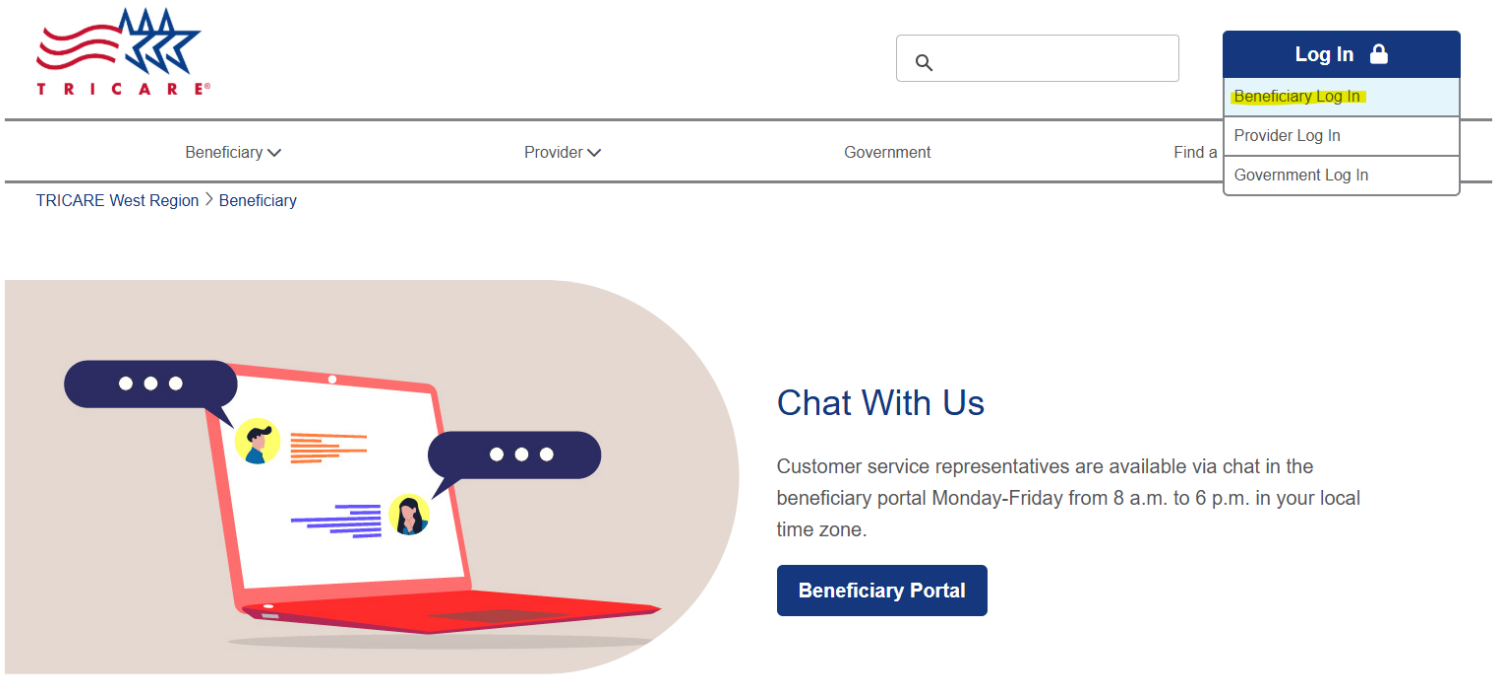
- Q: Can the MTF fax my referral to the provider?
  - Referrals for TRICARE Prime patients are provided by TriWest to the civilian network provider who the referral has been assigned via the Availity system. The civilian network provider can look for the patient's referral authorization within Availity. If the patient is not getting adequate assistance or has continued problems with the receipt of the referral by the civilian network provider, contact CO Referral Management via MHS Genesis Patient Portal messaging (reference page 4).
- Q: If the civilian network provider needs codes (CPT/procedures) added or changed, who do I contact?
  - The MTF cannot adjust codes generated on a referral authorization. The civilian network provider must reach out to TriWest directly at 1-888-874-9378 or through the Availity system to request the addition or change of referrals codes. If the patient is not getting adequate assistance or has continued problems with the receipt of the referral by the civilian network provider, contact CO Referral Management via MHS Genesis Patient Portal messaging (reference page 4).

Referral FAQs - 5

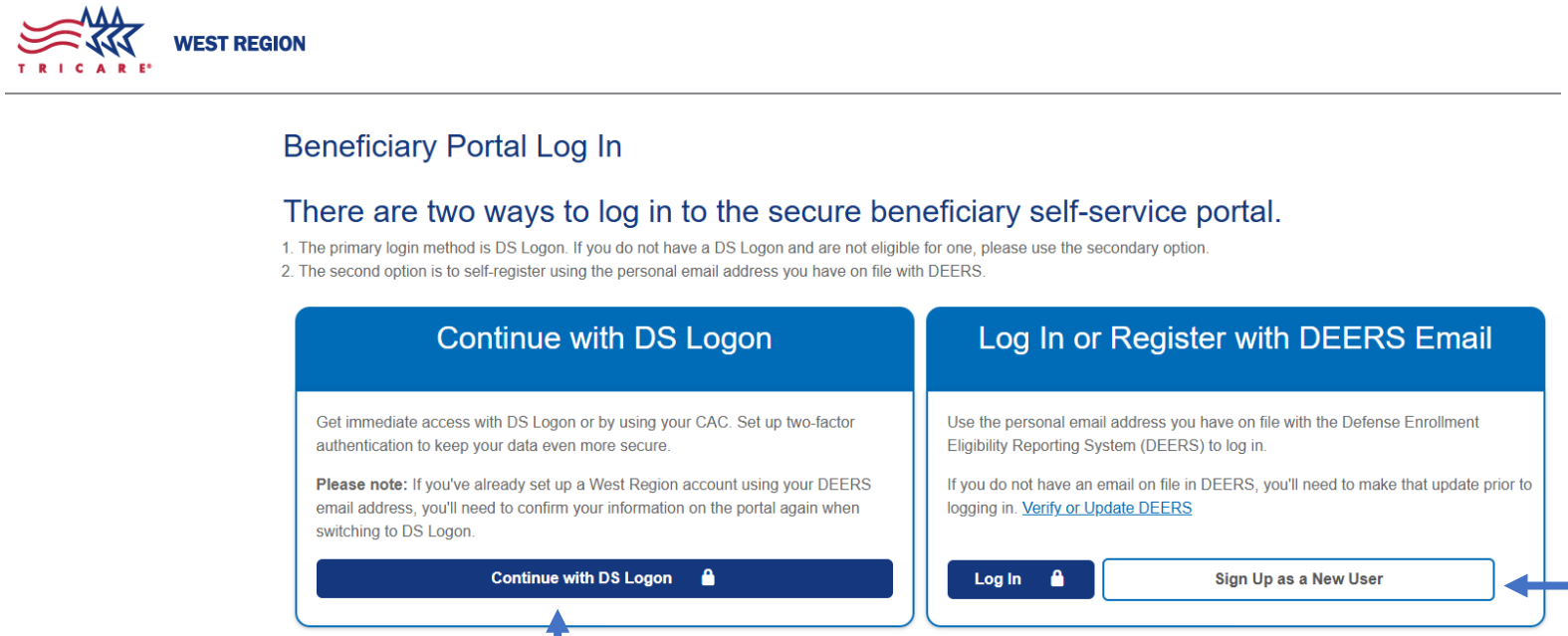
- Q: How do I get a second opinion?
  - The original ordering provider/PCM can place a second opinion referral. If more than one provider is available within a MTF specialty clinic, the referral may be assigned back to the MTF for scheduling with a DIFFERENT provider within the MTF or deferred to a civilian network provider.
- Q: Can I change my off-base referral to a different provider?
  - Off-base referrals can be changed to a different provider directly by the patient if the visits on a referral authorization have not been utilized. The patient can select a new civilian network provider by calling TriWest directly at 1-888-874-9378.

TRICARE West - Main Page

The website location for accessing referral authorization is through TriWest portal: https://tricare.triwest.com/en/beneficiary/



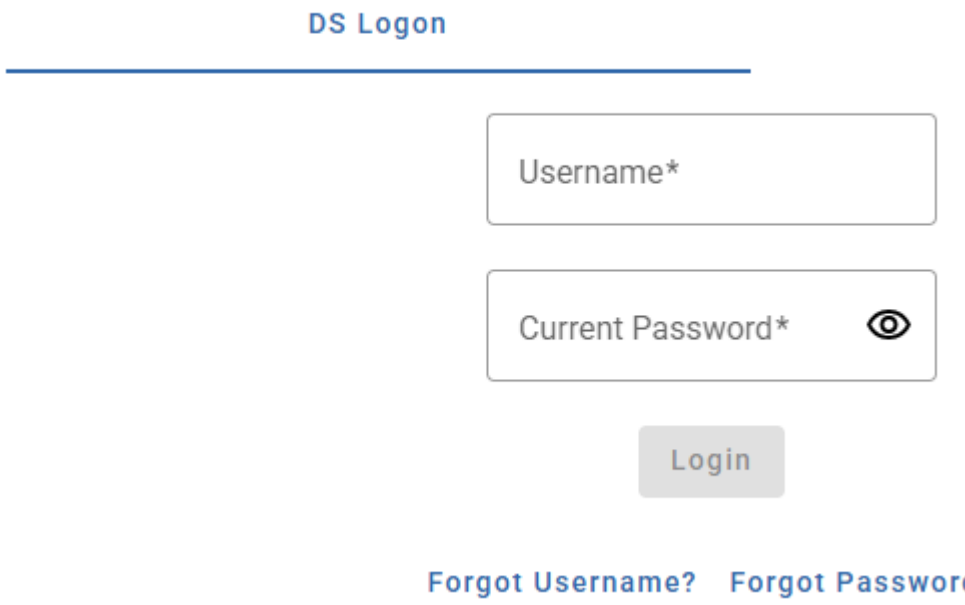
Beneficiary Portal/Secure Login Page



If a log in has not been established, select Sign Up As New User

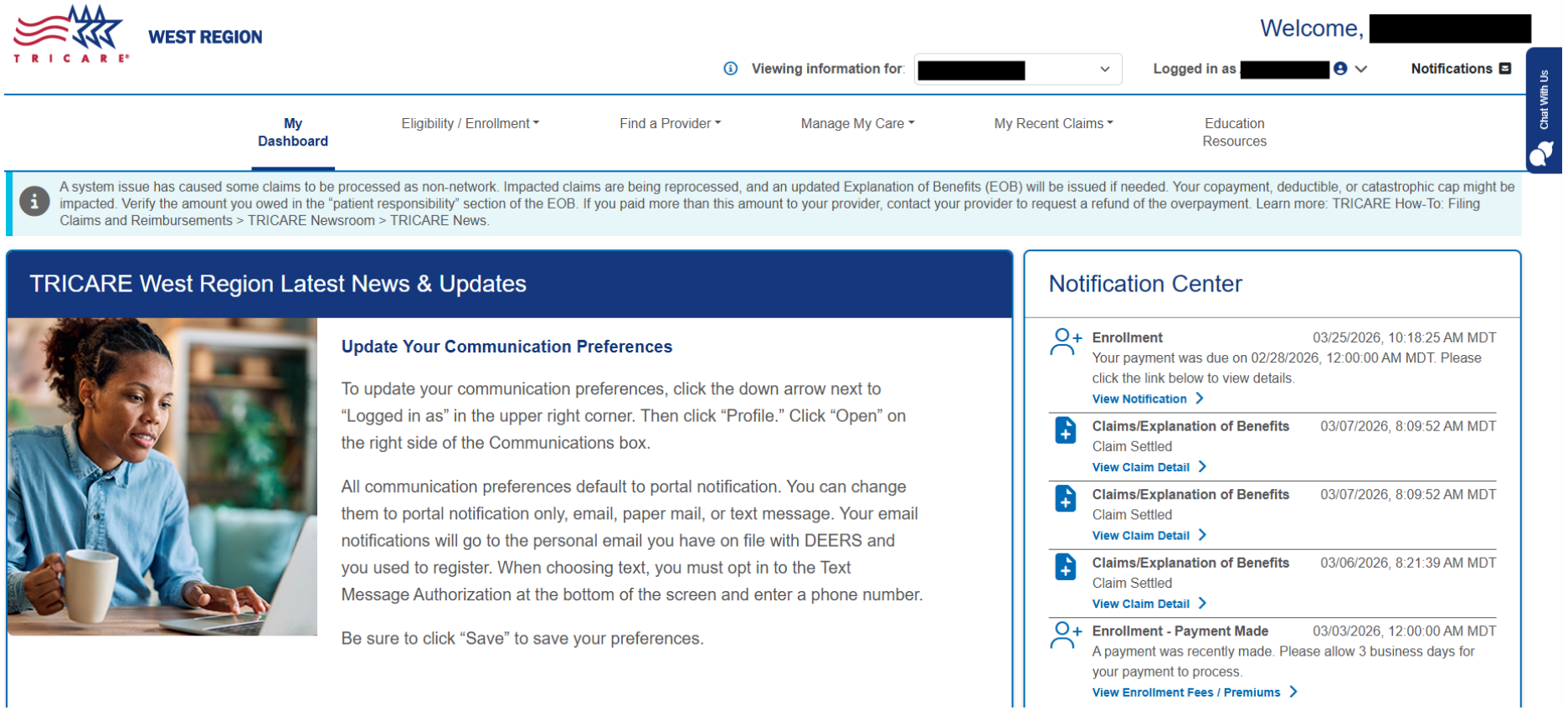
If a log in is established, select Continue.

Beneficiary Portal/Secure Login Page



After registering for a secure access to the patient portal, the patient will Log in to access their patient dashboard.

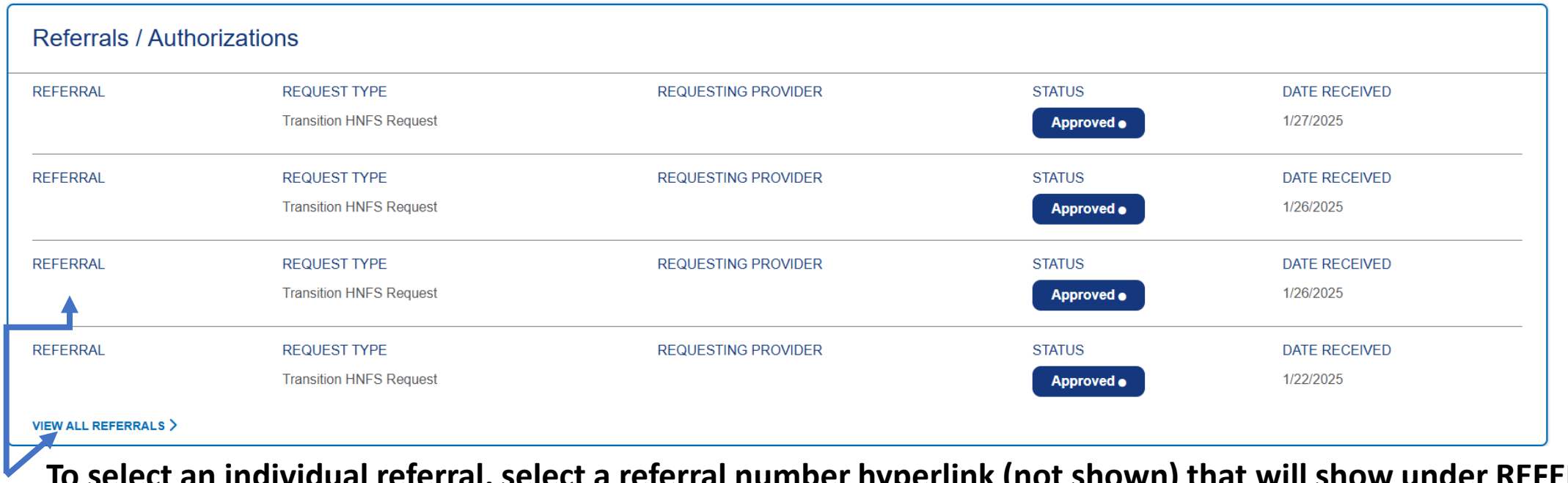
Beneficiary Portal



After logging in, the patient will see their My Dashboard.

Beneficiary Portal

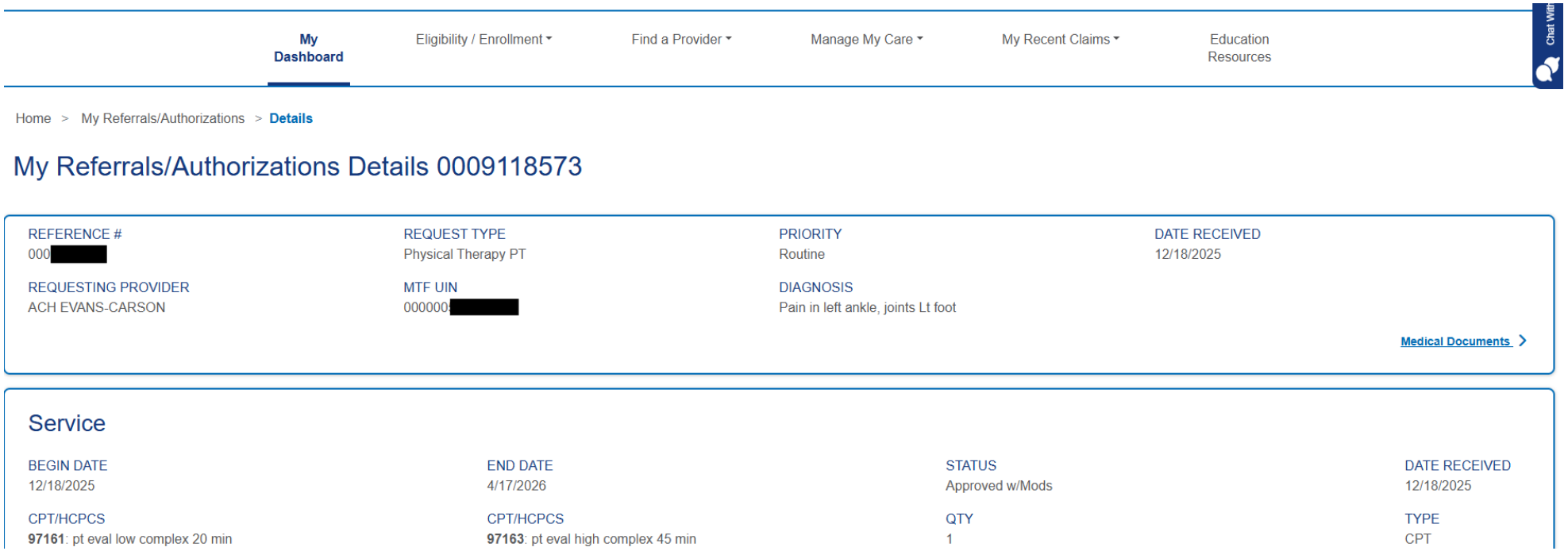
The patient will access referral authorizations by scrolling down on My Dashboard to the Referrals/Authorizations section.



To select an individual referral, select a referral number hyperlink (not shown) that will show under REFERRAL or select VIEW ALL REFERRALS.

Beneficiary Portal
My Referral Authorization

Within an individual referral, the patient will see the reference number, service dates, and servicing provider.



Change Servicing Provider

A patient can change a servicing provider by calling TriWest customer service at 888-874-9378.