

This memo was released by Med City Clark this week. Basically it states that Med City has suspended filing claims for reimbursement of treatment costs to FMP beginning 17 May 2024. Basically Vets will have to pay up front for Hospital costs and seek reimbursement through FMP. This does not affect individual Doctors who provide treatment and accept FMP. In some cases, this can result in a dramatic change to the health of our Vets. Now before the rumor mill goes into hyper speed, here's what this means to you. You can choose to use FMP and pay up front for the Hospital bill and file a claim for reimbursement. You can choose to use FMP for Dr. bills at the hospital and the Dr files for payment with FMP. As an alternative, you can use TRICARE if eligible, for the Hospital portion of your bill and file thru FMP to get reimbursed for the 25% balance.

What caused this? There are a number of things that contribute to this type action, either on the part of the hospital or FMP. Historically the main problems are misbilling and reimbursement wait times. On the misbilling front, the hospitals sometimes attempt to combine healthcare programs for treatment and bill one program for all treatments, although many times they are not covered under that program. An example is you seek treatment for a heart attack, under FMP, for which you are service connected and you come down with pneumonia while hospitalized. The pneumonia is not service connected so FMP is not going to pay for it, that likely should come under TRICARE. But when submitting the billing they charge it all to FMP. That part doesn't get paid so the hospital complains they are not getting paid, (that's a self-inflicted injury on their part). The other part of it is treatment may be provided and reimbursement requested for ailments which may aggravate a service-connected condition, but FMP doesn't find a clear association. It is the responsibility of the Vet and provider to ensure the ailment and subsequent treatment is considered by FMP to be associated and aggravating the original ailment before care is provided. Otherwise, it may not be authorized and you end up with a bill you didn't expect.

Lastly is the reimbursement wait time. VA has been pushing FMP for a faster reimbursement schedule. Many providers are small businesses and cant afford to have money tied up for an extended period, so they drop out of the program. Added to all this, is FMP has

been working for a few years to go electronic payments but haven't yet broken the code on that, have heard could happen 2025. On a brighter note, progress has been made in the program but more is needed.

We did get a high note on a new provider wanting to get into FMP and TRICARE in the Olongapo area, and hope to meet with their administrator very soon to get them online with both programs.