BUMED INSTRUCTION 6010.32

From: Chief, Bureau of Medicine and Surgery

Subj: PATIENT REGISTRATION PROGRAM

Ref: (a) 10 U.S.C.§1071 – 1110b, chapter 55
(b) 32 CFR Part 199.3
(c) DoDM 1000.13 Volume 2, DoD Identification Cards: Benefits for Members of the Uniformed Services, Their Dependents, and other Eligible Individuals of 23 January 2014
(d) DoD Instruction 1000.24 of 22 May 2003
(e) BUMEDINST 6320.103
(f) DoDM 6010.15, Military Treatment Facility Uniform Business Office Manual of 9 November 2006

Encl: (1) Patient Registration Eligibility Verification Guidelines
(2) Patient Registration Clerk Self-Paced Online Learning Topics

1. Purpose. To establish policy and procedures for patient registration for all assigned patient registration program personnel. Standardized patient registration guidance is essential in maintaining a competent and effective workforce capable of executing health service support in an optimal manner. References (a) through (f) provide additional information.

2. Scope. This instruction applies to Navy medical department personnel (active duty, reserve, civilian, and contract staff) who provide patient registration services at Navy medical treatment facilities (MTF).

3. Background. This instruction identifies and defines patient registration requirements, policies, procedures, activities, and minimum expectations necessary to ensure patient registration is complete for any patient who arrives at a Navy MTF. It describes who is eligible for health care in Navy MTFs and how beneficiaries gain access to this care based on their eligibility. This instruction encompasses patient administration functions including determining eligibility for care, protecting medical information, and managing other administrative activities to support patients, including both inpatient and outpatient registration. This instruction directs the collection and maintenance of information subject to The Privacy Act of 1974 and the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

4. Responsibilities

   a. Assistant Deputy Chief, Bureau of Medicine and Surgery (BUMED), Healthcare Operations (BUMED-M3) must:
(1) Develop, coordinate, and issue guidance based on Congressional mandates and Department of Defense (DoD) policies to Navy Medicine (NAVMED) East and West for implementation in the Navy MTFs in their respective areas of responsibility.

(2) Appoint a TRICARE liaison to serve as a headquarters point of contact to respond to inquiries from the NAVMED Regions. The TRICARE liaison will monitor legislative and policy changes to the TRICARE benefit and provide appropriate guidance to NAVMED East and West.

b. NAVMED East and West Commanders must:

(1) Provide support and resources to ensure adequate staffing exists to support patient registration programs.

(2) Disseminate guidance provided in this instruction to Navy MTFs in their respective areas of responsibility.

(3) Ensure that MTFs within each region comply with all sections of this policy.

(4) Ensure that MTF commanding officers (CO) appoint a Defense Enrollment Eligibility Reporting System (DEERS) Site Security Manager (SSM) who will manage access to DEERS.

(5) Ensure MTFs meet the requirement to conduct 100 percent DEERS eligibility verifications on all patients provided health care in their facility.

c. MTF COs and Officers in Charge must:

(1) Ensure every effort is made to capture accurate information during the patient registration process. Procedures and monitoring should be in place to ensure zero patient registration errors. To ensure patient duplications do not occur, a limited number of designated and trained staff should be identified as the personnel responsible for patient registration in the MTF. This includes full registration capability for the patient administration department admissions and dispositions staff, mini registration for appointment clerks in centralized call centers, as well as mini registration for two to three (maximum) staff members at any one time for each outpatient and ancillary clinic. Each patient registration clerk should receive initial and annual patient registration refresher training.

(2) Coordinate demographic DEERS information changes with the sponsor’s servicing pay and personnel office(s), as appropriate. Patients updating their demographic information in person should present their DoD identification (ID) card. If needed, patients may update their demographic information via telephone.
(3) Ensure newborn patient registration errors do not occur by implementing best practices that suit the MTF. This should be done through close coordination with admissions and dispositions, the member’s sponsor, and the servicing pay and personnel office(s).

(4) Evaluate this instruction’s effectiveness via mandatory participation and compliance with patient registration controls as an assessable unit in the Managers’ Internal Control Program.

(5) Maintain a current patient registration clerk standard operating procedures (SOP) (annual review required) to minimize and correct patient errors or beneficiary miscommunication, should they occur. At a minimum, the SOP must include:

(a) Customer service best practices.

(b) Patient protected health information (PHI) and personally identifiable information (PII) protocols based on current Federal and DoD policy.

(c) Procedures for command notification of patient status.

(d) Patient registration eligibility verification guidelines, described in enclosure (1) of this instruction.

(e) Patient registration clerk self-paced online learning topics.

(f) A copy of BUMEDINST 6010.32.

(g) NAVMED 6320/9 Eligibility for Medical Care and DD 2569 Third Party Collection Program/Medical Services Account/Other Health Insurance.

(6) Ensure patient registration clerks receive documented patient registration training. A menu of mandatory and recommended courses is outlined in enclosure (2) of this instruction. Each MTF will ensure appropriate monitoring, management, and documentation of initial, annual, and refresher training. Once the courses are complete, review and file the training certificates in the appropriate personnel training folders. At a minimum, patient registration training topics will include:

(a) Patient registration modules for the Composite Health Care System (CHCS) or Military Health System (MHS) GENESIS.

(b) Beneficiary eligibility verification to include DEERS and patient category (PATCAT) codes.
(7) Appoint a DEERS SSM to manage access to DEERS in their facility.

(8) Appoint a primary and secondary patient registration clerk for all MTF primary and specialty care clinics.

(9) Ensure compliance with all aspects of this policy.

5. **Review and Effective Date.** Per OPNAVINST 5215.17A, review this instruction annually on the anniversary of its effective date to ensure applicability, currency, and consistency with Federal, Department of Defense, Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will automatically expire 5 years after the effective date unless reissued or canceled prior to the 5-year anniversary date, or an extension has been granted.

6. **Forms**

   a. NAVMED 6320/9 Eligibility for Medical Care is available at: https://navalforms.documentservices.dla.mil/web/public/home.

   b. DD 2569 Third Party Collection Program/Medical Services Account/Other Health Insurance is available at: http://www.dtic.mil/whs/directives/forms/.

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Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site at: http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx.
1. **Overview.** Per reference (a), the military services administer the Uniformed Services Health Benefits Program. The authority for eligibility verification under the TRICARE Program is outlined in reference (b). Health care services are provided under these programs regardless of the military sponsor’s Service affiliation. Each Uniformed Service’s personnel authority establishes health care eligibility and ensures authorized beneficiaries are identified in DEERS.

   a. DoD ID cards no longer display social security numbers (SSN). Instead, a 10-digit DoD ID number, unique to each individual, is on the DoD ID Card. In addition, for those beneficiaries who are eligible for DoD benefits, an 11-digit DoD benefits number is also displayed on the card.

   b. Although DEERS and the DoD ID card system are related, a patient can be in possession of an apparently valid DoD ID card and found to be ineligible for care after the DEERS verification. If either system indicates ineligibility, the patient will be considered ineligible for care without other types of supporting documentation.

   c. The registration process begins with determining the identity of the patient and their respective unique identifiers, namely, the family member prefix and PATCAT. The Defense Manpower Data Center issued identifiers such as DoD ID and approved person IDs are critical elements in the reduction of health care fraud.

2. **Eligibility Verification.** When a patient arrives at the MTF with an emergency medical condition as deemed by the MTF treating physician, and proper identification is not available, treat and stabilize the patient. Prior to the patient release from the MTF, a NAVMED 6320/9 must be completed and signed by the patient or sponsor, indicating the patient will prove eligibility within 30 days or action will be initiated to recoup the cost of the health care. MTF personnel may not provide non-emergent care to patients with questionable eligibility. In non-emergency situations (as deemed by MTF treating physician), designated MTF personnel will confirm the patient’s identity and verify entitlement to health care by performing a two-step verification process that includes a DEERS and DoD ID card check. If the patient or sponsor does not have a valid DoD ID card, but is verified as eligible in DEERS, a NAVMED 6320/9 must be completed and signed by the patient or sponsor prior to delivery of care. If the patient or sponsor refuses to sign the NAVMED 6320/9, deny treatment or admission. Completion of the NAVMED 6320/9 does not apply to patients who meet DEERS exception criteria.

   a. **STEP 1 - Eligibility Verification.** Presentation of a valid DoD ID Card.

      (1) The photo identification matches the beneficiary.

      (2) The entitlement dates are appropriate.

Enclosure (1)
(3) The beneficiary is authorized health care.

(4) The DoD ID card has not been tampered with. If so, consider the ID card invalid.

(5) Per reference (d), if physical review of the DoD ID card determines that the DoD ID card is not valid, the DoD ID card is to be confiscated and immediately:

(a) Contact the patient administration department representative and MTF security officer or if after working hours, the MTF command duty officer (CDO).

(b) The MTF security officer or, if after working hours, the MTF CDO must take control of the DoD ID card. The MTFs servicing military criminal investigative organization will be notified when MTF personnel suspect that the DoD ID card has been tampered with or is being fraudulently used.

(c) Authorized MTF officials will mail or physically transport confiscated DoD ID cards to the nearest military DoD ID card issuing office using a trackable method to ensure the MTF can confirm the DoD ID cards have been received by personnel at the DoD ID card issuing office.

(d) If medical treatment has already been provided, the MTF or the Defense Health Agency (DHA) will take necessary action to initiate administrative recoupment actions for the costs of the unauthorized military medical benefit.

(6) Children under age 10 must be enrolled in DEERS, but generally do not require their own DoD ID card to prove health care eligibility. Certification and identification of children under age 10 will be the responsibility of the sponsor, parent, or legal guardian. Acceptable proof:

(a) Official Department of Social Services documentation appointing guardianship.

(b) Court documentation for adoption declaring a child to be a legal ward.

(c) Presentation of a medical power of attorney. If a power of attorney is not presented, an attempt to contact the sponsor will take place.

(d) If unable to contact the sponsor, and care is non-emergent, the minor will be denied treatment.

b. STEP 2 - Eligibility Verification. Via DEERS and CHCS:

(1) In DEERS, beneficiaries may have more than one eligibility status listed (e.g., dependent spouse is also a military retiree). CHCS or MHS GENESIS allows only for one registration eligibility status. Always register the patient under the highest status from DEERS.
(2) Patient registration clerks must register the patient utilizing the full registration option
in CHCS or MHS GENESIS at the patient’s highest level of eligibility identified in CHCS by
unique issued PATCAT’s. Verify and update all pertinent patient information to include the DD
2569 is on file within the last 365 days. Per reference (f) in the absence of an existing DD 2569
in the patient’s medical record or stored electronically in CHCS (or MHS GENESIS), the patient
registration clerk will require the patient to complete, sign, and date a new DD 2569.

(3) If the patient does not appear in CHCS, the patient registration clerk should perform
the following quality assurance checks before registering the patient:

(a) Why is the patient not registered?

(b) Is the name misspelled?

(c) Is the DoD ID number or SSN correct?

(d) Does the patient have a different last name from the sponsor?

(e) Has the patient been overlooked in the PICK LIST screen?

(f) Has the patient been previously registered incorrectly?

(g) Is the patient’s name hyphenated, and was the hyphen used?

(4) Per reference (d), 100 percent DEERS eligibility checks will be performed for all
outpatient visits and inpatient admissions at Navy MTFs. MTFs are responsible for verifying
health care eligibility for each patient seeking health care in the MTF by referencing DEERS.
MTF commanding officers must ensure that patient registration clerks receive initial and annual
DEERS training from the MTF DEERS Site Security Manager.

(5) Since most DoD electronic health information management systems identify the
patient by the sponsor’s DoD ID, it may be necessary to cross reference the sponsor’s SSN to
verify eligibility if the patient does not know it. Patient registration clerks should use the
General Inquiry of DEERS (GIQD) option on a government approved internet connection to
ensure a valid check of the sponsor’s SSN in DEERS.

(6) DEERS eligibility may be verified by accessing the CHCS-DEERS eligibility menu
option by DEERS sync/retrieve in MHS GENESIS, or by referring to the General Inquiry of
DEERS Internet Web site. MTF personnel must contact their DEERS SSM to obtain access to
this Web site. Eligibility issues will be referred to the MTF patient administration department
office.
(7) DEERS eligible beneficiaries who request care in a Navy MTF without an authorized DoD ID card must complete or have the patient’s sponsor complete a NAVMED 6320/9. Inform the patient that eligibility must be verified within 30 days or action will be initiated to recoup the cost of the health care.

3. **DEERS Exceptions.** The following beneficiaries are not authorized enrollment in DEERS and will show as ineligible. Reference (e) provides additional details. With proper documentation, these individuals should not be denied care solely based on a DEERS check:

   a. Secretarial Designees may be treated as indicated in their letter of designation. The letter should be issued and signed by an authorizing official.

   b. Reserve Component Service members who are on active duty for 30 days or less. These Reservists will not show eligible in DEERS and should produce a copy of their active duty orders related to any illness or injuries that occurred during the current set of orders. Reservists on active duty for greater than 30 days and their family members must present a valid DoD ID card and pass a DEERS check.

   c. Inactive Reservists who have been issued a line of duty authorization to obtain health care for an injury or illness acquired during a period of active duty.

   d. Reserve Officer Training Corps (ROTC) students who incur an injury or illness while traveling to or from and while attending required field training or practice cruises. ROTC students may also receive required medical examinations related to fitness for duty.

   e. Applicants for commissioning and enlistment in the uniformed services.


   g. Service members accepted into the Career Intermission Pilot Program.

   h. Other beneficiaries not mentioned above, refer to reference (e).

4. **Assisting patients with verifying and/or updating eligibility**

   a. For Active duty and retired service members, registration in DEERS is normally automatic; however, this is not true for family members. It is incumbent on the beneficiary to ensure they and their family members are registered and their accounts are updated in DEERS.
b. When DEERS verification cannot be validated for any beneficiary, a DEERS eligibility check must be performed. It is the beneficiary's responsibility to keep DEERS records updated when personal eligibility information changes. This includes changes in military career status, addresses, and family status (marriage, divorce, birth, and adoption) etcetera.

c. Beneficiaries should be referred to the DEERS Web site to update their address at: http://www.tricare.mil/Plans/Eligibility/DEERS.aspx; call 1 (800) 538-9552 or 1 (866) 363-2883 (TTY/TDD for the deaf); fax address changes to 1 (831) 655-8317; or visit the nearest DoD ID card facility (https://www.dmdc.osd.mil/rsl/appj/site?execution=e1s1).
1. Patient Registration Modules for the CHCS

   a. **CHCS System Orientation I: Basic Skills** (Course ID #DHA-US006) (1.0 hrs). Basic/beginner (CHCS) skills. Available via Joint Knowledge Online (JKO) under the Defense Health Agency (DHA) course catalog tab at: https://jkodirect.jten.mil/.

   b. **CHCS System Orientation II: Special Skills** (Course ID #DHA-US007) (1.0 hrs). Intermediate (CHCS) skills. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

   c. **CHCS Managed Care Program I: Booking Patient Appointments** (Course ID #DHA-US003) (1.0 hrs). The booking process for primary care clinics and referrals to specialty clinics. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

   d. **CHCS Managed Care Program II: Front Desk Clerk** (Course ID #DHA-US004) (1.0 hrs). Track patient electronic medical records. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

   e. CHCS Standard Insurance Table and OHI (Course ID #DHA-US040) (1.0 hrs). The meaning and use of the standard insurance table to include other health insurance (OHI). Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

   f. CHCS Medical Records Tracking I (Course ID #DHA-US009) (2.0 hrs). Comprehensive overview of medical records tracking and instruction on creating and tracking medical records. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

   g. CHCS Ambulatory Data Module Reports (Course ID #DHA-US008) (1.0 hrs). Process end of day reports and create additional ambulatory reports. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.

2. Beneficiary Eligibility Verification

b. **Defense Enrollment Eligibility Reporting System (DEERS)** (Course ID #YRRP-US039) (0.5 hrs). Overview of the DEERS, its importance, who is eligible, required documentation, and enrollment requirements. Available via JKO under the DHA course catalog tab at: [https://jkodirect.jten.mil/](https://jkodirect.jten.mil/).

3. Patient Relations and Customer Service Principles

   a. **Tricare Customer Service Refresher** (0.5 hrs). Concepts of exceptional customer service and best practices in communicating with patients. Available via TRICARE University Online at: [https://courses.tma.osd.mil/p6g6evy66b7/](https://courses.tma.osd.mil/p6g6evy66b7/).

   b. **Customer Service - Basic Principles-Section 100** (Course ID #CFHP NM-08-CSBP-1.1) (0.5 hrs). Principles of quality patient customer service. Available via CaC enabled My Navy Portal (MNP) Naval Education and Training Command (NETC) Learning Management System (LMS) tab at: [https://my.navy.mil/](https://my.navy.mil/).

   c. **Telephone Etiquette-Section 100** (Course ID #CFHP NM-08-CSTE-1.1) (0.5 hrs). Answering the phone promptly, taking accurate messages, properly transferring callers, and dealing with emotional callers. Available via MNP NETC LMS under the Navy Medical Education Training Regulated Training tab Available via NKO at: [https://my.navy.mil/](https://my.navy.mil/).

   d. **Proactive Behavior at Work-Section 100** (Course ID #CFHP NM-08-CSBPBW-1.1) (0.5 hrs). Recognition of potential issues before they occur and responding quickly and positively. Available via MNP NETC LMS under the Navy Medical Education Training Regulated Training Regulated Training tab at: [https://my.navy.mil/](https://my.navy.mil/).

   e. **Customer Service and Interpersonal Communication** (Course ID #NMHCI 2307V2.1) (0.5 hrs). Best practices in communicating a polite, caring, attentive, responsive, and empathetic attitude with patients. Available via JKO at: [https://jkodirect.jten.mil/](https://jkodirect.jten.mil/).

   f. **Responding to the Difficult Patient** (Course ID #NM-08-CSRDP-1.1) (0.5 hrs). How to best diffuse a patient's anger and create a positive dialogue through active listening and interpersonal communication. Available via MNP NETC LMS under the Navy Medical Education Training Regulated Training tab at: [https://my.navy.mil/](https://my.navy.mil/).

   g. **Public Law One: Patient Communications** (Course ID #JMESI–US007) (1.0 hrs). Describes Joint Commission standards on patient rights and responsibilities. Available JKO under the DHA course catalog tab at: [https://jkodirect.jten.mil/](https://jkodirect.jten.mil/).

4. Patient Privacy to PII and PHI

   a. **Privacy and PII Awareness** (Course ID #DON-CIO DOD-PII-2.0) (0.5 hrs). Department of the Navy's Privacy and PII Awareness Training. Available via JKO under the DHA course catalog tab at: [https://jkodirect.jten.mil/](https://jkodirect.jten.mil/).
b. Health Insurance Portability and Accountability Act (HIPAA) and Privacy Act (Course ID #DHA-US001) (2.0 hrs). Overview of two critical privacy laws – the HIPAA of 1996 and the Privacy Act of 1974. Discusses how these laws are applicable to the MHS. Available via JKO under the DHA course catalog tab at: https://jkodirect.jten.mil/.