



TRICARE® Plans Overview

Learn about TRICARE Prime®, TRICARE Select®, Premium-Based Plans, and TRICARE For Life

TRICARE is the worldwide health care program for uniformed service members and their eligible family members*. Depending on your eligibility, you can choose among TRICARE Prime, TRICARE Select, certain optional premium-based plans, or TRICARE For Life (TFL). Most TRICARE medical program options include comprehensive health care coverage and a pharmacy benefit.

TRICARE PRIME

TRICARE Prime is a managed care option, similar to a health maintenance organization (HMO) program. It generally features the use of military hospitals and clinics and substantially reduces out-of-pocket costs for authorized care provided outside military hospitals and clinics by TRICARE network providers. TRICARE Prime is mandatory for active duty service members (ADSMs) and is an option for their family members and certain TRICARE-eligible beneficiaries located in Prime Service Areas (PSAs) in the U.S.

In geographical areas where TRICARE Prime is not offered, TRICARE Prime Remote for Active Duty Family Members (TPRADFM) may be available as an enrollment option for eligible family members. In overseas locations, TRICARE Overseas Program (TOP) Prime and TOP Prime Remote are available to ADSMs and their command-sponsored family members.

The US Family Health Plan (USFHP) is an additional TRICARE Prime option available through networks of community-based, not-for-profit health care systems in six areas of the U.S. To enroll in USFHP, you must live in one of the designated service areas†.

* Uniformed service members includes active duty and retired members of the: U.S. Army, U.S. Air Force, U.S. Navy, U.S. Marine Corps, U.S. Coast Guard, the Commissioned Corps of the U.S. Public Health Service, and the Commissioned Corps of the National Oceanic and Atmospheric Administration.

† For USFHP locations and information, visit www.tricare.mil/usfhp.

Under a TRICARE Prime option, your health care is managed by an assigned primary care manager (PCM) and provided by a military or civilian network provider. Non-active duty enrolled beneficiaries will select or be assigned a PCM. TRICARE Prime PCMs may be: (1) at a military hospital or clinic; (2) a civilian TRICARE network provider within a PSA; or (3) a primary care provider in the USFHP, depending on your location and sponsor status. Whether you receive care in the civilian sector or at a military hospital or clinic will depend on your location and the capacity at nearby military facilities.

TRICARE SELECT

TRICARE Select is a self-managed, preferred-provider option for eligible beneficiaries (except ADSMs and TFL beneficiaries) not enrolled in TRICARE Prime. TRICARE Select allows beneficiaries to choose their own TRICARE-authorized provider and manage their own health care.

Beneficiaries may receive enhanced TRICARE Select benefits from any TRICARE-authorized provider without a referral. You will have lower out-of-pocket costs if care is provided by a TRICARE network provider. Some services require prior authorization. You can also receive certain services from non-network, TRICARE-authorized providers, but will pay higher cost-sharing amounts for out-of-network care. Care received from non-authorized, non-network providers will not be reimbursed by TRICARE.

Under a TRICARE Select option, you pay a fixed fee for care from a TRICARE network provider instead of paying a percentage of the allowable charge. Using a non-network, TRICARE-authorized provider will result in both a higher deductible and out-of-pocket costs.

In overseas locations, TOP Select is available to eligible family members not enrolled in TOP Prime. Where the TRICARE network has not been established in an overseas location, TRICARE Select beneficiaries who receive medically necessary covered services from a non-network, TRICARE-authorized provider shall be subject to cost-sharing amounts applicable to out-of-network care.

PREMIUM-BASED PLANS

TRICARE offers other coverage options for purchase by qualified members of the Selected Reserve or Retired Reserve who aren't in an activated status or for those who have eligibility changes, such as children aging out of regular TRICARE coverage.

- **TRICARE Reserve Select® (TRS)**
Qualified Selected Reserve members may purchase TRICARE Select coverage for themselves and eligible family members under TRS.
- **TRICARE Retired Reserve® (TRR)**
Qualified Retired Reserve members may purchase TRICARE Select coverage for themselves and eligible family members under TRR.
- **TRICARE Young Adult (TYA)**
This plan extends TRICARE benefits to certain family members under the age of 26 who have lost or will lose TRICARE eligibility due to age. Qualified adult children can purchase TYA after “regular” TRICARE coverage ends at either age 21 (or age 23 if enrolled in college full-time or at college graduation, whichever comes first). TYA beneficiaries can enroll in either TRICARE Prime or TRICARE Select.

TRICARE FOR LIFE

TFL is Medicare-wraparound coverage for TRICARE beneficiaries who have Medicare Part A and Medicare Part B, regardless of age or place of residence. TFL provides comprehensive health care coverage and beneficiaries are also covered under the TRICARE Pharmacy Program. You may get care from any Medicare participating, non-participating, or opt-out provider. Medicare participating providers accept the Medicare-allowed amount as payment in full. Medicare non-participating providers may bill 15 percent above the Medicare-allowed amount. Opt-out providers can't bill Medicare, and TRICARE will pay up to 20 percent of the TRICARE-allowable amount. You may also receive care at military hospitals and clinics if space is available.

TRANSITIONAL COVERAGE OPTIONS

TRICARE offers benefits to help certain service members and their families transition to civilian life.

- **Transitional Assistance Management Program (TAMP):**
TAMP offers 180 days of premium-free health care after your sponsor separates from the military. If you're eligible, TAMP starts the day after the sponsor separates from service.
- **Continued Health Care Benefit Program (CHCBP):**
This premium-based plan offers health coverage for 18–36 months after TRICARE eligibility or premium-based plan coverage ends for certain beneficiaries.

Medicare participating providers file your claims with Medicare. After paying its portion, Medicare automatically forwards the claim to Wisconsin Physicians Service (WPS) Military and Veterans Health for processing (unless you have other health insurance [OHI]). If your OHI pays after Medicare, you'll need to file a claim with TRICARE for reimbursement of any remaining balance. TRICARE pays after Medicare and OHI for TRICARE covered health care services.

For TFL overseas, when seeking care from a civilian provider be prepared to pay up front for services and submit a claim to the TOP claims processor, International SOS. Overseas, TFL is the only payer unless you have OHI.

TRICARE PLUS

TRICARE Plus is a primary care program offered at some military hospitals and clinics. TRICARE Plus provides access to primary care at the military hospital or clinic where you are enrolled. TRICARE Plus doesn't cover specialty care.

Each military hospital or clinic commander decides if TRICARE Plus is available. You must enroll to participate and your enrollment is only for the hospital or clinic where you are enrolled. Priority for access to military hospitals and clinics is based on your beneficiary category and program option.

You can enroll in TRICARE Plus if you are TRICARE-eligible (and not enrolled in a TRICARE Prime option or a civilian or Medicare HMO) or a dependent parent or parent-in-law. TRICARE won't pay for care by civilian providers, even if the

military hospital or clinic refers you for care. You're responsible for the full cost of any care provided by civilian providers.

PHARMACY COVERAGE

The TRICARE Pharmacy Program provides prescription drugs through military pharmacies, TRICARE Pharmacy Home Delivery, TRICARE retail network pharmacies, and non-network pharmacies. Your options for filling your prescription depend on the type of drug your provider prescribes. If you're in USFHP, you have different pharmacy coverage.

ELIGIBILITY

Registering and maintaining up-to-date information in the Defense Enrollment Eligibility Reporting System (DEERS) is essential for determining TRICARE eligibility. Only sponsors (or a sponsor-appointed individual with a valid power of attorney) can add family members to DEERS. Family members age 18 and older may update their own contact information in DEERS. Visit www.tricare.mil/deers for more information.

TRICARE Prime

For ADSMs located in areas where TRICARE Prime is available, enrollment in TRICARE Prime is mandatory. Stateside, ADFMs, retirees, and retiree family members may also enroll in TRICARE Prime if they live in a PSA or, with a drive-time waiver, within 100 miles of an available PCM. It is typically an area near a military hospital or clinic. Within PSAs, TRICARE Prime is available to:

- ADFMs
- Transitional survivors
- Retirees, retiree family members, and survivors including, under limited circumstances, those who are TFL beneficiaries under age 65
- National Guard and Reserve members (who are called or ordered to active duty for more than 30 days for a preplanned mission or in support of a contingency operation) and their eligible family members
- Medal of Honor recipients and their family members
- Qualified former spouses

Note: Stateside ADSMs and their families (under limited circumstances), who don't live in PSAs may enroll in TRICARE Prime Remote.

In remote locations overseas, ADSMs and National Guard and Reserve members, called or ordered to active duty for more

than 30 days in support of a preplanned mission or contingency operation are required to enroll in TOP Prime Remote. The plan is also available to command-sponsored, eligible ADFMs. TOP Prime and TOP Prime Remote are not available to retirees, retiree family members, and survivors overseas.

TRICARE Select

TRICARE Select is available to:

- ADFMs and family members of activated National Guard and Reserve members
- Certain retirees, retiree family members, and survivors
- Non-activated National Guard and Reserve members and their families who qualify under TAMP
- Transitional Survivors
- Medal of Honor recipients and their family members
- Qualified former spouses

Qualified National Guard and Reserve members may purchase TRICARE Select coverage for themselves and their families under TRS or TRR plans.

For more information about beneficiary categories, visit www.tricare.mil/eligibility.

ENROLLMENT

You can only enroll in or change enrollment to TRICARE Prime or TRICARE Select following a Qualifying Life Event (QLE) or during the annual fall TRICARE Open Season. You can purchase premium-based plans (TRS, TRR, TYA, CHCBP) at any time.

A QLE is a certain change in your life, such as marriage, birth of a child, or retirement from active duty, which may mean different TRICARE options are available to you. A QLE opens a 90-day period for you to make eligible enrollment changes. A QLE for one family member means all family members may make enrollment changes. To learn more, visit www.tricare.mil/lifeevents.

TRICARE Open Season is the annual period when you can enroll in or change your health care coverage plan for the next year. To learn more, visit www.tricare.mil/openseason.

If you don't enroll in a TRICARE plan, you'll only be able to receive care at military hospitals and clinics if space is available.

For more information, go to www.tricare.mil/enroll.

COSTS

TRICARE medical program costs are subject to change each Jan. 1 and are effective each calendar year from Jan. 1 through Dec. 31. For more information, visit www.tricare.mil/costs.

Depending on a sponsor's initial enlistment or appointment, beneficiaries fall into one of two groups. Your group designation determines your costs.

- **Group A:** Enrollees whose uniformed services sponsor's initial enlistment or appointment occurred before Jan. 1, 2018. When enrolled in TRS, TRR, TYA, or CHCBP, Group A enrollees follow Group B cost-shares, deductibles, and catastrophic caps.
- **Group B:** Enrollees whose uniformed services sponsor's initial enlistment or appointment occurred on or after Jan. 1, 2018.

CONTACT

Your TRICARE benefit is the same regardless of where you are, but there are different customer service contacts. Each region is managed by a contractor who partners with the Military Health System to provide you with health, medical, and administrative support including customer service, claims processing, and prior authorizations for certain health care services. Your regional and overseas contractors are your main resource for TRICARE benefit information and assistance.

If you are entitled to Medicare Part A and Part B and use TFL, there are two contractors for TFL which provide customer service and claims processing. Wisconsin Physicians Service Military and Veterans Health for care received within the U.S., its territories or territorial waters; and International SOS Government Services, Inc. for care received overseas.

LOOKING FOR **More Information?**

GO TO www.tricare.mil/contactus

E

TRICARE East Region

Humana Military
1-800-444-5445
HumanaMilitary.com
www.tricare-east.com

W

TRICARE West Region

Health Net Federal Services, LLC
1-844-866-WEST
(1-844-866-9378)
www.tricare-west.com



TRICARE For Life

www.tricare.mil/tfl
Wisconsin Physicians Service
Military & Veterans Health
1-866-773-0404
www.tricare4u.com

O

TRICARE Overseas Program (TOP)

International SOS
Government Services, Inc.
www.tricare-overseas.com
For toll-free contact information, visit
www.tricare-overseas.com/contactus

TRICARE Prime

www.tricare.mil/prime

TRICARE Select

www.tricare.mil/select

TRICARE Plus

www.tricare.mil/plus

TOP Regional Call Centers

Eurasia-Africa
+44-20-8762-8384 (overseas)
1-877-678-1207 (stateside)
tricarelon@internationalsos.com

TRICARE Reserve Select

www.tricare.mil/trs

TRICARE Retired Reserve

www.tricare.mil/trr

TRICARE Young Adult

www.tricare.mil/tya

Latin America and Canada

+1-215-942-8393 (overseas)
1-877-451-8659 (stateside)
tricarephi@internationalsos.com

US Family Health Plan

1-800-74-USFHP
(1-800-748-7347)
www.tricare.mil/usfhp

Transition Assistance Management Program

www.tricare.mil/tamp

Continued Health Care Benefit Program

www.tricare.mil/chcbp

Pacific (Singapore)

+65-6339-2676 (overseas)
1-877-678-1208 (stateside)
sin.tricare@internationalsos.com

TRICARE Pharmacy

www.tricare.mil/pharmacy

Pacific (Sydney)

+61-2-9273-2710 (overseas)
1-877-678-1209 (stateside)
sydticare@internationalsos.com

An Important Note About TRICARE Program Information

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. **Military hospital and clinic guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic.

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