



Updated August 2016

# TRICARE® Benefits/Programs for National Guard and Reserve Members during Retirement

Your Options For Care After Retirement

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# TRICARE Benefits/Programs for National Guard and Reserve Members during Retirement

## Today's **AGENDA**

What Is TRICARE?

TRICARE Program Options:

Under Age 60

Ages 60-64

Age 65 and Older

TRICARE Benefit Information

For Information and Assistance



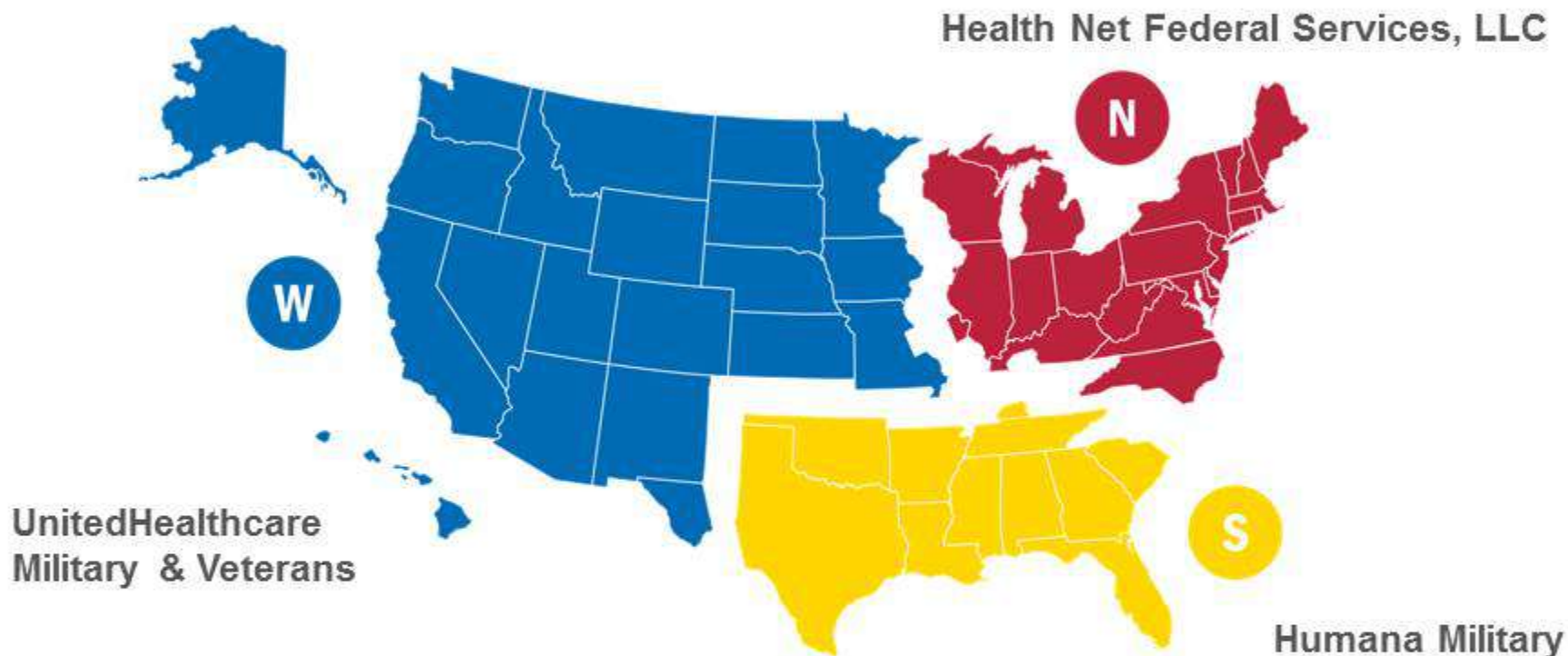
# What Is TRICARE?



- Uniformed services health care program
- Worldwide network
  - Military hospitals and clinics
  - Civilian health care providers



# TRICARE Stateside Regions



# Keep DEERS Information Up To Date



Go to an **ID card office**. Find an office at [www.dmdc.osd.mil/rsl](http://www.dmdc.osd.mil/rsl).

**Note:** You must use this option to add family members in DEERS.

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Log on to <http://milconnect.dmdc.osd.mil>.

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Call **1-800-538-9552**.

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Fax **1-831-655-8317**.

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# Retired Reserve Coverage Timeline

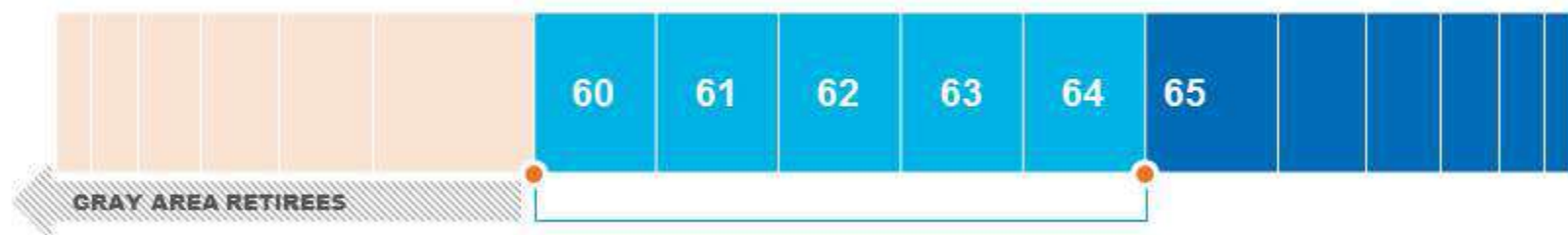
## National Guard or Reserve Retirement

### Under age 60

Retired Reserve members may qualify to purchase TRR

### Age 65 and above\*

Begin TRICARE For Life



### Ages 60-64\*

Eligible for TRICARE Standard and TRICARE Extra, and TRICARE Prime where available

- \* If you become Medicare-eligible due to disability, you may transition to TRICARE For Life as early as age 60.

# TRICARE Retired Reserve<sup>®</sup>:

## Step 1—Qualify

- A Retired Reserve member may qualify to purchase TRR if he or she is:
  - A member of the Retired Reserve who is qualified for non-regular retirement
  - Under age 60
  - Not enrolled, or eligible to enroll, in the Federal Employees Health Benefits Program (FEHB)
- To determine qualification, log on to the Defense Manpower Data Center (DMDC) Reserve Component Purchased TRICARE Application at **[www.dmdc.osd.mil/appj/reservetricare](http://www.dmdc.osd.mil/appj/reservetricare)**.



# TRR Coverage

- Member-only or member-and-family TRR coverage may be purchased for:
  - Qualified Retired Reserve members
  - Their eligible family members
  - Survivors
- Survivors of TRR members may purchase or continue coverage until the date the deceased sponsor would have reached age 60.
- For more information, go to **[www.tricare.mil/retiring](http://www.tricare.mil/retiring)**.



# TRR: Step 2—Purchase

To purchase TRR:

1. Complete and sign the *Reserve Component Health Coverage Request Form* (DD Form 2896-1).
2. Mail the completed *DD Form 2896-1* to the TRICARE contractor address listed on the form.
3. Make an initial premium payment as indicated on the form. The initial payment required is two months of premiums.

**Note:** If enrolled in another TRICARE program, submit a TRR application within 30 days of the other TRICARE program ending to ensure continuous coverage.

## TRR Costs

- Monthly premiums (per calendar year):
  - Go to **[www.tricare.mil/costs](http://www.tricare.mil/costs)**
- Yearly deductible: \$150 per individual; \$300 per family
- Cost-shares apply for covered services and vary depending on the type of provider (network or non-network).
- Catastrophic cap: \$3,000 per family, per fiscal year (FY) for covered services

**Note:** All ongoing premium payments must be made by either automatic electronic funds transfer or automatic charge to a credit or debit card.

# TRR: Getting Care

- TRR coverage follows the rules of TRICARE Standard and TRICARE Extra.
- For TRICARE Standard, find a non-network TRICARE-authorized provider.
- For TRICARE Extra, find a TRICARE network provider.
- With TRR, no referrals are necessary, but some services require prior authorization.
- In an emergency, call 911 or go to the closest emergency room.
- To find space-available care at a military hospital or clinic near you, go to **[www.tricare.mil/mtf](http://www.tricare.mil/mtf)**.

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# Terminal Leave Status

- Current TRICARE program options stay in effect until your retirement date. If covered under TRICARE Prime:
  - Active duty service members (ADSMs) cannot enroll with another military hospital or clinic.
  - ADSMs cannot switch their primary care manager (PCM).
- If you move to a new area:
  - Coordinate all care with your current PCM.
  - Family members may be able to change their PCMs.
- Remember to update your information in DEERS.

# Coverage Options Upon Turning Age 60

- Upon turning age 60 and collecting retirement pay, TRR members are disenrolled from TRR and may be eligible for other TRICARE programs as retirees, such as:
  - TRICARE Standard and TRICARE Extra
  - TRICARE Prime (if in a PSA), including the US Family Health Plan
  - TFL
- If entitled to premium-free Medicare Part A at age 60 or older, Retired Reserve members must also have Medicare Part B to be TRICARE-eligible. Before age 65, beneficiaries have the option to use TRICARE Prime or TFL. At age 65, coverage transitions to TFL.

# TRICARE Standard<sup>®</sup> and TRICARE Extra

- No enrollment, enrollment fees or referrals are required.
- Yearly deductible and cost-shares apply.
  - Go to [www.tricare.mil/costs](http://www.tricare.mil/costs).
- Save money by seeing a TRICARE network provider.
- Prior authorization is required for some services.
  - Check your regional contractor's website.
- For more information, go to [www.tricare.mil/standard](http://www.tricare.mil/standard).
- **Note:** TRICARE Extra is not available overseas.



# Getting Care: TRICARE Standard and TRICARE Extra

- Select any TRICARE-authorized provider:
  - Non-network provider—TRICARE Standard
  - Network provider—TRICARE Extra
- TRICARE network providers:
  - Accept TRICARE as the full payment for covered services
  - File claims for you
- Space-available care at military hospitals and clinics



# TRICARE Prime®

- Enroll in TRICARE Prime:
  - **Online:** Enroll using the Beneficiary Web Enrollment (BWE) website at [www.dmdc.osd.mil/appj/bwe](http://www.dmdc.osd.mil/appj/bwe).
  - **By phone:** Call your regional contractor.
  - **By mail:** Download the *TRICARE Prime Enrollment, Disenrollment, and Primary Care Manager (PCM) Change Form* (DD Form 2876) and submit it to your regional contractor. To get *DD Form 2876*, go to [www.tricare.mil/forms](http://www.tricare.mil/forms).
- For enrollment fees, premium amounts and copayments, go to [www.tricare.mil/costs](http://www.tricare.mil/costs).

**Note:** TRICARE Prime Remote coverage options aren't available after retirement.



# Getting Care: TRICARE Prime

- Enroll with a:
  - Military hospital or clinic (space permitting)
  - Civilian TRICARE network provider within a PSA
  - Primary care health care provider in the US Family Health Plan, depending on your location and sponsor status
- Get a primary care manager (PCM) referral for civilian specialty care (otherwise, higher costs apply).
- If traveling or moving:
  - **Routine care:** Get care before traveling.
  - **Urgent care:** Call your PCM or regional contractor for assistance.
  - **Emergency care:** Call 911 or go to the closest emergency room.
  - **Seasonal moves:** Consider transferring enrollment.

# TRICARE Prime

## Point-of-Service Option

- Point-of-service (POS) option:
  - Applies when nonemergency care is provided by a TRICARE-authorized provider without a PCM referral
  - Results in higher out-of-pocket costs
- TRICARE pays only if the provider is TRICARE-authorized and services are covered by TRICARE.
- Contact your PCM for a referral when seeking nonemergency care to avoid POS charges.
- POS deductibles per FY: **\$300/individual; \$600/family**
  - TRICARE pays 50 percent of the TRICARE-allowable charge.

## ① \$ Yearly Catastrophic Cap

- The most you or your family will pay for covered health care services each fiscal year (FY) (Oct. 1–Sept.30)
- Applies to all covered services, including yearly deductibles, pharmacy copayments, TRICARE Prime enrollment fees and other cost-shares, based on TRICARE-allowable charges
- \$1,000 per family, per FY for active duty family members and TRICARE Reserve Select beneficiaries
- \$3,000 per family, per FY for retirees, their family members, TRICARE Retired Reserve beneficiaries and all others
- TRICARE pays your portion of the TRICARE-allowable amount for all covered services for the rest of the fiscal year when the catastrophic cap is met
- Point-of-service charges and additional non-network provider charges do not count toward the catastrophic cap

# TRICARE Young Adult

- TRICARE Young Adult (TYA) is available to qualified unmarried dependents of TRICARE-eligible sponsors who are:
  - At least age 21, but not yet age 26
  - Not eligible to enroll in an employer-sponsored health plan
  - Not otherwise eligible for TRICARE program coverage
  - Not a uniformed service sponsor (for example, a member of the Selected Reserve)
- For TYA qualification, cost and enrollment information, go to **[www.tricare.mil/tya](http://www.tricare.mil/tya)**.





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# Dual Eligibility

- TRICARE beneficiaries who are entitled to Medicare Part A (inpatient services), regardless of the reason, **must** have Medicare Part B coverage (outpatient services) to remain eligible for TRICARE.
- Exceptions:
  - Active duty service members (ADSMs) and active duty family members (ADFMs)
  - Beneficiaries who have purchased TRICARE Young Adult, TRICARE Reserve Select, or TRICARE Retired Reserve, and those enrolled in the US Family Health Plan or TRICARE Plus

**Contact the Social Security Administration (SSA)  
or Medicare for more information:**

**1-800-772-1213 ♦ [www.ssa.gov](http://www.ssa.gov)**

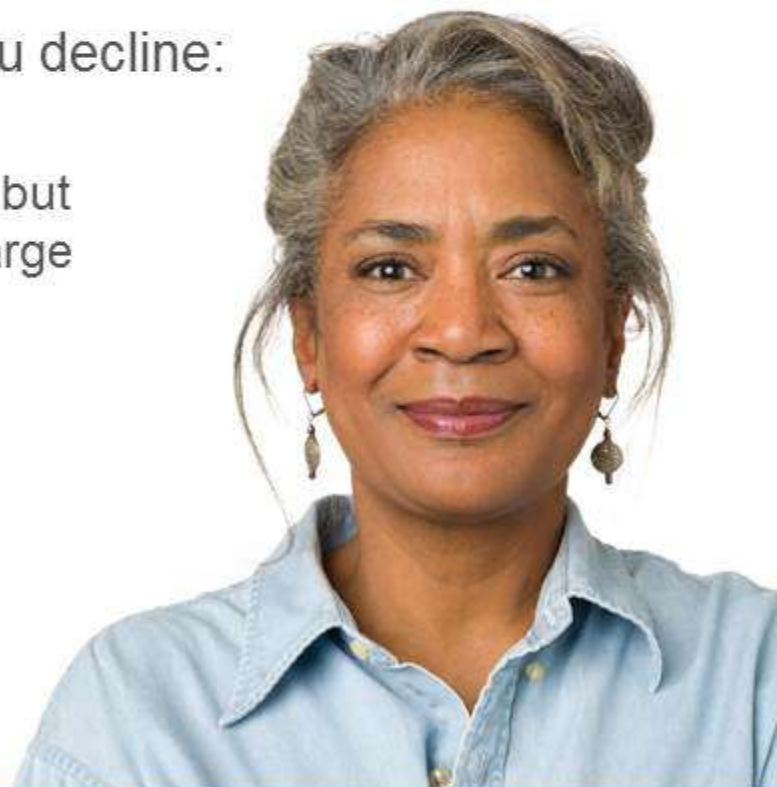
**1-800-MEDICARE ♦ [www.medicare.gov](http://www.medicare.gov)**

# Eligible for Medicare Part B under Age 65

- If your Medicare entitlement is based on a disability:
  - Your Medicare entitlement begins after 24 months of Social Security disability insurance. The 24-month waiting period does not apply to beneficiaries with amyotrophic lateral sclerosis (also called Lou Gehrig's disease).
- If you have end-stage renal disease:
  - You must sign up for Medicare to remain TRICARE-eligible. Medicare begins the first day of the fourth month of dialysis treatments.
    - Medicare may begin as early as the first month of dialysis if you participate in a home dialysis training program and you do home dialysis treatments.
    - If you have a kidney transplant, your entitlement begins the month the transplant is performed, or earlier.

# Eligible for Medicare Part B at Age 65

- Five months before your 65th birthday, you will receive a notification from the Defense Manpower Data Center (DMDC) informing you of the requirement to sign up for Medicare.
- DO NOT decline Medicare Part B. If you decline:
  - You may not be eligible for TRICARE.
  - You can enroll in Medicare Part B later, but you may have to pay a premium surcharge for late enrollment.





# Not Eligible for Premium-Free Medicare Part A

- If you are **not eligible** for premium-free Medicare Part A under your own earnings record, you will receive a “Notice of Award” and/or “Notice of Disapproved Claim.”
- If you are married, you must also file for Medicare Part A under the earnings record of your spouse (including divorced or deceased spouses) age 62 or older.



# Reflecting Medicare Eligibility in DEERS

- DMDC receives weekly updates from the Centers for Medicare & Medicaid Services that identify TRICARE beneficiaries who are entitled to Medicare.
- To confirm that your DEERS record has been updated, contact the DMDC Support Office at **1-800-538-9552**.
- If you are not eligible for premium-free Medicare Part A under your own SSN or your current, divorced, or deceased spouse's SSN, take your "Notices of Award" and/or "Notices of Disapproved Claim" to the nearest ID card-issuing facility to update your DEERS record.
  - You may be issued a new uniformed services ID card when you update DEERS with your Medicare information.



# TRICARE Prime® and Medicare Entitlement

- TRICARE Prime enrollment fees are waived for beneficiaries with Medicare Part B.
- With TRICARE Prime, you will not need to file claims in most cases. However, when you need to file a claim, file with Medicare first. Medicare pays its portion and electronically forwards the claim to WPS.
- Overseas, claims should be filed with the TRICARE Overseas Program claims processor for the area where care was received.
- The TRICARE Prime benefit is administered by regional contractors.

# TRICARE For Life

- TRICARE For Life (TFL) is available to TRICARE beneficiaries who have Medicare Part A and Medicare Part B, regardless of age or place of residence.
- Care is received from any Medicare provider, and beneficiaries may seek military hospital or clinic care on a space-available basis.
- TRICARE is the last payer after Medicare (and other health insurance [OHI], if applicable).
  - If you have OHI, you are responsible for filing a claim with WPS after Medicare and OHI have processed and paid their portion of the claim.
- The TFL benefit is administered by WPS.

**WPS Contact Information**  
**1-866-773-0404 ♦ [www.tricare4u.com](http://www.tricare4u.com)**

# Medicare Card

**MEDICARE HEALTH INSURANCE**

1-800-MEDICARE (1-800-633-4227)

NAME OF BENEFICIARY  
**JANE DOE**

MEDICARE CLAIM NUMBER  
**000-00-0000-A**

SEX  
**FEMALE**

IS ENTITLED TO  
**HOSPITAL (PART A)**  
**MEDICAL (PART B)**

EFFECTIVE DATE  
**07-01-1986**  
**07-01-1986**

SIGN  
HERE

DO NOT SEND CLAIMS FOR PAYMENT OF  
MEDICARE BENEFITS TO THIS (↓) ADDRESS

- TRICARE does not issue a health insurance card for TFL.
- When receiving care, show your Medicare card along with your uniformed services ID card.

*Shows your entitlement to Medicare Part A and Part B and the effective dates of coverage.*

**Call 1-800-772-1213 or visit [www.socialsecurity.gov](http://www.socialsecurity.gov) if you misplace your Medicare card.**

# How TFL Works

- Visit your Medicare-participating provider for care.
- Your provider files a claim with Medicare.
- Medicare pays its portion and sends the claim to WPS.
- WPS pays the remaining amount to your provider for services covered by Medicare and TRICARE.
- You get a *Medicare Summary Notice* (MSN) from Medicare and an explanation of benefits (EOB) from TRICARE.

**Note:** TRICARE is the primary payer for TRICARE-covered services received in areas where Medicare is not available (e.g., overseas). Expect to pay up front and file a claim with the TOP claims processor for reimbursement.

**WPS Contact Information**

**1-866-773-0404 ♦ [www.tricare4u.com](http://www.tricare4u.com)**



## \$ What You Pay

| Type of Service  | Medicare Pays              | TRICARE Pays             | You Pay   |
|--|----------------------------|--------------------------|---|
| Covered by TRICARE and Medicare  | Medicare-authorized amount | TRICARE-allowable amount | Nothing   |
| Covered by Medicare only (e.g., chiropractic care)                         | Medicare-authorized amount | Nothing                  | Medicare annual deductible and cost-share                                   |
| Covered by TRICARE only (e.g., TRICARE-covered services received overseas) | Nothing                    | TRICARE-allowable amount | TRICARE annual deductible and cost-share                                    |
| Not covered by TRICARE or Medicare   | Nothing                    | Nothing                  | Billed charges (which may exceed the Medicare- or TRICARE-allowable amount) |



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# TRICARE and Other Health Insurance

- Other health insurance (OHI) is considered your primary health insurance.
- For services covered by Medicare, OHI and TFL, Medicare pays first, your OHI pays second and TRICARE pays last.
- After your OHI pays, TRICARE will pay the lesser of:
  - The billed amount, minus the payment from your OHI
  - The amount TRICARE would have paid without OHI
  - The OHI copayment or deductible
- If you have OHI:
  - Fill out a *TRICARE Other Health Insurance Questionnaire*: **[www.tricare.mil/forms](http://www.tricare.mil/forms)**.
  - Follow the referral and authorization rules for your OHI.
  - Tell your provider about your OHI and TRICARE.

# \$ TRICARE Pharmacy Program

## TRICARE Pharmacy Program Costs (Feb. 1, 2016–Jan. 31, 2017)

| Pharmacy Option   | Formulary Drugs |            | Nonformulary Drugs |
|---|-----------------|------------|--------------------|
|   | Generic         | Brand-name |                    |
| <b>Military Pharmacy</b><br>(up to a 90-day supply)               | \$0             | \$0        | Not available      |
| <b>TRICARE Pharmacy Home Delivery</b><br>(up to a 90-day supply)  | \$0             | \$20       | \$49               |
| <b>TRICARE Retail Network Pharmacy</b><br>(up to a 30-day supply) | \$10            | \$24       | \$50               |

## Pharmacy Benefits with OHI

- OHI is always the primary payer.
  - Use OHI first, then submit claims to TRICARE.
- You may use TRICARE Pharmacy Home Delivery or TRICARE retail network pharmacies only if:
  - OHI does not cover your prescription.
  - You have reached your OHI's benefit cap.
- You may still use military pharmacies.

# TRICARE Retiree Dental Program (TRDP)

- TRDP:
  - Available to Retired Reserve members and their qualifying family members
  - Single, dual and family plans are available
- Beneficiaries pay monthly premiums that vary regionally by ZIP code, deductibles and cost-shares.
- For more information, go to **[www.trdp.org](http://www.trdp.org)** or call Delta Dental of California at **1-888-838-8737**

**Note:** There are no network dental care providers outside of the U.S. and U.S. territories. Purchased care sector providers are available overseas, but they aren't part of the TRDP dental care provider network.



# The Affordable Care Act

**TRICARE meets the minimum essential coverage requirement under the Affordable Care Act (ACA).**



Each tax year, you will get an Internal Revenue Service (IRS) Form 1095 from your pay center. It will list your TRICARE coverage for each month.



Your Social Security number (SSN) and the SSNs of each of your covered family members should be included in DEERS for your TRICARE coverage to be reflected accurately.



## Stateside Regional Contractors

**N**

### TRICARE North Region

Health Net Federal Services, LLC  
1-877-TRICARE (1-877-874-2273)  
www.hnfs.com

**S**

### TRICARE South Region

Humana Military  
1-800-444-5445  
HumanaMilitary.com

**W**

### TRICARE West Region

UnitedHealthcare Military & Veterans  
1-877-988-WEST (1-877-988-9378)  
www.uhcmilitarywest.com



## Overseas Regional Contractor

**O**

### TRICARE Overseas Program (TOP)

International SOS  
Government Services, Inc.  
www.tricare-overseas.com

### TOP Regional Call Centers

#### *Eurasia-Africa*

+44-20-8762-8384 (overseas)  
1-877-678-1207 (stateside)

#### *Latin America and Canada*

+1-215-942-8393 (overseas)  
1-877-451-8659 (stateside)

#### *Pacific*

Singapore: +65-6339-2676 (overseas)  
1-877-678-1208 (stateside)  
Sydney: +61-2-9273-2710 (overseas)  
1-877-678-1209 (stateside)

## Additional Contacts

### milConnect Website

<http://milconnect.dmdc.osd.mil>

### TRICARE For Life

Wisconsin Physicians Service—  
Military and Veterans Health  
1-866-773-0404  
www.TRICARE4u.com

### US Family Health Plan

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

### More Resources

#### TRICARE Website

[www.tricare.mil](http://www.tricare.mil)

#### Publications

[www.tricare.mil/publications](http://www.tricare.mil/publications)

### Connect with TRICARE Online



[www.tricare.mil/media](http://www.tricare.mil/media)