

Medical and Dental Benefits



Tricare is the military health care program for active and retired service members and their families. It is important that you become educated about your TRICARE benefits. TRICARE Service Centers are available throughout each region to provide information and assistance on the TRICARE program. Beneficiary Counseling and Assistance Coordinators (BCAC) are also available at each Military Treatment Facility (MTF) to assist with health benefit issues.

It is very important that active duty members notify their commanders if they have a family member (spouse or child) that has a special medical condition or situation that requires ongoing medical care.

Active duty members are not automatically enrolled in Tricare Prime; they must enroll each time they PCS to another base. Once an active duty member adds a spouse, the spouse automatically has Tricare Standard, unless they elect for Tricare Prime or Tricare Extra. At most military treatment facilities, anyone with Tricare Standard is seen on a space available basis.

The order in which patients are seen are as follows:

1. Active duty members
2. Active duty family members with Tricare Prime/Plus
3. Retirees/retiree dependants with Tricare Prime/Plus
4. Anyone with Tricare Standard. Standard patients may not be space available at all bases, so the spouses will have to contact their local Tricare Service Center to find out.

TRICARE STANDARD

Tricare Standard is the same as the old CHAMPUS program with the same benefits and cost-sharing structure. It gives you the greatest freedom of choice but at the most cost to you personally. When they go in for a doctor's visit they would just show their military ID. Under Tricare Standard, you can only be seen on a space available basis on most bases. You can see a civilian doctor that accepts Tricare Standard/Champus. The cost for Tricare Standard is as follows:

Family of E-4 and below: \$50/person or \$100/family (per year) and a 20% cost share of Tricare allowable charges.

Family of E-5 and above: \$150/person or \$300/family (per year) and a 20% cost share of Tricare allowable charges.

Retirees and retiree family members: \$150/person or \$300/family (per year) and a 25% cost share of Tricare allowable charges.

Once the deductible is met, the only cost the beneficiaries would have is the cost share.

The charges listed above apply to outpatient care. There is a different co-pay of \$12.72 per day for inpatient care. The cost for retiree inpatient care is \$417 per day or 25% of the total institutional charge, whichever is less, plus 25% of professional charges.

TRICARE EXTRA

Tricare Extra is just a 5% discount off the cost share percent. The beneficiaries would have to get a provider directory from their local Tricare Service Center for a list of Tricare Extra doctors.

TRICARE PRIME

Under Tricare Prime you have priority access at a Military Treatment Facility. In order for the spouses and children to be Tricare Prime, either the active duty member or the spouse will have to fill out a Tricare Prime Enrollment Application. You will need to know the active duty member's Social Security Number in order to sign-up for Tricare Prime. Under Prime, the beneficiary would choose a Primary Care Manager (PCM) at the Military Treatment Facility. They will see that doctor for all their basic health care. If they need to see a specialist, their PCM will write a referral/consult for them.

“Access Standards” ensure that folks enrolled in Tricare Prime receive care in a timely manner. The standards are as follows:

Emergencies must be seen.....immediately (if emergency services are available on base)

Urgent Care must be seen.....within 24 hours

Routine visits must be seen.....within 1 week

Wellness visits must be seen....within 4 weeks

Specialty visits must be seen....within 4 weeks (at PCM discretion)

If a specialty appointment cannot be scheduled within 30 days at the Military Treatment Facility then they will refer the patient out to a specialist who is a network provider civilian.

Under Tricare Prime, you may be able to choose to have a civilian provider as your Primary Care Manager. HOWEVER, each region has different rules, so the beneficiary needs to check with that region. All referrals/consults for specialty care will be referred back into the military.

The cost to enroll in Tricare Prime is as follows:

Active duty family members, \$0

Retirees & family members, annual enrollment fee of \$230/person or \$460/family

If a Prime beneficiary sees anyone for routine care other than their Primary Care Manager, it is called POS -- point of service, which has a \$300 deductible per person or \$600/per family and then a 50% co-payment. This means that the beneficiary would pay the deductible and at least 50% of the costs.

For more information, go to <http://tricare.osd.mil>

EYE EXAMS

Routine eye exams are covered under Prime. You may have your eyes examined once every two years as a family member. Tricare DOES NOT cover the contact lens exam, contact lenses, or glasses/frames. That is an out of pocket expense.

PRESCRIPTIONS

The only other co-payments that active duty family members would have is for prescriptions. If they get their prescriptions on base there is no charge. However, the co-payment for prescriptions if using a network pharmacy off base is \$3 for generic and \$9 for brand name for a 30 day supply. The National Mail Order Pharmacy provides a 90 day supply at the same cost.

ELIGIBILITY FOR CHILDREN

Children are eligible for Tricare until they turn 21, unless they are a full time student, then it is 23. The active duty member would have to take proof of the child's student status to their local DEERS Military Personnel Flight to determine eligibility. If a spouse's or child's military ID card expires, they will be disenrolled, and they would have to reenroll. Children MUST get a military ID card when they turn 10, or they will show ineligible and will not be seen on base. All patients must have a valid military ID card, and show eligible in DEERS.

MEDICAL CARE WHILE TRAVELING

If a beneficiary is traveling and needs to be seen, here are the procedures:

Emergency -- go to the nearest emergency room. Within 24 hours, call the toll free number on the back of your card to get authorization for that visit. It is not mandatory that you do that in an emergency; however, if the hospital doesn't bill the claim as an Emergency/ER room visit, then it will go Point Of Service (see above for cost). An emergency is threat of loss of eyesight, limb, life, and requires immediate treatment.

Urgent care – Conditions requiring urgent care should be seen within 24 hours but don't require care in an emergency room. If you or a loved one need medical care after hours, but the case is not life threatening, contact your Primary Care Manager.

If you are hospitalized while traveling, you or a family member must contact the toll free number on the back of your TRICARE Prime card within 24 hours to get an authorization for hospitalization.

If you are traveling and have to pay for a prescription or a visit out-of-pocket, you can submit a claim to Tricare for reimbursement. You may not get all your out-of-pocket expenses back, but you should receive some reimbursement. You can get the claim form from the local Tricare Service Center. You can get claims (and other) information on-line from www.tricare.osd.mil.

As a beneficiary, please make sure that your information in the DEERS system and the Tricare system is updated. If you move, change phone numbers, the active duty member gets promoted, etc., you need to update DEERS and Tricare.

DENTAL COVERAGE

The TriCare Dental Program (TDP) for active duty family member dental care is covered by United Concordia in the U.S. Their toll free number is 1-800-866-8499. In order to use this benefit, you must be enrolled with them. You can pick up the forms and handbook at your local TriCare Service Center. The cost for one family member is approximately \$8 per month; for more than one family member it is approximately \$20 per month. Fees increase slightly each year, the exact amount is posted on their web site under the “Paying for the TDP” link. The initial payment has to be mailed to them, or you can enroll on-line through their web site. After the initial payment, it is taken automatically out of the active duty member’s military pay.

For more information, go to their web site: <http://tricare.osd.mil/dental/>

