



Last Reviewed October 2021

Transitioning from Active Duty to Retirement

Health Care Coverage Options As You Approach Retirement

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Today's AGENDA

- Preparing for Retirement
- TRICARE ® Program Options
- TRICARE Benefit Information
- For Information and Assistance



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Keep DEERS Information Up To Date



Being able to use TRICARE depends on keeping DEERS up to date.
Update DEERS after you have a life event, like getting married or divorced, moving, giving birth, adopting a child, retiring, and other changes.



Go to an **ID card office**. Find an office at www.dmdc.osd.mil/rsl.

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



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



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



Fax **1-800-336-4416**.

Medicare-Eligible Family Members

- To remain eligible for TRICARE, you must be entitled to Medicare Part A and have Medicare Part B:
 - Sign up for Medicare Part B before your sponsor's retirement date to avoid a break in TRICARE coverage. Medicare Part B is effective the month after you enroll.
- Beneficiaries under age 65 who are entitled to Medicare Part A and have Part B may:
 - Enroll in TRICARE Prime (enrollment fee waived)
 - Be covered by TRICARE For Life (TFL)
- For Medicare information, visit:
 - **www.ssa.gov**
 - **www.medicare.gov**

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.

TRICARE Eligibility after Retirement

- Retired service members
- Spouses, surviving spouses, and qualifying former spouses
- Unmarried dependent children (certain eligibility requirements apply)
- Dependent parents are not eligible for civilian TRICARE benefits; however, they may be eligible to receive care at certain military hospitals and clinics if space is available.
- For more information, visit **www.tricare.mil/retiring**.

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TRICARE Coverage for Retirees

- You must enroll in a TRICARE Prime or TRICARE Select plan to continue coverage.
- You may enroll:
 - **Online:** Use Beneficiary Web Enrollment by logging in to <https://milconnect.dmdc.osd.mil> (Stateside enrollment only).
 - **Phone:** Call your regional contractor (once your retired status is reflected in DEERS).
 - **Mail:** Download the appropriate enrollment form at www.tricare.mil/forms and mail it to your regional contractor.
- For enrollment fees, premium amounts, and copayments, visit www.tricare.mil/costs.

Note: TRICARE Prime Remote options and TRICARE Overseas Program Prime options are not available after retirement.

TRICARE Prime

- Enroll with a military hospital or clinic (space permitting), TRICARE civilian network provider within a PSA, or US Family Health Plan provider.
- Obtain a PCM referral for civilian specialty care (otherwise, higher costs apply).
- Military hospitals and clinics have the “right of first refusal” to deliver nonemergency care within the PSA.
- If you plan to travel or move:
 - **Routine care:** Receive care before you travel.
 - **Urgent care:** Call your PCM or regional contractor for assistance.
 - **Emergency care:** Call 911 or go to the nearest emergency room.
 - **Seasonal moves:** Transfer your enrollment to keep costs low.

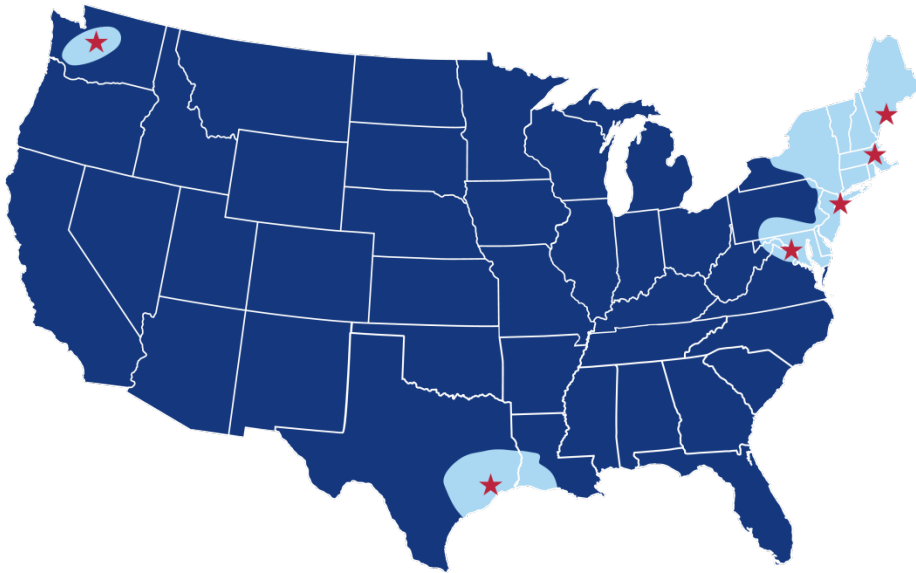
TRICARE Prime

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 routine and specialty care to avoid POS charges.
- POS deductibles per calendar year (CY) (Jan. 1—Dec. 31):
\$300/individual; \$600/family.
 - TRICARE pays 50 percent of the TRICARE-allowable charge.
 - Doesn't count towards your annual catastrophic cap.

US Family Health Plan (USFHP)

USFHP Service Areas



- TRICARE Prime option.
- Six service areas.
- Must enroll.
- May not get care at military hospitals or clinics or use military pharmacies.

TRICARE Select

- TRICARE Select is a self-managed, preferred-provider option for eligible beneficiaries (except ADSMs and TFL beneficiaries) not enrolled in TRICARE Prime.
- With TRICARE Select you have the freedom to choose providers.
- There are no referrals required.
- Yearly deductible and cost-shares apply.
- Enrollment in TRICARE Select is required.
- Some services require prior authorization.
 - Visit your regional contractor's website for services that require prior authorization.
- In overseas locations, TOP Select is available to eligible family members not enrolled in TOP Prime.

TRICARE Select: Getting Care

- Under TRICARE Select:
 - If you use a network provider:
 - You will pay a fixed fee for care.
 - Your out-of-pocket costs will be lower if you use a network provider.
 - If you use a non-network, TRICARE-authorized provider:
 - You will have a higher deductible and out-of-pocket costs.
 - You can also invite your provider to become a network provider.



TRICARE Overseas Program (TOP) Select



- Freedom to choose providers from a purchased care sector provider in your overseas area. (Different rules apply in the Philippines).
- No referrals required.
- Yearly deductible and copayments apply.
- Enrollment required.
- Some services require prior authorization.
- Expect to file your own claims.
- You may receive medically necessary covered services from a non-network, TRICARE-authorized provider, if a network provider isn't available.
 - You will be subject to cost-sharing amounts applicable to out-of-network care.

TRICARE Young Adult

- TRICARE Young Adult (TYA) is a premium-based health care plan available for purchase by qualified young adult dependents. You may qualify to purchase TYA coverage if you are all of the following:
 - An unmarried dependent of a TRICARE-eligible uniformed service sponsor
 - At least age 21 (or age 23 if previously enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support), but have not yet reached age 26
 - Not eligible for an employer-sponsored health plan under your own employment as defined in TYA regulations
 - Not otherwise eligible for TRICARE program coverage
- For more information, visit **www.tricare.mil/tya**.



TRICARE For Life

TRICARE For Life (TFL) is Medicare-wraparound coverage for TRICARE beneficiaries who are entitled to Medicare Part A and have Medicare Part B, regardless of age or place of residence.

- Beneficiaries entitled to Medicare Part A and who have Medicare Part B:
 - Are automatically covered under TFL. There are no enrollment forms or enrollment fees.
 - Should obtain a new uniformed services ID card at age 65.
 - May get care from any Medicare-participating, nonparticipating, or opt-out provider, or military hospital or clinic if space is available.
- For more information on TFL, visit **www.tricare.mil/tfl** or call **1-866-773-0404**.

Using TFL Overseas

- For overseas locations outside the United States and U.S. territories, TFL works like TRICARE Select and you may visit any host nation provider for care.*
- Claims are filed with the TOP claims processor.
 - For more information, visit **www.tricare-overseas.com**.

* *If you live or travel in the Philippines, you are encouraged to see a preferred provider for care. For more information, visit **www.tricare.mil/philippines**.*

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Pharmacy Options

Military Pharmacy



- Usually inside military hospitals and clinics
- Get up to a 90-day supply

TRICARE Pharmacy Home Delivery



- Must use this option for some drugs
- Get up to a 90-day supply of covered drugs

TRICARE Retail Network Pharmacy



- Fill prescriptions without submitting a claim for covered drugs
- Get up to a 30-day supply

Non-Network Pharmacy



- Pay full price upfront and, for covered drugs, file a claim to get a portion of your money back
 - Get up to a 30-day supply
-

TRICARE and Other Health Insurance

- Other health insurance (OHI) (includes national health insurance overseas) is considered your primary health insurance.
- TRICARE is the last payer to all other health benefits and insurance plans except for Medicaid, TRICARE supplements, the Indian Health Service, and other programs and plans as identified by the Defense Health Agency.
- If you have OHI:
 - Fill out and submit your regional contractor's *TRICARE Other Health Insurance Questionnaire* at **www.tricare.mil/forms**.
 - Follow your OHI's rules for prior authorizations and filing claims.
 - Tell your provider about your OHI and TRICARE.
 - Show your provider your OHI card.

Pharmacy Benefits with OHI

- OHI is always the primary payer:
 - Use OHI first, then submit claims to TRICARE.
- You may still use military pharmacies.
- 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



Federal Employees Dental and Vision Insurance Program

- The U.S. Office of Personnel Management offers eligible TRICARE beneficiaries the option to enroll in a FEDVIP dental plan.
- FEDVIP offers a range of plans from a number of dental plans.
- FEDVIP is available to:
 - Retired service members and their eligible family members
 - Certain retired National Guard and Reserve members and their family members
 - Certain survivors
 - Medal of Honor recipients and their immediate family members or survivors
- Former spouses and remarried surviving spouses don't qualify to purchase dental coverage.

For FEDVIP plans and enrollment information, visit **www.benefeds.com**.



FEDVIP Vision Options

- FEDVIP offers vision coverage for eligible TRICARE beneficiaries who are enrolled in or are using a TRICARE health plan including:
 - TRICARE Prime, including USFHP
 - TRICARE Select
 - TRS
 - TRR
 - TFL
- FEVIP vision coverage is available to:
 - Active duty family members
 - Retired service members and their eligible family members
 - National Guard and Reserve members and eligible family members

Visit **www.benefeds.com** for eligibility, carrier, and enrollment information.

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.

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Stateside Regional Contractors

- TRICARE East Region
Humana Military
1-800-444-5445
HumanaMilitary.com
www.tricare-east.com
- TRICARE West Region
Health Net Federal Services, LLC
1-844-866-WEST (1-844-866-9378)
www.tricare-west.com

Overseas Regional Contractor

- TRICARE Overseas Program (TOP)
International SOS Government Services,
Inc.
www.tricare-overseas.com/contact-us

More Resources

- TRICARE Website
www.tricare.mil



- Publications
www.tricare.mil/publications
- milConnect
<https://miltconnect.tricare.mil>