

TRICARE® Select Overseas

An Overview of Your TRICARE Select Overseas Benefit

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Today's Agenda

- What Is TRICARE?
- TRICARE Overseas Plan Options
- Getting Care
- Other Important Information
- For Information and Assistance

What Is TRICARE?

What Is TRICARE?



- TRICARE is the health care program for the U.S. Department of Defense. It consists of:
 - Direct care
 - Civilian care
- TRICARE® is the brand name for the U.S. Military Health System.

TRICARE Overseas Program

Latin America and Canada

Canada, the Caribbean Basin, Central and South America, Puerto Rico, and the U.S. Virgin Islands

Eurasia-Africa

Africa, Europe, and the Middle East

Pacific

American Samoa, Asia, Australia, Guam, India, Japan, New Zealand, Northern Mariana Islands, South Korea, and Western Pacific remote countries



TOP Support (1 of 2)

- **TOP Regional Call Center:**
 - Helps with enrollment, referrals, and pre-authorizations
 - Coordinates emergency, urgent, and dental care
 - Available 24/7
- **Beneficiary Support Center:**
 - Provides customer service and assistance with enrollment, disenrollment, claims, and more
 - Available 24/7
- **Medical Assistance:**
 - Coordinates emergency care and locates emergency care facilities
 - Available 24/7

TOP Support (2 of 2)

- **TOP Point of Contact Program:**
 - Assists you with TRICARE enrollment and getting medical care in remote overseas locations
 - Helps you file medical and dental claims
- **TRICARE Service Centers:**
 - Located throughout overseas areas, typically at military hospitals and clinics
 - Provides resources when you seek care from a military hospital or clinic or TRICARE-authorized provider (network or non-network) in your overseas area
 - Helps you understand TRICARE program options, transfer enrollment, file claims, resolve problems, and file grievances
 - Locate a TSC at www.tricare.mil/tsc.
- **U.S. Embassies and Consulates:**
 - For assistance, go to www.usembassy.gov to locate the nearest U.S. Embassy or Consulate.

MyCare Overseas™ Beneficiary Mobile App

- The MyCare Overseas mobile app is available for TOP beneficiaries. Through the mobile app and web-based portal, you can:
 - Get 24/7 access to the Beneficiary Support Center and your local Near Patient Team (for TRICARE Prime Overseas and TRICARE Prime Remote Overseas enrollees)
 - Search for TOP network providers.
 - Find country-specific information, such as emergency numbers.
 - Check status of referrals, authorizations, and claims.
 - Access real-time telephonic language translation assistance.
 - Set appointment reminders.
- To access MyCare Overseas:
 - Download app from Apple App Store or Google Play app store and register.
 - Visit the web-based portal at <https://top.internationalosos.com/beneficiary>.
- Learn more at www.tricare-overseas.com/beneficiary-app.

TRICARE Overseas Program Options

Beneficiary Categories: Group A and Group B

- All beneficiaries fall into one of two categories based on when you or your sponsor entered the uniformed services.

Group A

If your or your sponsor's initial enlistment or appointment occurred **before** Jan. 1, 2018

Group B

If your or your sponsor's initial enlistment or appointment occurred **on or after** Jan. 1, 2018

- The groups pay different costs and fees.
 - Group A beneficiaries enrolled in a premium-based plan (TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult, or the Continued Health Care Benefit Program) follow Group B deductibles, cost-shares, and catastrophic caps.

Eligibility and Enrollment

- TRICARE eligibility is determined by the services.
- This eligibility is reflected in the Defense Enrollment Eligibility Reporting System. You must take certain steps to remain eligible for benefits:
 - Register in DEERS.
 - Obtain a valid Uniformed Services ID card.
- Most TRICARE programs require enrollment. You may also need to submit an enrollment form or call the Beneficiary Support Center.*
- If you're eligible for premium-free Medicare Part A, you must also have Medicare Part B to keep TRICARE coverage—even in overseas locations where Medicare coverage doesn't apply.

* *Active duty service members must enroll in a TRICARE Prime Overseas option. Non-activated National Guard and Reserve members may qualify to purchase TRICARE Reserve Select.*

TRICARE Health Plans Overseas

Those Eligible for TRICARE	TRICARE Plan Options
Active duty family members and transitional survivors living overseas who aren't in TRICARE Prime Overseas or TRICARE Prime Remote Overseas (Group A & Group B)	<ul style="list-style-type: none">• TRICARE Select Overseas• TRICARE Young Adult Select• TRICARE For Life
Retired service members and their family members, Medal of Honor recipients and their family members, survivors, and eligible former spouses living overseas (Group A & Group B)	<ul style="list-style-type: none">• TRICARE Select Overseas• TRICARE Young Adult Select• TRICARE For Life
Certain National Guard and Reserve members and their eligible family members living overseas (Group B)	<ul style="list-style-type: none">• TRICARE Reserve Select• TRICARE Retired Reserve• TRICARE Young Adult Select

TRICARE Select Overseas

- TRICARE Select Overseas is available to command-sponsored and non-command-sponsored ADFMs, retired service members and their family members, survivors, and others living or traveling overseas.
 - **Enrollment:** Enrollment is required.
 - **Costs:** No enrollment fee for ADFMs. Retirees, their families, and others pay enrollment fees.
 - **Getting care:** Seek care from any purchased care sector provider.*
 - Referrals aren't required for most health care services.
 - Pre-authorization is required for certain services.
 - Overseas providers aren't required to bill TRICARE for you.
 - Beneficiaries should expect to pay up front and file claims for reimbursement.

Note: ADSMs aren't eligible for TRICARE Select Overseas. Those enrolled in TRICARE Select Overseas in the Philippines and Panama are reimbursed based on government-provided foreign fee schedules.

* *In the Philippines, you're encouraged to seek care from Philippine Preferred Provider Network providers.*

TRICARE Young Adult

- TRICARE Young Adult 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 coverage
 - Not a uniformed service sponsor (for example, a member of the Selected Reserve)
- For TYA qualification, cost, and enrollment information, visit www.tricare.mil/tya.

TRICARE Reserve Select®

- TRICARE Reserve Select is a premium-based health plan that provides care for members of the Selected Reserve and their family members who may not otherwise be eligible for TRICARE due to inactive duty status.
 - **Enrollment:** Enrollment is required. Initial premium payment is required when purchasing TRS.
 - **Costs:** Monthly premiums, an annual deductible, and applicable copayments or cost-shares apply. TRS enrollees are subject to Group B cost-shares and copayments.
 - **Getting care:** Receive care from any TRICARE-authorized provider (network or non-network).* Pre-authorization is required for certain services.
 - You can also be seen at a military hospital or clinic if space is available.

* *Except in the Philippines.*

TRICARE Retired Reserve®

- TRICARE Retired Reserve is a premium-based health plan that provides care for certain qualifying members of the Retired Reserve until reaching age 60 and their family members.
 - **Enrollment:** Enrollment is required. Initial premium payment is required when purchasing TRR.
 - **Costs:** Monthly premiums, an annual deductible, and cost-shares apply. TRR enrollees are subject to Group B cost-shares and copayments.
 - **Getting care:** Receive care from any TRICARE-authorized provider (network or non-network). * Pre-authorization is required for certain services.
 - You can also be seen at a military hospital or clinic if space is available.

* *Except in the Philippines.*

TRICARE For Life

- TRICARE For Life is available to beneficiaries who are eligible for premium-free Medicare Part A and have Medicare Part B coverage.
 - **Enrollment:** Coverage is automatic if you have Medicare Part A and Part B.
 - **Costs:** No enrollment fee, but TFL overseas beneficiaries must have Medicare Part B and pay Part B premiums. When outside the U.S. and U.S. territories, and for TRICARE covered services not covered by Medicare, TRICARE is the primary payer and the deductible, cost-shares, and pre-authorization rules apply.*
 - **Getting care:** Seek care from any TRICARE-authorized provider (network or non-network) unless local restrictions apply (such as in the Philippines). Pre-authorization may be required for certain services.

* In the U.S. and U.S. territories, TRICARE pays last.

Getting Care

Provider Types Overseas (1 of 2)

Provider Type	Description	Key Characteristics
Network Provider (files claims for you)	Has entered into a formal agreement with International SOS to provide medical care or services for those in TRICARE Prime Overseas and TRICARE Prime Remote Overseas	<ul style="list-style-type: none"> • Assurance of quality care: institutional network providers' credentials and medical capabilities are reviewed at least once every three years • Guarantee that provider can directly or indirectly communicate in English • Provider's performance is monitored on an ongoing basis to help ensure your satisfaction and quality of care • Cashless/claimless services for TRICARE Prime Overseas and TRICARE Prime Remote Overseas beneficiaries
Participating Non-Network Provider (may file claims for you)	Hasn't entered into a formal agreement with International SOS, but agrees to provide cashless/claimless care to those in TRICARE Prime Overseas	<ul style="list-style-type: none"> • Verified and licensed to practice in the country where the provider operates • Hasn't completed the full International SOS credentialing process
Nonparticipating Non-Network Provider	Hasn't agreed to participate in TOP	<ul style="list-style-type: none"> • May not provide cashless/claimless service; you may be required to pay up front and file a claim to get money back

Provider Types Overseas (2 of 2)

Provider Type	Description	Key Characteristics
Preferred Provider (Philippines)	Agrees to comply with certain TRICARE requirements and business processes in the Philippines	<ul style="list-style-type: none">• Accepts established reimbursement rates; you'll only be responsible for applicable deductible and cost-shares
Certified Provider (Philippines)	Meets TRICARE required on-site verification and provider certification requirements	<ul style="list-style-type: none">• Can charge TRICARE for your claims• There may be no limit to the amount certified providers charge in the Philippines. You're responsible for paying any amount above the TRICARE-allowable charge, in addition to your deductible and cost-shares.

Find a provider at
www.tricare-overseas.com/provider-search.

TRICARE Cost Terms

- Enrollment Costs
 - Annual amount some beneficiaries must pay for TRICARE coverage
 - Eligible active duty family members have no enrollment costs
 - Retired service members and their family members, surviving spouses (after the first three years), eligible former spouses, and others have enrollment costs
- Annual Deductible
 - Amount you pay before cost-sharing starts
- Cost-Share
 - Percentage of the total cost of a covered health care service that you pay after your annual deductible is met
- Copayment
 - A fixed dollar amount that you pay for a covered service

Catastrophic Cap

- The catastrophic cap is the most you or your family pay out of pocket for covered TRICARE health care services each year.
 - For your current catastrophic cap, go to www.tricare.mil/costs.
- It applies to all TRICARE covered services, including enrollment fees, deductibles, copayments, pharmacy copayments, and other cost-shares based on the TRICARE-allowable charge. (**Note:** Point-of-service fees don't count toward your catastrophic cap.)
- You aren't responsible for any amounts above the catastrophic cap in a given calendar year, except for services that aren't covered or charges applied by nonparticipating non-network providers.

Pre-authorization for Care

- A pre-authorization benefit review is done by International SOS to determine if the requested health care service is a TRICARE covered benefit.
- Certain services require pre-authorization, including:
 - Adjunctive dental services
 - Extended Care Health Option services (ADFMs only)
 - Nonemergency inpatient admissions for substance use disorders and mental health care
 - Solid organ and stem cell transplants
- ADSMs require pre-authorization for all inpatient and outpatient specialty care services.

Note: This list isn't all-inclusive. To learn more about services that require pre-authorization, contact your TOP Regional Call Center.

Services Not Covered Overseas

- The following services are only offered in the U.S. and U.S. territories and aren't covered under the TRICARE Overseas Program:
 - **Home health care:** Covers part-time or intermittent skilled nursing services and home health care services for those confined to the home
 - **Hospice care:** Covers services if you or a TRICARE-eligible family member has a terminal illness
 - **Skilled nursing facility care:** Covers skilled nursing services; meals; physical and occupational therapy and speech pathology; and other services
 - **Partial hospitalization program:** Covers TRICARE-authorized PHP facilities for mental health and substance use disorders
- Look up covered services at www.tricare.mil/coveredservices.

TOP Claims

- Providers and facilities aren't required to bill TRICARE for you.
- Expect to pay up front for care in most overseas locations and submit claims for reimbursement.
- Claims for care received overseas must be filed within three years.
 - Claims for care received in the U.S. and U.S. territories must be filed within one year.
- To file a claim:
 - **Online:** Go to www.tricare-overseas.com to submit your claim and sign up for direct deposit reimbursement.
 - **By mail:** Download the *TRICARE DoD/CHAMPUS Medical Claim Patient's Request for Medical Payment* form (DD Form 2642) from www.tricare.mil/forms.

Filing Claims and Proof of Payment

- You're required to submit proof of payment with all claims for care received overseas. Proof of payment may include a credit card receipt, canceled check, credit card statement, or invoice from the provider that clearly states payment was received.
- Fill out *DD Form 2642* and submit it with your:
 - Itemized bill or invoice
 - Diagnosis describing reason for medical care
 - Explanation of benefits from other health insurance (if applicable)
 - Proof of payment
- For more information, call your TOP Regional Call Center or go to www.tricare.mil/proofofpayment.

Traveling in the U.S.

- Network and non-network participating providers:
 - Files claims with the TOP claims processor for TRICARE Prime Overseas and TRICARE Prime Remote Overseas beneficiaries
 - May file claims for TRICARE Select Overseas beneficiaries
- Non-network participating providers:
 - Expect to pay up front (the provider may charge up to 15% more than the TRICARE-allowable charge).
 - Save your receipt as proof of payment.
 - File claims with the TOP claims processor.
- To find a provider in the U.S., visit www.tricare.mil/finddoctor.

Aeromedical Evacuations

- Aeromedical evacuations are only approved when medically necessary and appropriate.
- Air evacuations for non-active duty beneficiaries aren't provided as cashless/claimless services.
- TRICARE will only reimburse air evacuation when it's medically necessary and to the closest, safest location that can provide the required care.
- Contact your TOP Regional Call Center for more information.

Other Important Information

TRICARE Pharmacy Program

There are several ways to fill your covered prescriptions:

1. At any military pharmacy
2. Through TRICARE Pharmacy Home Delivery:
 - Prescriptions must be from a U.S.-licensed provider
 - Only available outside of U.S. territories if you have an APO/FPO address or are assigned to a U.S. Embassy or Consulate. (Home delivery isn't an option in Germany)
3. At a TRICARE retail network pharmacy in U.S. territories*
4. At an overseas pharmacy (you may have to pay up front and file a claim with TRICARE for reimbursement)

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

* *Currently, there are no TRICARE retail network pharmacies in American Samoa.*

Overseas Dental Options

- TRICARE Dental Program:
 - For more information and costs, go to www.tricare.mil/tdp.
- Federal Employees Dental and Vision Insurance Program:
 - For more information and costs, go to www.benefeds.gov.

Vision Options

Federal Employees Dental and Vision Insurance Program

- Retirees, their eligible family members, and active duty family members enrolled in a TRICARE health plan may qualify to purchase vision coverage through FEDVIP.
- Eligible beneficiaries include those enrolled in or using:
 - TRICARE Prime or TRICARE Prime Overseas
 - TRICARE Select or TRICARE Select Overseas
 - US Family Health Plan
 - TRICARE Reserve Select
 - TRICARE Retired Reserve
 - TRICARE For Life
- For more information about FEDVIP vision coverage, visit www.benefeds.gov.

TRICARE and Other Health Insurance

- If you have other health insurance:
 - Fill out a *TRICARE Other Health Insurance Questionnaire*: www.tricare.mil/forms.
 - Follow the referral and authorization rules for your OHI.
 - Tell your provider about your OHI and TRICARE.
- 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
- For services covered by Medicare, OHI, and TFL, TRICARE pays last.

Note: Medicare doesn't pay for care outside of the U.S. and U.S. territories.

Filing a Grievance and Reporting Fraud or Abuse

- For TOP quality assurance, grievances, appeals, and compliments or commendations:
 - Email: TOPGlobalQualityAssu@internationalsos.com
 - File grievances online: www.tricare-overseas.com
- Report suspected fraud and abuse anonymously or by name:
 - Phone: 215-354-5020
 - Email: TOPProgramIntegrity@internationalsos.com
- To report fraud or abuse regarding the TRICARE Pharmacy Program, contact Express Scripts, Inc.:
 - Phone: 866-759-6139
 - Email: TRICAREfraudtip@express-scripts.com

The Affordable Care Act

- TRICARE meets the minimum essential coverage requirement under the Affordable Care Act.
- Each tax year, you'll get an IRS Form 1095 from your pay center. It will list your TRICARE coverage for each month.
- Your Social Security number and the Social Security number of each of your covered family members should be included in DEERS for your TRICARE coverage to be reflected accurately.



For Information and Assistance

More Information

Regional Contractor

- TRICARE Overseas Program
International SOS Government Services, Inc.
Find toll-free contact information at www.tricare-overseas.com/contact-us.

Overseas Call Centers

- TOP Regional Call Center—Eurasia-Africa
+44-20-8762-8384 (Overseas)
877-678-1207 (Stateside)
tricarelon@internationalsos.com
Medical Assistance +44-20-8762-8133
- TOP Regional Call Center—Latin America and Canada
+1-215-942-8393 (Overseas)
877-451-8659 (Stateside)
tricarephl@internationalsos.com
Medical Assistance +1-215-942-8320
- TOP Regional Call Center—Pacific
Singapore
+65-6339-2676 (Overseas)
877-678-1208 (Stateside)
sin.tricare@internationalsos.com
Medical Assistance +65-6338-9277

Resources

- TRICARE Website: www.tricare.mil



- TRICARE Publications: www.tricare.mil/publications
- milConnect: <https://milconnect.dmdc.osd.mil/>