

# Take **COMMAND**

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**MILITARY HEALTH SYSTEM | COMMUNICATIONS DIVISION**

**“TAKE COMMAND” COMMUNICATIONS CAMPAIGN**

**UPDATES TO TRICARE REIMBURSEMENT MANUAL ANNEX**

**DECEMBER 2017**



## BACKGROUND

Several updates have been made to the TRICARE Reimbursement Manual regarding beneficiaries' out of pocket expenses.

## KEY MESSAGES

### Updates to TRICARE Select Co-Payment Costs

- The Defense Health Agency (DHA) recalculated copayment costs for the TRICARE Select health plan, which will replace TRICARE Standard and Extra on Jan. 1, 2018 due to an error in the original methodology.
- New co-payments are between \$3 to \$8 lower than originally calculated for multiple types of copayments.
- The correct amounts are listed in the table below, which updates the figures in the TRICARE Reimbursement Manual, Chapter 2, Section 2.

TRICARE Select Group A	ADFM	Retiree
FIGURE 2.2-5		
Primary Care Outpatient Visits (CY 2018) In-Network	\$21	\$28
FIGURE 2.2-7		
Specialty Care Visits (CY 2018) In-Network	\$31	\$41
FIGURE 2.2-13		
ER Visits (CY 2018) In-Network	\$81	\$109
FIGURE 2.2-15		
UCC Visits (CY 2018) In-Network	\$21	\$28
FIGURE 2.2-17		
Ambulatory Surgery (CY 2018) In-Network	\$25	No Change
Ambulatory Surgery (CY 2018) Out-Of-Network		No Change
FIGURE 2.2-19		
Out Patient Ground Ambulance (CY 2018) In-Network	\$74	\$98

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### **Clarification of Group A or Group B Costs Shares for Certain Beneficiaries**

- If you're enrolled in TRS, TRR, TYA, or CHCBP, you have Group B cost shares according to your sponsor's status (i.e., whether they are an ADFM or a retiree), regardless of when your sponsor enlisted or was appointed in a Uniformed Service.
  - If you're in TRR, you pay TRICARE Select retiree Group B cost shares
  - If you're in TRS, you pay TRICARE Select ADFM Group B cost shares
  - If you're in TYA, you pay cost shares based on your sponsor's status (active duty vs. retired) and your choice of TRICARE Select or TRICARE Prime
  - If you're in the CHCBP, you pay TRICARE Select ADFM or retiree costs shares based on their sponsor's status (active duty or retiree) at the time of loss of eligibility
- If you're a family member of a foreign active duty military member, you have TRICARE Select Group B costs shares.

### **Clarification of Enrollment Fees for Medically Retired Retirees, Family Members and Eligible Survivors of Deceased Active Duty Service Members**

If you're a medically retired retiree, family member, or eligible survivor of a deceased active duty service member who enlisted in or was appointed to a uniformed service before Jan. 1., 2018, your TRICARE Prime enrollment fees are frozen as of the date you initially enrolled in TRICARE Prime, and remain at that rate until you elect to disenroll from or no longer qualify to be enrolled in TRICARE Prime.

### **Urgent Care Referrals**

- The Director of the DHA has determined that for 2018, if you are a TRICARE Prime enrollee other than an ADSM, you do not need a referral for urgent care visits, and point of services charges no longer apply for urgent care.
- If you're an ADSM or ADFM enrolled in TRICARE Overseas Program (TOP) Prime/Prime Remote and seeking care overseas, you need an authorization from the TOP contractor to make sure your urgent care visit will be cashless and claimless. Without a prior

authorization, an overseas provider may request payment upfront and you will then have to submit a claim for reimbursement. The contractor will process the claim with no point of service charge.

- If you're an ADFM enrolled in Prime in the U.S. but traveling overseas, you need to contact the TOP contractor to for an authorization to make sure your urgent care visit will be cashless and claimless. The contractor will process the claim with no point of service charge.
- If you're an ADSM enrolled in TOP Prime/Prime Remote and are TDY or on leave in the U.S., you may access urgent care without a referral or authorization. If you're enrolled in the U.S. but TDY or on leave overseas, you need to contact the TOP contractor to make sure your urgent care visit will be cashless and claimless. The contractor will process the claim with no point of service charge.

### **Newborn Claims Processing and Enrollment**

- Newborns are automatically enrolled in an appropriate TRICARE plan when you register them in DEERS.
  - If you are ACTIVE DUTY and don't register your baby in DEERS within 90 days of birth in the U.S. or 120 days of birth overseas, on day 91/121 your claims will be denied because your baby doesn't show as TRICARE eligible.
    - Once you've registered your baby in DEERS (regardless of the number of days from birth), the baby is automatically enrolled in in Prime or Select, as appropriate back to the date of birth, and you have to ask to have any denied claims reprocessed.
    - Once you've enrolled your baby in Prime/Prime Remote, coverage is backdated to the to the date of birth and you have to ask to have claims for care during the first 90/120 days of life that have been denied or Select claims be reprocessed as Prime.
  - If you are a RETIREE and don't register your baby in DEERS within 90/120 days of birth, on day 91/121 your claims will be denied because the doesn't show as TRICARE eligible.
    - If you've registered your baby in DEERS, (regardless of the number of days from birth) but haven't enrolled them in a TRICARE plan, your baby can receive direct care only and your network claims will be denied.



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- If you register your baby in DEERS and enroll them in Prime/Prime Remote/Select, as applicable, within 90 days of birth, the baby's coverage is backdated to the to the date of birth and you have to ask to have claims for care during the first 90/120 days of life that have been denied reprocessed.
- In 2018, you can enroll at any time. In 2019, you will have to wait for a Qualifying Life Event (QLE) or the annual Open Enrollment Season.
- For claims for care for newborns, once your baby is shown as enrolled in a TRICARE plan in DEERS, they are no longer treated as if they're enrolled in TRICARE Prime or Select for cost sharing of claims for up to 90 days (120 days if overseas) as in the past. Claims for your baby's care received after the date you enrolled them will be processed according to the cost sharing provisions of their enrolled plan.
- Beginning Jan. 1, 2018, if you're an ADFM of a new accession and new family members of ADSMs residing in an overseas area, you're automatically enrolled in TOP Select and have up to 90 days to change your enrollment to TOP Prime or TOP Prime Remote.

## **FOR MORE INFORMATION**

For questions regarding the Take Command communications campaign or this Manual Changes and Clarifications annex, please contact Mr. Paul Fitzpatrick at [paul.m.fitzpatrick2.civ@mail.mil](mailto:paul.m.fitzpatrick2.civ@mail.mil) or Virginia White at [virginia.l.white33.ctr@mail.mil](mailto:virginia.l.white33.ctr@mail.mil).