TRICARE Standard Health Matters

THE 2012 E-PUBLICATION FOR TRICARE[®] STANDARD BENEFICIARIE

Log on to milConnect for eCorrespondence

The milConnect website is the Defense Manpower Data Center's online portal that gives you access to your information in the Defense Enrollment Eligibility Reporting System (DEERS). The website is located at http://milconnect.dmdc.mil.

MilConnect allows you to:

- Receive alerts when a change in your benefit occurs
- Access health care information about TRICARE, other health insurance, premiums, fees and claims (catastrophic cap and deductibles) and immunizations
- Print proof-of-insurance/eligibility letters
- Review and update (where applicable) personnel information
- Review and update your civilian employment information and your most recent active duty information if you are a National Guard or Reserve member
- Update your display name for the Department of Defense (DoD) Global Address List (GAL)
- Update your duty information for the DoD GAL
- Transfer your education benefits
- Update contact information in DEERS instantly
- Find answers to frequently asked questions
- Review Servicemembers' Group Life Insurance information
- View, print and save eCorrespondence regarding benefits

You can log on to milConnect's secure website by using a Common Access Card (CAC), Defense Finance and Accounting Services (DFAS) user name and password or DoD Self-Service Logon (DS Logon). Family members and those without CACs or DFAS pins will need to sign up for a DS Logon to sign in to milConnect.

You may request a DS Logon online by clicking the "Sign Up" button on milConnect or by visiting www.dmdc.osd.mil/identitymanagement. You may also



visit a TRICARE Service Center or a Veterans Affairs Regional Office to complete an in-person proofing process. Non-CAC holders who need a new uniformed services identification (ID) card can visit an ID card-issuing facility and request a DS Logon at the same time.

Sign Up Now for eCorrespondence

With the recent rollout of the eCorrespondence initiative, active duty service members and National Guard and Reserve members on early alert or active duty are now receiving e-mail notifications in place of mailed letters. E-mail notifications are sent when a new or replacement enrollment card is available, when a dependent child is near age 21 or 23 or when a primary care manager change has been reported. More notifications will be available as future phases of the eCorrespondence initiative are rolled out.

Electronic correspondence allows for quick and convenient access to benefit changes and offers better security than mailed letters.

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An Important Note About TRICARE Program Information: At the time of printing, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. Military treatment facility guidelines and policies may be different than those outlined in this publication. For the most recent information, contact your TRICARE regional contractor, TRICARE Service Center, or local military treatment facility.

Log on to milConnect for eCorrespondence

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While expansion of eCorrespondence to non-active duty populations and family members is an upcoming initiative, you can grant permission now to receive e-mail notifications as soon as this capability is available. Sign in to milConnect and choose the "My Profile" tab to enter your personal e-mail address and permissions for benefits notifications. Service members who prefer to receive e-mail notifications to their personal e-mail (instead of their work e-mail) can also enter a personal e-mail address and assign permission for use. To opt out of receiving notifications to work e-mail, go to the "My Profile" tab.

Visit the milConnect website at http://milconnect.dmdc.mil for more information.

Save Time and Money: See a Network Provider

As a TRICARE Standard beneficiary, you can keep your health care costs down by seeing network providers. Network providers have negotiated with TRICARE regional contractors to provide care to you at an agreed-upon rate and will also file claims for you. Going outside the network can cause you to have higher costs and more paperwork.

When you use a network provider, you take advantage of TRICARE Extra, which is available to all TRICARE Standard beneficiaries. Under TRICARE Extra, you will save 5 percent on the cost-shares you pay for health care services. Visiting a TRICARE network provider is your most affordable option if military treatment facility (MTF) care or TRICARE Prime is not available to you. **Note:** TRICARE Extra is not available overseas.

Specialty Care

If you live near an MTF, your most affordable option for specialty care is right there. Most MTFs generally do not have primary care capacity for TRICARE Standard beneficiaries, but many of the larger facilities may offer specialty services. So, if you think you need to visit with a specialist, or need hospitalization or surgery, contact your closest MTF's Referral Management Center.

The following chart describes the different outpatient cost-shares for beneficiaries using network versus non-network providers. For more information, visit www.tricare.mil/compareplans.

Comparison of TRICARE Standard and TRICARE Extra Costs

	TRICARE Standard ¹	TRICARE Extra
Provider Type	TRICARE-authorized, non-network	TRICARE-authorized, TRICARE network
Outpatient cost-share after deductible is met	 Active duty family members (ADFMs) and TRICARE Reserve Select (TRS) enrollees: 20% of the TRICARE-allowable charge Retirees, their families, TRICARE Retired Reserve (TRR) enrollees and all others: 25% of the TRICARE-allowable charge 	 ADFMs and TRS enrollees: 15% of the negotiated rate Retirees, their families, TRR enrollees and all others: 20% of the negotiated rate

1. Non-network providers may charge up to 15 percent above the TRICARE-allowable charge. You are responsible for paying this amount.

Submitting Claims for Care Received while Living Overseas or Traveling

As a TRICARE Standard beneficiary, you may be required to submit your own claims. There are a few things to remember when you are submitting claims for health care services, especially those received while traveling either stateside or overseas. For more information about getting care while traveling, visit www.tricare.mil/travel.

Choosing a Provider

If you are planning a long trip in the United States, make a note of the TRICARE network providers in the area where you will be traveling. Though you may visit any TRICAREauthorized provider, you will save money if you use your TRICARE Extra benefit by seeing a network provider. Prior authorizations may be required for certain services. Visit www.tricare.mil/findaprovider to find network providers by area. To learn more about the advantages of using a network provider, check out "Save Time and Money: See a Network Provider" earlier in this issue.

If you are overseas, you may generally visit any overseas provider, unless local TRICARE Overseas Program (TOP) restrictions require seeing certified providers. International SOS Assistance, Inc. is your TOP contractor. In the Philippines, you must see a certified provider. TRICARE Extra is not available overseas, and prior authorizations may be required for certain services. When seeking care from an overseas provider, you should be prepared to pay up front for services and then file a claim with the TOP claims processor. Overseas, non-network providers may legally charge you above the TRICARE-allowable charge for services provided. You are encouraged to contact the TOP Regional Call Center for assistance in locating a provider who will accept the TRICARE-allowable amount as payment in full.

Filing Claims

Once you have received care in the United States or overseas and are ready to file a claim, please note the following:

- If you are filing claims for care you received in the United States, submit them to the claims processor in the region in which you reside. Do **not** submit your claim to the contractor in the region where you received care.
- For care received overseas, including U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands), submit your claim to the TOP claims processor, **not** the contractor in the region where you reside.

In the United States and U.S. territories, claims must be filed within **one year** of service or the date of inpatient discharge. Claims for care received overseas outside of the United States and U.S. territories must be filed within **three years** from the date of service or date of inpatient discharge.

To file your claim, fill out a *TRICARE DoD/CHAMPUS Medical Claim—Patient's Request for Medical Payment* form (*DD Form 2642*). You can download forms and instructions from the TRICARE website at www.tricare.mil/claims or from your regional contractor's website. When you submit your claim form, you will need to attach a copy of the provider's bill. The bill must contain the following:

- Patient's name
- Sponsor's Social Security number (SSN) or Department of Defense Benefits Number (DBN) (Eligible former spouses should use their own SSN or DBN, not their sponsor's.)
- Provider's name and address (If more than one provider's name is on the bill, circle the name of the person who provided the service.)
- Date and place of each service
- Description of each service or supply furnished
- Charge for each service
- Diagnosis (If the diagnosis is not on the bill, complete block 8a on the form.)

Proof of Payment Required for Overseas Claims

Starting Sept. 1, 2012, it will be required that all beneficiarysubmitted claims for care received overseas include proof of payment. Proof of payment, along with the *DD Form 2642*, should be submitted to the TOP claims processor.

When submitting your *DD Form 2642*, include an itemized bill or invoice, or a diagnosis describing why you received medical care and/or an explanation of benefits (EOB) from your other health insurance, if applicable. A canceled check or credit card receipt showing payment for medical supplies or services often satisfies the proof-of-payment requirement. If you paid for care or supplies in cash, TRICARE may ask for proof of cash withdrawal from your bank or credit union along with a receipt from your provider.

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Submitting Claims for Care Received while Living Overseas or Traveling

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To help facilitate accurate and timely processing of your claim, it is recommended that you write at the top of the *DD Form 2642* if payment was made directly to the provider. **Note:** After you have submitted the documents listed, the TOP claims processor may ask for additional documentation. If you have questions regarding proof-of-payment requests, claims submissions or the status of a submitted claim, please call your TOP Regional Call Center and select option 2 for claims assistance.

Sign Up Online for Claims Status Information

You can check the status of a claim for any care received in the United States after registering online with your regional claims processor at the websites listed in the chart below.

Remember, when you visit a U.S.-based TRICARE network provider, you are using your TRICARE Extra benefit and your provider will submit the claim for you. TRICARE Extra is not available overseas. Make sure you get an EOB to show the claim was filed, or follow the steps provided to file a claim.

Stateside Claims Mailing Addresses

TRICARE North Region	TRICARE South Region	TRICARE West Region
Health Net Federal Services, LLC c/o PGBA, LLC/TRICARE P.O. Box 870140 Surfside Beach, SC 29587-9740	TRICARE South Region Claims Department P.O. Box 7031 Camden, SC 29020-7031	West Region Claims P.O. Box 77028 Madison, WI 53707-1028 TriWest.com
www.myTRICARE.com	www.myTRICARE.com	

Overseas Claims Mailing Addresses (non-active duty)

TRICARE Eurasia-Africa (Africa, Europe and the Middle East)	TRICARE Latin America and Canada (Canada, the Caribbean Basin, Central and South America, Puerto Rico and the U.S. Virgin Islands)	TRICARE Pacific (Asia, Guam, India, Japan, Korea, New Zealand and Western Pacific remote countries)
TRICARE Overseas Program	TRICARE Overseas Program	TRICARE Overseas Program
P.O. Box 8976	P.O. Box 7985	P.O. Box 7985
Madison, WI 53708-8976	Madison, WI 53707-7985	Madison, WI 53707-7985

TRICARE Overseas Program Contact Information

TRICARE Eurasia-Africa	TRICARE Latin America and Canada	TRICARE Pacific
TOP Regional Call Center¹ +44-20-8762-8384 (overseas) 1-877-678-1207 (stateside) tricarelon@internationalsos.com	TOP Regional Call Center¹ +1-215-942-8393 (overseas) 1-877-451-8659 (stateside) tricarephl@internationalsos.com	TOP Regional Call Centers ¹ Singapore: +65-6339-2676 (overseas) 1-877-678-1208 (stateside) sin.tricare@internationalsos.com
		Sydney: +61-2-9273-2710 (overseas) 1-877-678-1209 (stateside) sydtricare@internationalsos.com

1. For toll-free contact information, visit www.tricare-overseas.com.

Your TRICARE Regional Contractor—Offering Help When You Need It

Your TRICARE regional contractor is a great resource to help with any questions you have about your benefit.

TRICARE has three regional contractors in the United States: Health Net Federal Services, LLC in the North Region; Humana Military Healthcare Services, Inc. in the South Region; and TriWest Healthcare Alliance in the West Region. International SOS Assistance, Inc. administers the TRICARE Overseas Program (TOP) benefit. Visit the TOP website at www.tricare-overseas.com for more information about overseas benefits. Separate contractors administer TRICARE's dental and pharmacy benefits; for more information, visit www.tricare.mil/dental or www.tricare.mil/pharmacy.

Each regional contractor maintains a website, toll-free customer service call center and TRICARE Service Centers to assist you with your questions and concerns (e.g., authorizations and referrals, appeals, claims, eligibility, fraud). Your TRICARE regional contractor can also help you locate health care providers. You can find contact information in the chart below.

TRICARE North Region	TRICARE South Region	TRICARE West Region
Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) www.hnfs.com	Humana Military Healthcare Services, Inc. 1-800-444-5445 Humana-Military.com	TriWest Healthcare Alliance 1-888-TRIWEST (1-888-874-9378) TriWest.com
Connecticut, Delaware, the District of Columbia, Illinois, Indiana, Kentucky (excluding the Fort Campbell area), Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, Vermont, Virginia, West Virginia, Wisconsin and portions of Iowa (Rock Island Arsenal area) and Missouri (St. Louis area)	Alabama, Arkansas, Florida, Georgia, Kentucky (Fort Campbell area), Louisiana, Mississippi, Oklahoma, South Carolina, Tennessee and Texas (excluding the El Paso area)	Alaska, Arizona, California, Colorado, Hawaii, Idaho, Iowa (excluding the Rock Island Arsenal area), Kansas, Minnesota, Missouri (excluding the St. Louis area), Montana, Nebraska, Nevada, New Mexico, North Dakota, Oregon, South Dakota, Texas (the southwestern corner only, including El Paso), Utah, Washington and Wyoming

TRICARE and the Patient Protection and Affordable Care Act

TRICARE is a benefit established under law as the health care plan for the uniformed services members, retirees and their families. The Patient Protection and Affordable Care Act (PPACA), signed into law in 2010, brought changes in health care coverage for many Americans, but had no direct effect on the TRICARE benefit. TRICARE was not affected by PPACA because it is authorized by an independent set of statutes, and remains under sole authority of the Department of Defense and the Secretary of Defense.

Neither the passage of the PPACA nor the recent Supreme Court ruling upholding the PPACA directly impacted the TRICARE benefit. TRICARE provides coverage for preexisting conditions and serious illnesses; offers an array of preventive care services with no cost-shares; maintains reasonable out-of-pocket costs with no or low deductibles and copayments; and has no annual or lifetime caps on coverage. One benefit addressed by the PPACA was coverage of young adults until reaching age 26. Although TRICARE did not previously have provisions for the young adult population, the National Defense Authorization Act, signed into law in January 2011, led to the speedy implementation of the TRICARE Young Adult (TYA) program. TYA gives eligible uniformed services dependents until reaching age 26 the option to purchase premium-based TRICARE coverage. As of May 31, 2012, more than 17,000 beneficiaries have signed up for TYA plans—11,171 are in TYA Standard, and 6,407 in TYA Prime. For more information about TYA and how to purchase it, go to www.tricare.mil/tya.

More information about TRICARE and health care reform is available at www.tricare.mil. For more information about TRICARE's covered clinical preventive services, go to www.tricare.mil/preventivecare. You may also sign up for automatic e-mail updates on TRICARE programs.

TRICARE Standard and TRICARE Prime®: What's the Difference?

As a TRICARE Standard beneficiary, you can enjoy TRICARE health benefits without having to enroll or pay enrollment fees.

TRICARE Prime is a managed care option offering the most affordable and comprehensive coverage. You have an assigned primary care manager (PCM), either at a military treatment facility or from the TRICARE network, who provides most of your care.

Active duty family members (ADFMs) have the option to enroll in TRICARE Prime or, in designated remote areas, in TRICARE Prime Remote for Active Duty Family Members. Retired service members and their dependents may also be able to enroll in TRICARE Prime if they qualify and reside in a Prime Service Area (PSA) (a geographical area where TRICARE Prime is available). To find out if you live in a PSA, contact your regional contractor (see "Your TRICARE Regional Contractor—Offering Help When You Need It" in this issue). If you are able to enroll in TRICARE Prime and would like to move to this program, there are a few things you should know.

Enrollment in TRICARE Prime

To enroll in TRICARE Prime, visit a TRICARE Service Center or mail a *TRICARE Prime Enrollment Application and Primary Care Manager (PCM) Change Form (DD Form 2876)* to your regional contractor. You may also enroll online through the Beneficiary Web Enrollment website, available at www.tricare.mil/bwe.

Active duty service members and ADFMs do not have to pay annual fees for TRICARE Prime. All others are required to pay enrollment fees. For current enrollment fees and other costs, go to www.tricare.mil/costs. TRICARE Prime enrollment fees for most retirees increase annually based on the Costof-Living Adjustment (COLA). An exception to annual fee increases applies to survivors of active duty deceased sponsors and medically retired uniformed service members and their dependents. Their fees remain frozen at the rate in effect at the time they are classified in the Defense Enrollment Eligibility Reporting System (DEERS) as survivors or medically retired and enrolled. Fees remain frozen as long as there is no break in their TRICARE Prime enrollment.

20th-of-the-Month Rule

TRICARE Prime enrollment is effective based on the 20thof-the-month rule. Applications received by your regional contractor by the 20th of the month will be effective at the beginning of the following month. If your application is received after the 20th of the month, your coverage will become effective the first day of the month following the next month (e.g., an enrollment received on Dec. 27 would become effective Feb. 1). You will receive a TRICARE Prime enrollment card and a letter identifying your PCM. ■

Differences between TRICARE Standard and TRICARE Prime

	TRICARE Standard	TRICARE Prime
Available to active duty service members (ADSMs)?	No	Yes
Available to active duty family members (ADFMs)?	Yes	Yes
Available to retirees, their family members and survivors?	Yes	Yes, if they live in a TRICARE Prime Service Area
Enrollment required?	No	Yes
Enrollment fees?	No	Yes, except for ADSMs and ADFMs
Primary care manager assigned?	No	Yes
Copayments for care?	No	No for ADSMs and ADFMs; yes for all others
Deductibles?	Yes, amount varies	No, unless using point-of-service (POS) option or non-network pharmacy
Outpatient cost-shares?	Yes, amount varies	No, unless using POS option or non-network pharmacy
Access to a military treatment facility (MTF)?	Yes, on a space-available basis	Yes

Filling Prescriptions with TRICARE Pharmacy Home Delivery

f you currently fill prescriptions for maintenance medications at retail pharmacies, you can reduce your out-of-pocket costs by switching to TRICARE Pharmacy Home Delivery. More than 1 million prescriptions are shipped to beneficiaries every month, and more than 97 percent of those are sent out in less than a week. Rarely, TRICARE Pharmacy Home Delivery may be unable to fill your prescription. The primary reason for returned prescriptions is that they require clarification from either you or your physician. There are steps you can take to avoid having your prescription returned:

- Ask your doctor to send prescriptions electronically to TRICARE Pharmacy Home Delivery. Electronic prescriptions are less likely to have missing or illegible information.
- If you do submit a prescription via mail, make sure that your name, your sponsor's Social Security number or Department of Defense Benefits Number and your date of birth are clearly written on the back of the prescription.
- If you receive a message from Express Scripts, Inc. (Express Scripts) about your prescription, call Express Scripts back within two business days to help fill your prescription quickly. The customer service department is open 24 hours a day, seven days a week.

Your prescription may also be returned or denied if the medication is not covered. If you are prescribed a new medication and you are not sure whether it is covered, call Express Scripts at 1-877-363-1303 or check the formulary search tool online at http://pec.ha.osd.mil/formulary_search.php.

TRICARE Pharmacy Home Delivery is your least expensive option when not using a military treatment facility pharmacy. There is no cost for home delivery for active duty service members, and for all other beneficiaries, there is no cost to receive up to a 90-day supply of generic medications. Copayments apply for brand-name and non-formulary medications. Prescriptions are delivered to you with free standard shipping, and refills can be easily ordered online, by phone or by mail. TRICARE Pharmacy Home Delivery also provides you with convenient notifications about your order status, refill reminders and assistance with renewing expired prescriptions.



When submitting a prescription via mail, make sure to clearly **write** the following on the back of the prescription:

- Your name
- Your sponsor's Social Security number or Department of Defense Benefits Number
- Your date of birth

For more information, visit www.tricare.mil/homedelivery or Express Scripts at www.express-scripts.com/TRICARE. You can also call the Member Choice Center at 1-877-363-1433 or download the Express Rx mobile app for iPhone or Android to transfer your existing prescriptions to home delivery. If you believe your prescription was returned or denied in error, you can call Express Scripts at 1-877-363-1303. To learn more about the Express Rx app and Express Scripts mobile website, see "Manage Your Care with TRICARE Mobile Apps" later in this issue.

Why Vaccinate?

The human immune system is designed to protect us from infection. When a germ (virus or bacteria) enters the body, the immune system recognizes the germ should not be there and sends antibodies to fight it. Additionally, the immune system remembers the germ. If the same germ enters the body again, antibodies are quickly deployed to get rid of it before it can make the person sick.

When a person gets an infectious disease once, immunity develops and wards off future infection with the same disease. There is only one problem with this efficient system: The first time a child is exposed to a disease, his or her immune system may not create antibodies quickly enough to keep the child from getting sick. In other words, a child has to be sick from a disease before becoming immune to it.

Fortunately, vaccines make it possible to build immunity to a disease without getting sick from it. Vaccines contain the same germs that cause diseases, but they have been killed or weakened to the point where they will not make a person sick. When a child is vaccinated, the immune system produces antibodies exactly like it would if the child were exposed to the germs. The child develops immunity without getting sick.

Medicines treat or cure infections, while vaccines prevent them. There are currently 16 diseases that children from birth to age 19 can be protected against by getting vaccinated. Vaccines are effective and safe. Most children will not have any reaction to a vaccination. For those who do, the reaction is usually minor—a sore leg, a slight rash or a mild fever that goes away within a day or two. Vaccines and other clinical preventive services covered by TRICARE are offered at no cost to TRICARE Standard beneficiaries. You may receive vaccinations from TRICARE-authorized providers or from participating retail network pharmacies. Before you travel overseas, check if any vaccinations are recommended for your destination and whether TRICARE covers those vaccines. For more information and to view a schedule of immunizations, visit the "Vaccines & Immunizations" home page of the Centers for Disease Control and Prevention's website at www.cdc.gov/vaccines. For more information about TRICARE coverage of vaccines, visit www.tricare.mil/immunizations.

Get Your Flu Vaccine

TRICARE recommends that all beneficiaries get the flu vaccine, especially these groups of people who are at a higher risk of getting the flu:

- Pregnant women
- People who live with or care for children younger than 6 months
- Health care and emergency medical services personnel
- Everyone between the ages of 6 months and 24 years
- People ages 25–64 with chronic health disorders or compromised immune systems
- Older people with diabetes, cardiovascular disease, asthma or HIV

For more information visit www.tricare.mil/flu.

Healthy Living Tips

besity, alcohol and substance use, and tobacco use are all significant health issues for service members and their families. TRICARE offers health promotion and disease prevention programs. Read on for healthy living tips and information on how TRICARE can help.

Obesity Prevention

In the United States, more than one-third of adults are obese. Obesity can lead to heart disease, stroke, type 2 diabetes and certain types of cancer. Healthy eating—with a focus on consuming fewer calories and making informed food choices and being physically active can help you reach and maintain a healthy weight, lower your risk of chronic disease and promote overall health. TRICARE's "Get Fit" campaign provides weight-loss resources as well as materials to educate you and your family on the dangers of being overweight. For more information about the campaign, including healthy living tips, links, games and articles, visit www.tricare.mil/getfit.

Alcohol and Substance Use Awareness

Heavy alcohol consumption is a significant problem in the military affecting both uniformed service members and their families. Some service members may use alcohol to cope with stress, boredom, loneliness and the lack of other recreational activities. Spouses and children of service members can also be affected by this issue.

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Healthy Living Tips

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Responsible alcohol consumption is a lifestyle decision you can make to maintain quality of life for you and your family. For more information on alcohol awareness and preventing abuse, visit www.tricare.mil/alcoholawareness.

The Department of Defense (DoD) "That Guy" multimedia campaign aims to reduce excessive drinking among young service members through sharing information, videos, downloads and other tools to raise awareness of alcohol abuse. To learn more, visit www.thatguy.com.

TRICARE also offers coverage for treatment of certain substance use disorders. For more information, visit www.tricare.mil/substanceusedisorders.

Quitting Tobacco

The leading preventable cause of death in the United States is smoking, closely followed by obesity. Smoking can cause cardiovascular and pulmonary disease and cancer. It can also increase your chances for hospitalizations, missed workdays, failed fitness evaluations and impaired night vision. Knowing these facts may encourage you to quit.

Smokeless tobacco is another dangerous and addictive form of tobacco. The two most common types of smokeless tobacco used in the United States are chewing tobacco and snuff. Smokeless tobacco is not a safe alternative to smoking; it can lead to cancer, oral health problems and nicotine addiction.

Quitting can be challenging. It takes, on average, 11 attempts to quit smoking. TRICARE offers two ways to help you get the assistance you need to break the smoking cycle:

- TRICARE's Smoking Quitline—a telephone support and referral service with trained smoking-cessation coaches, available to beneficiaries in the United States who are not eligible for Medicare
- The DoD's www.ucanquit2.org—a website with training and a wide range of tools to help you become tobacco-free

For more information about these free services, visit www.tricare.mil/tobaccocessation.

TRICARE Covers Clinical Preventive Services

Preventive care can help you maintain good health through early detection and treatment of disease. TRICARE covers many preventive medical services including preventive health screenings. As a TRICARE Standard beneficiary, you can receive the following preventive medical services for no outof-pocket costs:

Prostate cancer screening: TRICARE covers annual prostate exams and prostate-specific antigen (PSA) tests for men age 50 and older. TRICARE also covers these screenings for certain men as young as age 40 who have family histories of prostate cancer.

Breast cancer screening: Annual mammograms for women are covered beginning at age 40. Women younger than age 40 who are at high risk for breast cancer should talk to their health care providers about when and how often they should have mammograms and physical exams, which may also be covered by TRICARE.

Cervical cancer screening: TRICARE covers a Pap smear annually for women starting at age 18 (younger if sexually active) or less often at patient and provider discretion (though not less than every three years). Human papillomavirus (HPV) DNA testing is covered as a cervical cancer screening only when performed in conjunction with a Pap smear, and only for women age 30 and older. **Colorectal cancer screening:** TRICARE covers colorectal cancer screening beginning at age 50 for beneficiaries at average risk. Frequency varies according to screening type (i.e., fecal occult blood testing, proctosigmoidoscopy or flexible sigmoidoscopy, colonoscopy). If you have an increased risk for colon cancer due to family medical history or other risk factors, talk to your doctor about starting screenings at an earlier age.

Well-child care: The TRICARE well-child benefit covers children from birth until reaching age 6. The benefit includes comprehensive health promotion and disease-prevention exams, immunizations and developmental and behavioral assessments. Your child can receive preventive-care well-child visits as frequently as the American Academy of Pediatrics[®] recommends, but no more than nine visits in two years.

Immunizations: TRICARE covers age-appropriate vaccinations, including annual flu shots, as recommended by the Centers for Disease Control and Prevention.

Note: If you are at risk for specific diseases, talk to your doctor about your individual and family medical history to determine when you should begin preventive screenings.

Visit www.tricare.mil/preventivecare for additional information.

TRICARE Young Adult Offers a New Coverage Option

dult dependents of TRICARE beneficiaries may be eligible for TRICARE Young Adult (TYA) Prime or TYA Standard. The 2012 monthly premium for TYA Prime coverage is \$201, and the TYA Standard monthly premium is \$176. Premiums are subject to change annually.

Young adults considering TYA should verify eligibility before completing and sending in an application. To qualify for TYA, dependents must be at least 21 but not have reached age 26, unmarried and not otherwise eligible for TRICARE or for employer-sponsored health insurance.

The sponsor's status and dependent's location determines which TYA plan he or she qualifies for. Dependents of uniformed service members may purchase TYA Prime if they qualify, live in a designated Prime Service Area and their sponsor's status makes them eligible for TRICARE Prime. Beneficiaries may also choose to enroll in TYA Standard, which offers the flexibility to see any TRICARE-authorized network and non-network providers. Please see the chart below to determine TYA program eligibility based on sponsor status. For more information and to access the TRICARE Young Adult Application for your region, visit www.tricare.mil/tya.



Like other active duty family members (ADFMs), TYA enrollees must be command-sponsored in order to enroll in TYA TRICARE Overseas Program (TOP) Prime or TYA TOP Prime Remote. Enrollment in TOP Prime or TOP Prime Remote is only available to active duty service members who are permanently stationed overseas and to ADFMs who are command-sponsored and accompanying their sponsors on overseas tours or on orders in an overseas location. This includes activated National Guard and Reserve members who are on orders to an overseas location for more than 30 consecutive days, and their command-sponsored ADFMs.

Eligibility t	to Purchase	TRICARE Y	oung Adult	Coverage Ba	ased on Spo	nsor Status	5
Sponsor Status	TRICARE Prime ¹	TRICARE Prime Remote ¹	TRICARE Standard	Uniformed Services Family Health Plan ¹	TRICARE Overseas Program (TOP) Prime ¹	TOP Prime Remote ¹	TOP Standard
Active Duty	V	~	 ✓ 	 ✓ 	~	~	v
Retired	 ✓ 	×	 ✓ 	V	×	×	V
Selected Reserve of the Ready Reserve ²	×	×	~	×	×	×	~
Retired Reserve ²	×	×	 ✓ 	×	×	×	~

1. To enroll in this program, it must be offered in your geographic area, and you must meet all other eligibility criteria.

2. If you are an adult child of a non-activated member of the Selected Reserve of the Ready Reserve or of the Retired Reserve, your sponsor must be enrolled in TRICARE Reserve Select or TRICARE Retired Reserve for you to be eligible to purchase TYA coverage.

Manage Your Care with TRICARE Mobile Apps

with TRICARE mobile websites and smartphone applications, or "apps," you can take advantage of online resources, account and benefit information and educational resources from TRICARE contractors. Read on to learn more about TRICARE's mobile tools.

North Region: Health Net Mobile

TRICARE beneficiaries in the TRICARE North Region now have easy on-the-go access to health care information through the Health Net Federal Services, LLC (Health Net) mobile site, available on your smartphone at www.hnfs.com/go/mobile. The mobile site, which can be accessed on smartphones and tablets with no downloads required, is a streamlined version of www.hnfs.com. You can quickly locate TRICAREauthorized providers and find valuable resources including Health Net contact information, behavioral health resources and answers to frequently asked questions about benefits, claims and eligibility.

South Region: Humana Military Mobile

Beneficiaries in the South Region can access health care information via smartphone or other mobile device by visiting Humana Military Healthcare Service, Inc.'s (Humana Military's) mobile version of its website, Humana Military Mobile, at m.humana-military.com. You can view the site on any smartphone or other Web-enabled handheld device. Humana Military Mobile provides you with links to several South Region services including the provider locator, urgent care center finder and eligibility and plan information.

For more information about Humana Military's online and mobile resources, visit Humana-Military.com.

West Region: TriWest Mobile Site and App

TRICARE beneficiaries living in the West Region can access their TRICARE accounts on the TriWest Healthcare Alliance (TriWest) mobile site at m.triwest.com. If you have already registered on the full TriWest website, you have access through the mobile site as well. From TriWest's mobile site, you can access account information, find a provider, make a payment and check claims status. Have updates texted to you real-time by signing up for text message "QuickAlerts." You can also get benefit information by downloading the TriWest app, which quickly calls up a local provider directory, guides those who are new to the TRICARE West Region and offers wellness and prevention tips.

To learn more about the TriWest mobile tools and register for a secure account, visit TriWest.com/GoMobile.

TRICARE Pharmacy Program on Your Phone

Access TRICARE Pharmacy Program and drug information on the Express Scripts, Inc. (Express Scripts) mobile site at www.express-scripts.com/mobile/ or by downloading the Express Rx app for iPhone or Android. With these tools, you can log in and:

- Find benefit information
- Start home delivery
- Check order status
- Refill prescriptions
- Find a pharmacy
- Access information about drugs and their side effects

The Express Scripts app now offers two new features for your smartphone:

- Reminders—Through the reminder feature, beneficiaries can set up daily medication alerts.
- Account registration—Beneficiaries will now be able to create their Express Scripts Web account through the mobile app.

You must be registered on the Express Scripts website before using the Express Scripts mobile site. You can register using your computer by visiting www.express-scripts.com/activate and following instructions for TRICARE beneficiaries.

milConnect Mobile from DMDC

You can use the milConnect website (learn more about milConnect earlier in this issue) from the Defense Manpower Data Center (DMDC) mobile site and app to:

- Locate identification card-issuing facilities
- Find contact information for TRICARE regional contractors
- View a searchable section of the most frequently asked questions

The no-cost milConnect mobile app is currently available only for Android smartphones.



Invite a Provider to Become TRICARE-Authorized

f you know a provider who is not yet TRICARE-authorized but is interested in treating TRICARE beneficiaries, let him or her know that it is not necessary to become a network provider by signing a contract with your regional contractor. Most providers with a valid professional license (issued by a state or a qualified accreditation organization) can become TRICARE-authorized, and TRICARE will pay them for covered services.

To invite your provider to become TRICARE-authorized, you can visit www.tricare.mil/findaprovider and click "Invite a Provider to Join TRICARE" to download a flyer to give to your doctor. The flyer explains the benefits of being TRICARE-authorized and includes information about the authorization process.

TRICARE REGIONAL CONTRACTOR CONTACT INFORMATION

TRICARE North Region

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

TRICARE South Region

Humana Military Healthcare Services, Inc. 1-800-444-5445 Humana-Military.com

TRICARE West Region

TriWest Healthcare Alliance 1-888-TRIWEST (1-888-874-9378) TriWest.com

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Get TRICARE Resources Online

As a TRICARE beneficiary, you can look up benefit information, find your regional contractor and get the latest TRICARE news all from your computer. With TRICARE's online materials, you have a variety of health and benefit information right at your fingertips.

TRICARE Website: www.tricare.mil

Visit the beneficiary portal of the TRICARE website to view plan and provider information and download forms. You can take a moment to fill out the basic information requested on the home page. Based on your status and your sponsor's status, you may have different care options, different costs and special programs available to you and your family.

To find the TRICARE option that's right for you and your family, try the Plan Finder on www.tricare.mil. Visit the home page and click the box in the lower-left corner. This tool will ask you a series of questions to determine what TRICARE plan or plans you are eligible for and which of them best meets your health care needs.

TRICARE Smart Site: www.tricare.mil/smart

Learn everything you need to know about your TRICARE benefit by browsing more than 170 products on the TRICARE Smart site. Here, you can download brochures, fact sheets, newsletters, beneficiary handbooks and briefings for your own information or to share with others. The website also includes publications in Spanish. These regularly updated materials can provide you with everything from a quick glance to detailed information about your TRICARE benefit.

Sign up for E-mail Updates

Visit www.tricare.mil/subscriptions to sign up for e-mail updates. Enter your e-mail address, select the newsletters and other updates you wish to receive and click "Save" at the bottom of the page.

To find more TRICARE online resources, visit www.tricare.mil.