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## THE UNDER SECRETARY OF DEFENSE 4000 DEFENSE PENTAGON WASHINGTON, DC 20301-4000



JAN 3 1996

**MEMORANDUM FOR:** 

SECRETARY OF THE ARMY SECRETARY OF THE NAVY SECRETARY OF THE AIR FORCE

SUBJECT: Participation in TRICARE for Families of Reserve/Guard Personnel Activated

in Support of Operation Joint Endeavor

Operation Joint Endeavor provides an excellent opportunity to demonstrate how TRICARE supports deployed active duty forces and their family members who remain behind.

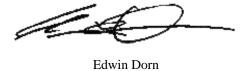
To improve access to care for families of deploying Reserve/Guard personnel, provide continuity of care with existing providers, reduce their out-of-pocket expenses for healthcare, and improve satisfaction with their Reserve/Guard service and the Military Health Services System, Dr. Stephen C. Joseph, ASD/HA, and Ms. Deborah R. Lee, ASD/RA, have developed a demonstration project which waives the CHAMPUS annual deductible for the families of Reserve/Guard personnel called to active duty for more than 30 days in support of Operation Joint Endeavor. Under the terms of the demonstration, CHAMPUS will immediately begin cost sharing for family members of these Reserve/Guard personnel. For those using established TRICARE Extra network providers their cost shares will be 15 percent of the negotiated fees, otherwise it will be 20 percent for those using TRICARE Standard (CHAMPUS).

As a matter of general DoD personnel policy, Reserve/Guard members called to active duty for periods of more than 30 days should be treated comparably to active duty members. Consistent with this policy, the family members of these members become eligible for CHAMPUS. However, the normal CHAMPUS deductible requirement presents an inequity for these families. Because health program deductibles are premised on coverage for an entire year, a beneficiary who receives coverage for a much shorter period receives unfavorable treatment. It is quite likely that such beneficiaries will be required to meet a second annual deductible under another health plan that will provide coverage during those months of the year in which the reservist returns to his or her civilian job. This demonstration project is designed to test an approach for addressing this special inequity.

Additionally, in those areas where TRICARE is in full operation, Reserve/Guard personnel called to active duty for 179 days or more will have the option of enrolling their families in TRICARE Prime. Since Prime requires enrollees to use only approved providers, and since many reserve families may have on-going relationships with providers not in this network, Prime may not be the ideal choice for most families, however, we wish to provide as many options for such families as possible.

I am also concerned about the health benefits of active duty members and their families stationed in remote areas. In most cases, these family members must rely to a greater degree upon CHAMPUS for healthcare coverage than active duty families who live near military medical facilities. To improve access to care and lower out-of-pocket costs for active duty families in remote areas, Dr. Joseph will be testing the feasibility of making TRICARE Prime, which eliminates CHAMPUS deductibles and establishes defined copayments, available to such families in Region 11 (WA/OR) in the spring of 1996. It is our intent to make this program available to all active duty families assigned to remote locations as soon as possible. This should eliminate any perceived inequity between health benefits for active duty families and newly accessed active duty families of Reserve/Guard members called to active duty.

While the above measures provide interim solutions for those supporting Operation Joint Endeavor, I have asked the Assistant Secretary of Defense for Health Affairs to develop a permanent solution by seeking legislation that would authorize the Secretary of Defense to waive CHAMPUS deductibles for families of Reserve/Guard personnel activated for periods greater than 30 days in support of a contingency operation. We will actively seek support for this initiative during the coming year and I ask your assistance in seeking its passage as well.



cc:

Surgeons General

**HA POLICY 96-018** 

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Last update: 12/21/1998