TRANSITIONING FROM ACTIVE DUTY TO RETIREMENT

Your options after retiring from active duty

When you retire from active duty, you will have several TRICARE coverage options. Understanding these options will help you and your family make the best health care decisions. It is also essential that you keep your Defense Enrollment Eligibility Reporting System (DEERS) information up to date when you retire. For more information, visit **www.tricare.mil/deers**.

TRICARE COVERAGE OPTIONS

TRICARE Prime®

To continue TRICARE Prime coverage when you retire, you must reenroll as a retiree, enroll eligible family members as retiree dependents and pay the appropriate single or family enrollment fee. If you decide to reenroll in TRICARE Prime, you must reenroll prior to or within 30 days after your retirement date to have continuous TRICARE Prime coverage. You may reenroll by using the Beneficiary Web Enrollment website at www.dmdc.osd.mil/appj/bwe, calling your regional contractor or submitting a *TRICARE Prime Enrollment*, *Disenrollment*, *and Primary Care Manager (PCM) Change Form* (DD Form 2876) to your regional contractor. The effective date of coverage will be the date of your retirement.

If you enroll more than 30 days after your retirement, your request will be considered an initial enrollment in TRICARE Prime and the 20th-of-the-month rule applies. For an initial enrollment in TRICARE Prime received on or before the 20th of the month, your coverage will begin the first day of the following month. For an initial enrollment received after the 20th of the month, your coverage will begin the first day of the month following the next month. If you have a break in TRICARE Prime coverage, you and your eligible family members are covered by TRICARE Standard and TRICARE Extra (if your status is accurately reflected in DEERS) until your TRICARE Prime coverage resumes.

Note: TRICARE Prime is not available everywhere. Contact your regional contractor for TRICARE Prime availability details.



Getting Care

If enrolled in TRICARE Prime, your PCM will handle routine care and provide specialty care referrals. You may select a PCM at a military hospital or clinic when space permits (active duty service members [ADSMs] and their families have priority at military hospitals and clinics). If there is no space for retirees and retiree dependents to enroll at a military hospital or clinic, you may need to change to a civilian TRICARE network PCM. If you have a civilian network PCM, you may be referred to a military hospital or clinic for specialty care based on the hospital or clinic's "right of first refusal" to deliver TRICARE Prime specialty care within the Prime Service Area.

Costs

There is a yearly TRICARE Prime enrollment fee, and copayments will apply for civilian TRICARE network provider care. Point-of-service (POS) fees will apply if you get care from a network or non-network TRICARE-authorized provider without a referral from your PCM (doesn't apply to ADSMs). If you have other health insurance (OHI), it is considered your primary insurance and pays before TRICARE. Visit **www.tricare.mil/costs** for cost details.

Enrollment Portability

TRICARE Prime enrollment is portable, meaning you can transfer your coverage to another region if TRICARE Prime is available in your new location. You should transfer your enrollment when you move or if you will be out of the area for more than 60 days. Your regional contractor can help you make this transition. Do not disenroll from TRICARE Prime before you move. Retirees and their dependents are limited to two enrollment transfers each enrollment year. If family members live in different regions, you may enroll them in multiple regions and pay only one family enrollment fee under the split enrollment option.

US Family Health Plan

The US Family Health Plan (USFHP), a TRICARE Prime option, is available through networks of community-based, not-for-profit health care systems in six areas of the U.S. When you enroll in USFHP, you get care through the health care systems offering the program, and you may not use services within the Military Health System (including military hospital or clinic care), except in emergencies. Additionally, your prescription drug coverage is offered through your USFHP provider, not the TRICARE Pharmacy Program. For USFHP details and service areas, visit **www.usfhp.com**.

TRICARE Standard® and TRICARE Extra

When not enrolled in TRICARE Prime, you may be covered by TRICARE Standard and TRICARE Extra in the U.S., if DEERS shows you as eligible. Enrollment and referrals are not required, but some services may require prior authorization. Military hospital and clinic care is on a spaceavailable basis only. You may see any TRICARE-authorized provider, but the provider's TRICARE network status determines your out-of-pocket costs. With TRICARE Extra, you see a TRICARE network provider, which reduces your costs. Under TRICARE Standard, you may see any nonnetwork TRICARE-authorized provider, but your costs may be higher. For more details on costs under TRICARE Standard and TRICARE Extra, visit www.tricare.mil/costs.

TRICARE Overseas Program (TOP) Standard

If living overseas, you may be eligible to use TOP Standard and get military hospital or clinic care on a space-available basis. TOP Standard is available to retired service members, their families and others living or traveling overseas, and is similar to TRICARE Standard, including cost-shares and yearly deductibles. TOP Prime and TOP Prime Remote are not available after retirement.

Note: TRICARE Extra is not available overseas.

If you live or travel in the Philippines, you are required to use certified providers and pharmacies. Additionally, TOP Standard beneficiaries who live in the Philippines and who get care within designated Philippine Demonstration areas must see approved demonstration providers to ensure TRICARE cost-shares their claims, unless they have a waiver from Global 24 Network Services. For more information, visit www.tricare-overseas.com/philippines.htm.

TRICARE For Life

TRICARE For Life (TFL) is Medicare-wraparound coverage for TRICARE beneficiaries who have Medicare Part A and Medicare Part B, regardless of age or where you live. Once you have both Part A and Part B, you automatically receive TRICARE benefits under TFL. If you are entitled to premiumfree Medicare Part A, you must also have Medicare Part B to keep TRICARE.

ADSMs and active duty family members (ADFMs) who are entitled to premium-free Medicare Part A remain eligible for TRICARE Prime or TRICARE Standard and TRICARE Extra program options without having Medicare Part B. However, when your sponsor's active duty status ends, you must have Medicare Part B to remain TRICARE-eligible. You may sign up for Medicare Part B during the special enrollment period, which is available anytime your sponsor is on active duty and you are covered by TRICARE, or within the first eight months following either (1) the month your sponsor's active duty status ends or (2) the month TRICARE coverage ends, whichever comes first. To avoid a break in TRICARE coverage, ADSMs and ADFMs who are entitled to Medicare Part A must sign up for Medicare Part B before their sponsor's active duty status ends.

Though you are not required to have Medicare Part B to remain qualified for TRICARE Reserve Select or TRICARE Retired Reserve (TRR), you are strongly encouraged to sign up for Medicare Part B when first eligible to avoid paying a monthly late-enrollment premium surcharge if you enroll at a later date. The surcharge is a 10 percent premium increase for each 12-month period that you could have enrolled but did not.

In the U.S. and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands), TRICARE pays last for services covered by both TRICARE and Medicare. Medicare does not pay for services received overseas. For overseas care, TRICARE pays first and you pay the applicable TRICARE Standard cost-shares and yearly deductible. For Medicare details, visit **www.medicare.gov**. For Medicare enrollment information, visit **www.ssa.gov**. For TFL details, visit **www.tricare.mil/tfl**.



TRICARE Plus

TRICARE Plus is a program that allows beneficiaries who usually get military hospital or clinic care on a space-available basis (for example, TRICARE Standard and TRICARE Extra, TOP Standard, TFL and dependent parents and parentsin-law) to enroll and get primary care appointments at the military hospital or clinic within the same primary care access standards as beneficiaries enrolled in a TRICARE Prime option. Beneficiaries should contact their local military hospital or clinic to determine if they may participate in TRICARE Plus. Enrollment in TRICARE Plus at one military hospital or clinic does not automatically extend TRICARE Plus enrollment to another military hospital or clinic. The military hospital or clinic is not responsible for any costs when a TRICARE Plus beneficiary is referred outside for additional civilian care.

TRICARE Retired Reserve®

TRR is a premium-based health plan that certain members of the Retired Reserve may qualify to purchase until reaching age 60. TRR provides comprehensive health care coverage and patient cost-shares and deductibles similar to TRICARE Standard and TRICARE Extra, but TRR beneficiaries must pay monthly premiums. TRR beneficiaries may get care from any TRICARE-authorized provider, unless overseas restrictions apply. Retiree cost-shares and deductibles apply. For TRR details, visit **www.tricare.mil/trr**.

TRICARE Pharmacy Program

Under the TRICARE Pharmacy Program, prescriptions may be filled through a military pharmacy, TRICARE Pharmacy Home Delivery,^{*} a TRICARE retail network pharmacy[†] or a non-network pharmacy. Your options for filling your prescription depend on the type of drug your provider prescribes. For TRICARE Pharmacy Program details and cost information, visit **www.tricare.mil/pharmacy**.

Note: USFHP beneficiaries are **not** eligible for benefits through the TRICARE Pharmacy Program, and must use their USFHP provider for prescription drug coverage.

- * Outside the U.S. and U.S. territories, you may only use TRICARE Pharmacy Home Delivery if you have a prescription from a U.S.-licensed provider and you have an APO/FPO address or are assigned to a U.S. Embassy or State Department. Beneficiaries living in Germany cannot use the home delivery option due to country-specific restrictions. If you live in Germany, you should fill prescriptions at military pharmacies or overseas pharmacies.
- † TRICARE retail network pharmacies are only available in the U.S. and the U.S. territories of Guam, the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands. Currently, there are no retail network pharmacies in American Samoa.

TRICARE Retiree Dental Program

The TRICARE Retiree Dental Program (TRDP) offers comprehensive, cost-effective dental coverage to you and your family. Enrollment is voluntary and premiums are required. Retirees are encouraged to enroll within 120 days of retirement. There is no 12-month waiting period for major services if retirees enroll within 120 days. For more information on the TRDP, visit **www.trdp.org**.

Extended Care Health Option

Extended Care Health Option (ECHO) services for families with special needs are not available after retirement. Contact your ECHO Case Management Department for assistance in locating special needs services after you retire.

YOUR TRICARE BENEFIT AND THE AFFORDABLE CARE ACT

The Affordable Care Act requires that individuals maintain health insurance or other health coverage that meets the definition of "minimum essential coverage."

The TRICARE program meets the minimum essential coverage requirement. Most people who do not meet this provision of the law will be required to pay a penalty for each month they do not have adequate coverage. The penalty will be collected each year with federal tax returns. For more information, visit **www.tricare.mil/aca**. You can also find other health care coverage options at **www.healthcare.gov**.

GO TO www.tricare.mil/contactus



TRICARE North Region

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



TRICARE South Region Humana Military 1-800-444-5445

LOOKING FOR More Information?

HumanaMilitary.com



TRICARE West Region

UnitedHealthcare Military & Veterans 1-877-988-WEST (1-877-988-9378) www.uhcmilitarywest.com

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TRICARE Overseas Program (TOP)

International SOS Government Services, Inc. www.tricare-overseas.com

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

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+65-6339-2676 (overseas) 1-877-678-1208 (stateside) sin.tricare@internationalsos.com

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+61-2-9273-2710 (overseas) 1-877-678-1209 (stateside) sydtricare@internationalsos.com

This brochure is not all-inclusive. For additional information, please go to www.tricare.mil.

An Important Note About TRICARE Program Information

At the time of publication, 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 hospital and clinic guidelines and policies may be different than those outlined in this publication**. For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.

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