

Other Important Information

Supplemental Briefings Slides That Provide Additional Information to the Other TRICARE Briefings

Enrollment Options

TRICARE Open Season

- TRICARE Open Season is the annual period when you can enroll in or change your health care coverage plan for the following year.
- TRICARE Open Season applies only to enrollment in TRICARE Prime and TRICARE Select health plans.
- The 2019 TRICARE Open Season is from Nov. 11 to Dec. 9, 2019.
- Enrollment changes made during the 2019 TRICARE Open Season go into effect on Jan. 1, 2020.
- Visit www.tricare.mil/openseason.

Qualifying Life Event

- A Qualifying Life Event (QLE) is a certain change in your life that means different TRICARE health plan options may be available to you and your family.
- Following a QLE, you have 90 days to make eligible health plan enrollment changes.
- A QLE for one family member means all family members are eligible to make enrollment changes.
- Examples of TRICARE QLEs include: getting married or divorced, moving, giving birth, adopting a child, and retiring.
- Visit www.tricare.mil/lifeevents.

Qualifying Life Events

- The following are TRICARE Qualifying Life Events:
 - Change in sponsor status that results in ineligibility to continue existing coverage
 - Change in family composition
 - Moving (change of address)
 - Certain government-directed changes
 - Change in command sponsorship (overseas only)
 - Losing sponsor or family member eligibility
 - Change in eligibility status of any single family member in another family
 - Losing other health insurance
- For more information, visit www.tricare.mil/lifeevents.

Enrollment Options following a Qualifying Life Event

- Depending on your eligibility, a Qualifying Life Event (QLE) may allow you and your family to:
 - Enroll in a new TRICARE health plan.
 - Change your health plan coverage.
- If you want to enroll in or change your health plan, you must:
 - Update the Defense Enrollment Eligibility Reporting System (DEERS) with the QLE.
 - Make the eligible enrollment changes within 90 days following the QLE.
 - Pay any enrollment fees or premiums due during the QLE period.
- For information on QLEs, visit www.tricare.mil/lifeevents.

Get TRICARE Correspondence on milConnect

- You can get email alerts on changes to your benefit from the Defense Manpower Data Center.
- These emails will send you to milConnect to view enrollment or coverage status changes.
- If you don't have an email address on file, or if you opt out of email alerts, you'll get postcards in the mail that ask you to log in to milConnect to view updates.



TRICARE and Other Health Insurance

- Other health insurance (OHI) is considered your primary health insurance.
- For services covered by Medicare, OHI, and TRICARE For Life, Medicare pays first, your OHI pays second, and TRICARE pays last.
- 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
- If you have OHI:
 - Fill out a TRICARE Other Health Insurance Questionnaire at www.tricare.mil/forms.
 - Follow the referral and authorization rules for your OHI.
 - Tell your provider about your OHI and TRICARE.

Mental Health and Substance Use Disorder Services

- TRICARE offers mental health and substance use disorder services for you and your family:*
 - Emergency services: Required when the physical well-being of an individual or those around him or her is at risk. Call 911 or go to the nearest emergency room.
 - Outpatient services: Provider visits and other services that don't require an overnight stay.
 - Inpatient services: Services that require an overnight stay.

Note: Active duty service members must have a referral and prior authorization for any nonemergency inpatient or outpatient mental health care from a civilian provider.

^{*} Certain services may be limited or unavailable overseas. For emergencies overseas, contact your TRICARE Overseas Program Regional Call Center and choose option 1.

Mental Health and Substance Use Disorder Resources

- Military Health System Nurse Advice Line: Get your nonemergency health questions answered or find an urgent care provider:
 - Call 1-800-874-2273, option 1, in the U.S., Guam, and Puerto Rico.
 - Visit www.mhsnurseadviceline.com for overseas contact info.
 - Use secure web chat and video chat.
- Military Crisis Line: Get confidential support:
 - Call 1-800-273-8255, option 1.
 - Send a text to 838255.
 - Go to www.militarycrisisline.net.
- Military OneSource: Get non-medical counseling services for short-term issues:
 - Call 1-800-342-9647 or go to www.militaryonesource.mil.

Telemedicine Services

TRICARE East Region: Humana Military

- Call: 1-800-444-5445

TRICARE West Region: Health Net Federal Services, LLC

- Call: 1-844-866-WEST (9378)



Protecting Your Health Care Rights

- The Department of Defense Uniformed Services Employment and Reemployment Rights Act (USERRA) protects uniformed service members' civilian jobs. Your rights include:
 - Continuing your existing employer-based health plan
 - Reinstatement to your employer's health plan
- Employer Support of the Guard and Reserve:
 - Call **1-800-336-4590**.
 - Go to www.esgr.mil/userra.

Reporting Suspected Fraud and Abuse

- Stateside: Report suspected fraud and abuse to your regional contractor. You can also report all cases to the Defense Health Agency's Program Integrity Office. Go to www.tricare.mil/contactus/reportfraudabuse or www.health.mil/fraud.
- Overseas: Report suspected fraud and abuse to International SOS
 Government Services, Inc., or International SOS. You can also email
 TOPProgramIntegrity@internationalsos.com or go to
 www.health.mil/fraud.
- Pharmacy: Call Express Scripts, Inc., at 1-866-759-6139 or email TRICAREfraudtip@express-scripts.com to report fraud and abuse regarding the TRICARE Pharmacy Program.

TRICARE.mil

Easily manage benefits at home or on the go via secure websites. On **www.tricare.mil**, the "I want to ... " section helps you:

- Enroll in or purchase a plan
- File or check a claim
- View referrals and prior authorizations
- Find a doctor

... and **much more!**



Provider Types

Military Hospitals and Clinics

Civilian TRICARE-Authorized Providers Providers Who Are Not TRICARE-Authorized

There are two types of civilian TRICARE-authorized providers:

NETWORK

- Accept TRICARE allowed amount as full payment*
- File claims for you

NON-NETWORK

- Do not have an agreement with TRICARE
- Do not have to file claims for you
- * The TRICARE allowed amount is the TRICARE paid portion plus the beneficiary's portion.

Program Comparisons

TRICARE Prime®	TRICARE Select®
A health maintenance organization (HMO)-style plan	A preferred-provider plan (PPO)-style plan
Get most care from a primary care manager (PCM)	Choose your TRICARE-authorized provider
Referrals for specialty care	Referrals not required for most services
Prior authorization for some services	Prior authorization for some services
Receive care from an established network of doctors and other health care providers	Receive care from any provider, but pay higher out-of-pocket costs when you receive care outside the established network of providers
No deductible applies, copayments apply for all beneficiaries except active duty service members	Deductible and copayments apply

Explanation of Benefits (EOB)

- An EOB documents how a claim was settled.
- You can receive an EOB statement online on your regional contractor's website.
 - You must register on their secure portal first.
 - If overseas, you can still receive a paper EOB.
- Statements should be received within six weeks of claims submission.

Emergency or Urgent Care for National Guard and Reserve Members

- If a National Guard or Reserve member incurs an injury, illness, or disease that results in emergency or urgent care while on orders 30 days or less, their command unit must provide Defense Health Agency—Great Lakes (DHA-GL):
 - Line of Duty determination
 - DHA-GL Worksheet-01: Medical Eligibility Verification
- Send eligibility documents and *DHA-GL Worksheet-01: Medical Eligibility Verification* to DHA-GL the same day of the incident
 - Download form at www.health.mil/Greatlakes.
 - Fax documentation to 1-847-688-7394.

Line of Duty (LOD) Care

- Care needed after orders expire
 - If a National Guard or Reserve member resides 50 miles or less of a military hospital or clinic, LOD determination requests go to the military hospital or clinic.
 - If a National Guard or Reserve member resides more than 50 miles from a military hospital or clinic, LOD requests go to the Defense Health Agency—Great Lakes (DHA-GL).
 - Find instructions and forms at www.health.mil/greatlakes or call 1-888-647-6676, option 2.

Note: Authorized LOD care is limited to the specific injury, illness, or disease that was incurred or aggravated while in a qualified duty status (for example, if your left arm was injured and an LOD determination was approved for that condition, then care for a right knee issue is not authorized under the same LOD).

Stateside Regional Contractors

- TRICARE East Region
 Humana Military
 1-800-444-5445
 HumanaMilitary.com
 www.tricare-east.com
- TRICARE West Region
 Health Net Federal Services, LLC
 1-844-866-WEST (1-844-866-9378)
 www.tricare-west.com

Overseas Regional Contractor

TRICARE Overseas Program (TOP)
 International SOS Government Services,
 Inc.

www.tricare-overseas.com/contact-us

More Resources

TRICARE Website www.tricare.mil



- Publications www.tricare.mil/publications
- milConnect https:///miltconnect.tricare.mil