

Using TRICARE® and Medicare

An Overview of How TRICARE Works With Medicare for Dual-eligible Beneficiaries

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Today's Agenda

- What Is TRICARE?
- TRICARE and Medicare Eligibility
- TRICARE For Life
- TRICARE Plan Options
- Other Important Information
- For Information and Assistance

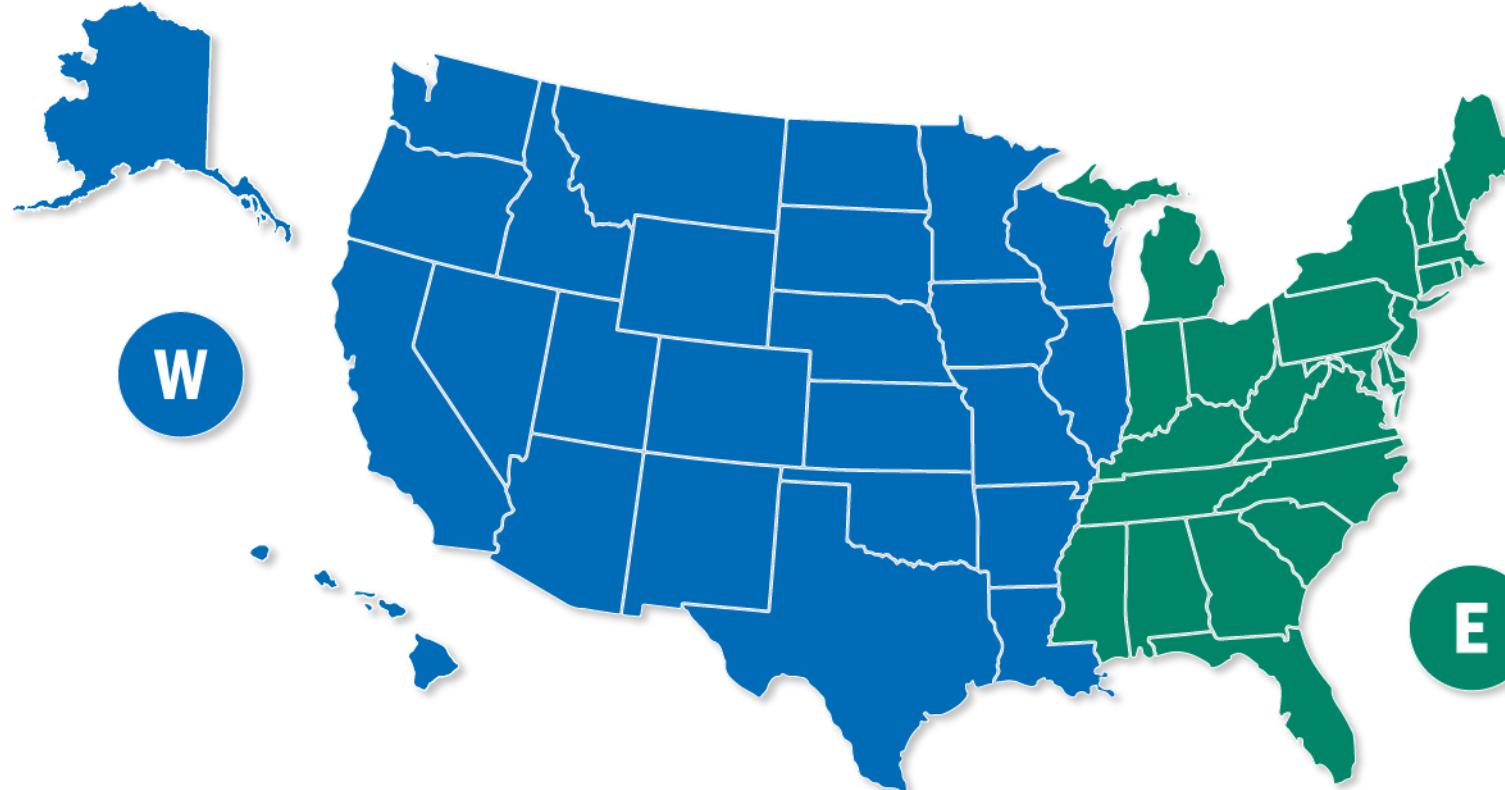
What Is TRICARE?

What Is TRICARE?



- TRICARE is the healthcare program for the U.S. Department of Defense. It consists of:
 - Direct care
 - Civilian care
- TRICARE® is the brand name for the U.S. Military Health System.

TRICARE Stateside Regions



West Region

TriWest Healthcare Alliance

East Region

Humana Military

TRICARE Overseas Program

Latin America and Canada

Canada, the Caribbean Basin,
Central and South America, Puerto Rico,
and the U.S. Virgin Islands

Eurasia-Africa

Africa, Europe, and the Middle East

Pacific

American Samoa, Asia, Australia, Guam,
India, Japan, New Zealand, Northern
Mariana Islands, South Korea, and
Western Pacific remote countries



WPS—Military and Veterans Health

- WPS—Military and Veterans Health administers the TRICARE For Life benefit.
- WPS provides customer service and claims processing for beneficiaries who have Medicare Part A and/or Medicare Part B.

TRICARE and Medicare Eligibility

Keep DEERS Information Up To Date



Being able to use TRICARE depends on keeping DEERS up to date.

Update DEERS after you have a life event, like getting married or divorced, moving, giving birth, adopting a child, retiring, and other changes.



Go to an ID Card Office
(<https://idco.dmdc.osd.mil/idco>)

Note: You must use this option to add family members in DEERS.



Log in to <https://milconnect.dmdc.osd.mil>.



Call 800-538-9552.



Fax 800-336-4416.

Dual Eligibility

- TRICARE beneficiaries who are eligible for Medicare Part A (inpatient services), regardless of the reason, **must** have Medicare Part B coverage (outpatient services) to remain eligible for TRICARE.
- Exceptions:
 - Active duty service members and active duty family members
 - Beneficiaries who have purchased TRICARE Young Adult, TRICARE Reserve Select, or TRICARE Retired Reserve, and those enrolled in the US Family Health Plan or TRICARE Plus

Note: TFL beneficiaries with Medicare Part A and Part B can enroll in TRICARE Plus. Enrolling in TRICARE Plus doesn't negate the requirement to have Medicare Part A and Part B.

Contact the Social Security Administration
or Medicare for more information:
800-772-1213 ♦ www.ssa.gov
800-MEDICARE ♦ www.medicare.gov

Eligible for Medicare Part B under Age 65

- If your Medicare eligibility is based on a disability:
 - Your Medicare eligibility begins after 24 months of Social Security disability insurance. The 24-month waiting period doesn't apply to beneficiaries with amyotrophic lateral sclerosis (also called Lou Gehrig's disease).
- If you have end-stage renal disease:
 - You must sign up for Medicare to remain TRICARE-eligible. Medicare begins the first day of the fourth month of dialysis treatments.
 - Medicare may begin as early as the first month of dialysis if you participate in a home dialysis training program and you do home dialysis treatments.
 - If you have a kidney transplant, your eligibility begins the month the transplant is performed, or earlier.

Eligible for Medicare Part B at Age 65

- Five months before your 65th birthday, you'll receive a notification from the Defense Manpower Data Center informing you of the requirement to sign up for Medicare.
- DO NOT decline Medicare Part B. If you decline:
 - You may not be eligible for TRICARE.
 - You can enroll in Medicare Part B later, but you may have to pay a premium surcharge for late enrollment.

Not Eligible for Premium-Free Medicare Part A

- If you're **not eligible** for premium-free Medicare Part A under your own earnings record, you'll receive a "Notice of Award" and/or "Notice of Disapproved Claim."
- If you're married, you must also file for Medicare Part A under the earnings record of your spouse (including divorced or deceased spouses) aged 62 or older.

Reflecting Medicare Eligibility in DEERS

- DMDC receives weekly updates from the Centers for Medicare & Medicaid Services that identify TRICARE beneficiaries who are eligible for Medicare.
- To confirm that your DEERS record has been updated, visit <https://milconnect.dmdc.osd.mil> or contact the DMDC Support Office at **800-538-9552**.
- If you're not eligible for premium-free Medicare Part A under your own SSN or your current, divorced, or deceased spouse's SSN, take your "Notices of Award" and/or "Notices of Disapproved Claim" to the nearest ID Card Office to update your DEERS record.
 - You may be issued a new Uniformed Services ID card when you update DEERS with your Medicare information.

TRICARE Plan Options

- TRICARE Prime/US Family Health Plan
- TRICARE For Life
- TRICARE Plus
- TRICARE Pharmacy Program
- TRICARE Dental Options

TRICARE Prime® and Medicare Eligibility

- TRICARE Prime enrollment fees are waived for Group A beneficiaries with Medicare Part B.
- With TRICARE Prime, you won't need to file claims in most cases. Present your Medicare card and military ID at the time of service. Your provider should file claims with Medicare.
- Overseas, claims should be filed with the TRICARE Overseas Program claims processor for the area where care was received.
- The TRICARE Prime benefit is administered by regional contractors.

TRICARE For Life

- TRICARE For Life is available to TRICARE beneficiaries who have Medicare Part A and Medicare Part B, regardless of age or place of residence.
- Care is received from any Medicare provider, and beneficiaries may seek military hospital or clinic care on a space-available basis.
- TRICARE is the last payer after Medicare (and other health insurance, if applicable).
 - If you have OHI, you're responsible for filing a claim with WPS after Medicare and OHI have processed and paid their portion of the claim.
- The TFL benefit is administered by WPS.

WPS Contact Information
866-773-0404 ◆ www.tricare4u.com

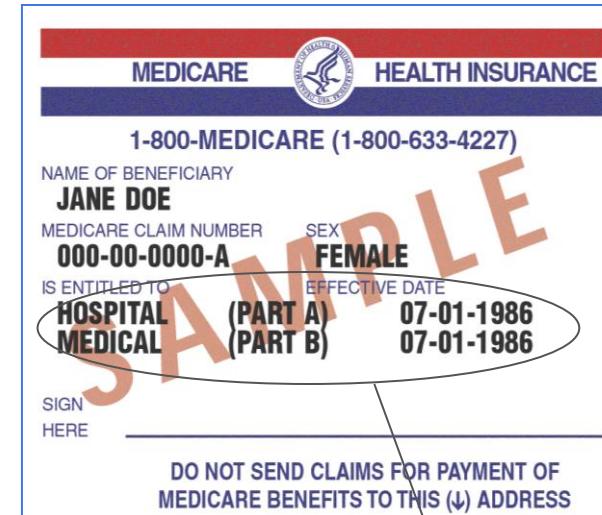
TRICARE For Life

Provider Types

Provider Type	Definition
Medicare Participating	Accepts the Medicare-approved amount as payment in full.
Medicare Nonparticipating	Doesn't accept the Medicare-approved amount as payment in full and may charge up to 15% above the Medicare-approved amount, a cost that is covered by TFL.
Opt-Out	Medicare doesn't pay for healthcare services you receive from opt-out providers. TFL pays the amount it would have paid (normally 20% of the allowable charge) if Medicare had processed the claim, and you're responsible for paying the remainder of the billed charges.
U.S. Department of Veterans Affairs	VA providers can't bill Medicare and Medicare cannot pay for services received from the VA. If you're eligible for both TFL and VA benefits, you'll incur significant out-of-pocket expenses when seeing a VA provider for health care not related to a service-connected injury or illness.

Medicare Card

- TRICARE doesn't issue a health insurance card for TFL.
- When receiving care, show your Medicare card along with your uniformed services ID card.
- To protect you from identify theft, new Medicare cards no longer display social security numbers. This change went into effect in April 2018.



Shows your eligibility for Medicare Part A and Part B and the effective dates of coverage.

Call 800-772-1213 or visit www.ssa.gov
if you misplace your Medicare card.

How TFL Works

- Visit your Medicare participating or non-participating provider for care.
- Your provider files a claim with Medicare.
- Medicare pays its portion and sends the claim to WPS.
- WPS pays the remaining amount to your provider for services covered by Medicare and TRICARE.
- You get a *Medicare Summary Notice* from Medicare and an explanation of benefits from TRICARE.

Note: TRICARE is the primary payer for TRICARE-covered services received in areas where Medicare is not available (e.g., overseas). Expect to pay up front and file a claim with the TOP claims processor for reimbursement.

WPS Contact Information
866-773-0404 ♦ www.tricare4u.com

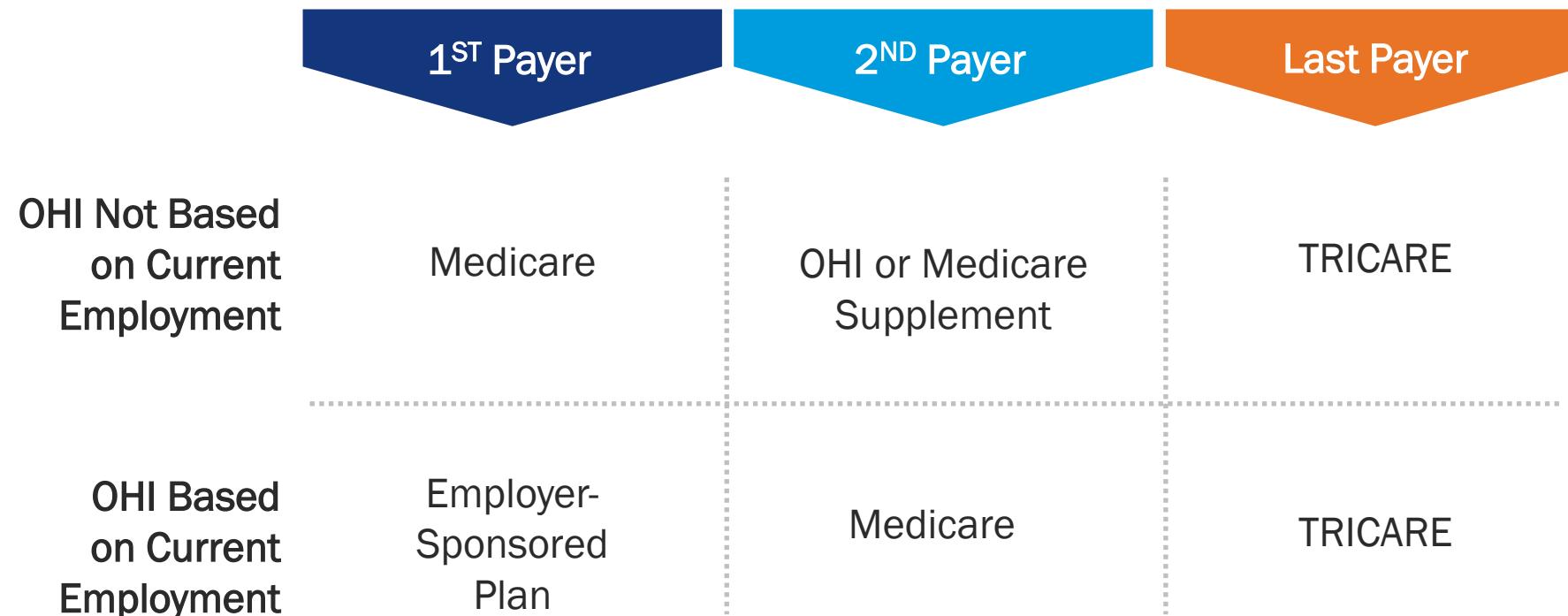
What You Pay

Type of Service	Medicare Pays	TRICARE Pays	You Pay
Covered by TRICARE and Medicare	Medicare-authorized amount	TRICARE-allowable amount	Nothing
Covered by Medicare only (e.g., chiropractic care)	Medicare-authorized amount	Nothing	Medicare annual deductible and cost-share
Covered by TRICARE only (e.g., TRICARE-covered services received overseas)	Nothing	TRICARE-allowable amount	TRICARE annual deductible and cost-share
Not covered by TRICARE or Medicare	Nothing	Nothing	Billed charges (which may exceed the Medicare- or TRICARE-allowable amount)

Using TFL Overseas

- For overseas locations outside the U.S. and U.S. territories:
 - TFL beneficiaries:
 - Visit any network or TRICARE-authorized provider for care
 - Are subject to applicable catastrophic cap, deductibles and cost-shares
 - Visit www.tricare.mil/tflcosts for deductibles and cost-shares.
 - Deductible: \$150 per individual or \$300 per family
- Claims are filed with the TOP claims processor:
 - For more information, visit www.tricare-overseas.com.

Coordinating TFL with OHI



TRICARE Plan Options

TRICARE Plus

- TRICARE Plus is a primary care enrollment option available to beneficiaries who normally are only able to get military hospital and clinic care if space is available.
- It is offered at some military hospitals and clinics and is:
 - Limited by military hospital or clinic capacity
 - Not transferable from one military hospital or clinic to another
- Check with your local military hospital or clinic for program availability and details.

Pharmacy Options

Military Pharmacy



- Usually inside military hospitals and clinics
- Get up to a 90-day supply

TRICARE Pharmacy Home Delivery



- Must use this option for some drugs
- Get up to a 90-day supply

TRICARE Retail Network Pharmacy



- Fill prescriptions without submitting a claim
- Get up to a 30-day supply

Non-Network Pharmacy



- Pay full price up front and file a claim to get a portion of your money back
- Get up to a 30-day supply

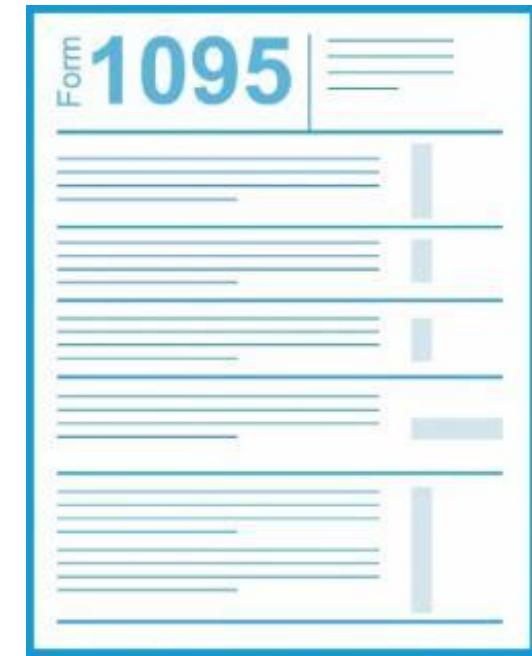
Dental Options

TRICARE Dental Program	Federal Employees Dental and Vision Insurance Program
<ul style="list-style-type: none">• Eligible ADFMs• National Guard and Reserve members and their eligible family members• Survivors• Individual Ready Reserve Members and their eligible family members	<ul style="list-style-type: none">• Retired service members and their eligible family members• Retired National Guard and Reserve members and their eligible family members• Certain survivors• Medal of Honor recipients and their immediate family members and survivors
United Concordia Companies, Inc.	U.S. Office of Personnel Management
844-653-4061 (CONUS) 844-653-4060 or 717-888-7400 (OCONUS) 711 (TDD/TTY) www.uccitdp.com	www.benefeds.gov

Other Important Information

The Affordable Care Act

- TRICARE meets the minimum essential coverage requirement under the Affordable Care Act.
- Each tax year, you'll get an IRS Form 1095 from your pay center. It will list your TRICARE coverage for each month.
- Your Social Security number and the Social Security number of each of your covered family members should be included in DEERS for your TRICARE coverage to be reflected accurately.



For Information and Assistance

More Information

Regional Contractors

- TRICARE East Region
Humana Military
800-444-5445
www.tricare.mil/east
- TRICARE West Region
TriWest Healthcare Alliance
888-TRIWEST (888-874-9378)
www.tricare.mil/west
- TRICARE Overseas Program
International SOS Government Services, Inc.
Find toll-free contact information at
www.tricare-overseas.com/contact-us.

TRICARE For Life

- In the U.S. and U.S. territories:
Wisconsin Physicians Service—Military and
Veterans Health
866-773-0404
866-773-0405 (TDD/TTY)
www.TRICARE4u.com
- Overseas outside of U.S. territories:
Contact the overseas regional contractor.

Resources

- TRICARE Website: www.tricare.mil



- TRICARE Publications: www.tricare.mil/publications
- milConnect: <https://milconnect.dmdc.osd.mil/>