TRICARE® Plans Overview

Learn about TRICARE Prime, TRICARE Select, premium-based plans, TRICARE For Life, and other coverage options

TRICARE is the worldwide health care program for uniformed service members and their eligible family members. Your eligibility and location determine which plans are available to you. Most TRICARE health plans feature comprehensive health care coverage and a pharmacy benefit.

Learn more at **www.tricare.mil/healthplans**.

TRICARE PRIME®

TRICARE Prime health plans are similar to a health maintenance organization program. TRICARE Prime generally features the use of military hospitals and clinics. It substantially reduces out-of-pocket costs for authorized care delivered outside military hospitals and clinics by TRICARE network providers. Active duty service members must enroll in TRICARE Prime. Enrollment is optional for active duty family members and certain TRICARE-eligible beneficiaries located in Prime Service Areas in the U.S.

Certain ADFMs may qualify to enroll in TRICARE Prime Remote. In overseas locations, TRICARE Prime Overseas and TRICARE Prime Remote Overseas are available only to ADSMs and their command-sponsored family members.

Under a TRICARE Prime option, your health care is managed by a primary care manager. Your TRICARE Prime PCM could be: (1) a provider at a military hospital or clinic; (2) a civilian TRICARE network provider; or (3) a primary care provider under the US Family Health Plan. Whether you get care in the civilian sector or at a military hospital or clinic will depend on your location and the capacity at nearby military facilities.

Learn more at **www.tricare.mil/prime**.

US Family Health Plan

USFHP is a TRICARE Prime plan administered by not-for-profit health care systems in six designated service areas in the U.S. They cover care exclusively through their own provider and pharmacy networks. With USFHP, you can't get care at military hospitals, clinics, or pharmacies. However, you can get emergency care at military emergency departments. To enroll in USFHP, you must live in one of the designated service areas.

Learn more at **www.tricare.mil/usfhp**.

TRICARE SELECT®

The TRICARE Select health plan is similar to a preferred provider organization for eligible beneficiaries not enrolled in TRICARE Prime (except ADSMs and TRICARE For Life beneficiaries). TRICARE Select allows you to choose your own TRICARE-authorized provider and manage your own health care. You'll have lower out-of-pocket costs if you get care from a TRICARE network provider.

You don't need a referral or pre-authorization in most situations. You can also receive certain services from TRICARE-authorized non-network providers, but you'll pay higher cost-shares for out-of-network care. TRICARE can't reimburse care delivered by a provider who isn't an authorized TRICARE provider.

In addition to having a deductible, you pay a fixed fee (copayment) for care from a TRICARE network provider. Your cost-share for care from a TRICARE-authorized non-network provider is a percentage of the allowable charge after you meet a higher deductible.

This fact sheet isn't all-inclusive. For more information, go to **www.tricare.mil**.

Certain TRICARE Plans at a Glance

PLAN	OVERVIEW	HOW TO GET CARE	LEARN MORE
TRICARE Prime (includes TRICARE Prime Remote, TRICARE Prime Overseas, TRICARE Prime Remote Overseas)	Managed care option offering the most affordable coverage. Available in stateside Prime Service areas. Also available overseas and in U.S. territories to ADSMs and eligible command-sponsored family members. Enrollment is required.	Use your primary care manager. For care they can't provide, your PCM will refer you to a specialist.	**www.tricare.mil/prime**
TRICARE Select (includes TRICARE Select Overseas)	Self-managed care option offering the most freedom of choice. Available to most beneficiaries worldwide except ADSMs and certain others. Enrollment is required.	Use any TRICARE-authorized provider, network or non-network. You'll save money by going to a network provider.	**www.tricare.mil/select**
US Family Health Plan	A TRICARE Prime plan offered by not-for-profit health care systems in six areas of the U.S. Enrollment is required.	Use your designated USFHP provider. Your primary care provider will refer you to a specialist when necessary.	**www.tricare.mil/usfhp**
TRICARE Reserve Select	A premium-based health plan available for purchase by qualified members of the Selected Reserve, their eligible family members, and qualified survivors.	Use any TRICARE-authorized provider, network or non-network. You'll save money by going to a network provider.	**www.tricare.mil/trs**
TRICARE Retired Reserve	A premium-based health plan available for purchase by qualified members of the Retired Reserve, their eligible family members, and qualified survivors.	Use any TRICARE-authorized provider, network or non-network. You'll save money by going to a network provider.	**www.tricare.mil/trr**
TRICARE Young Adult	A premium-based health plan that qualified adult children of eligible sponsors may purchase.	For TYA-Prime, refer to TRICARE Prime. For TYA-Select, refer to TRICARE Select.	**www.tricare.mil/tya**
TRICARE For Life	Medicare-wraparound coverage that begins automatically once you have Medicare Part A and Part B. Overseas, where Medicare doesn't provide coverage, TFL is the primary payer.	Stateside and in U.S. territories: Use Medicare providers for TRICARE-covered services. Overseas and outside U.S. territories: Contact International SOS Government Services, LLC, the TRICARE Overseas contractor, to find a provider.	**www.tricare.mil/tfl**

In overseas locations, TRICARE Select Overseas is available to eligible family members not enrolled in TRICARE Prime Overseas. TRICARE Select Overseas beneficiaries who receive medically necessary covered services from a TRICARE-authorized non-network provider are subject to cost-shares for out-of-network care. You should expect to pay up front for care and file your own claims to be reimbursed.

Learn more at **www.tricare.mil/select**.

PREMIUM-BASED PLANS

For certain eligible beneficiaries, like non-activated National Guard and Reserve members or young adults, TRICARE offers other coverage options. For premium-based health plans, you can purchase coverage at any time, as long as you're eligible.

- **TRICARE Reserve Select**
  Individual or family plan available for purchase by qualified Selected Reserve members (when not in an active duty status of more than 30 consecutive days). Offers TRICARE Select coverage. **Note**: You can't be eligible for or enrolled in the Federal Employees Health Benefits Program. Learn more at **www.tricare.mil/trs**.

- **TRICARE Retired Reserve**
  Individual or family plan available for purchase by qualified Retired Reserve members. Offers TRICARE Select coverage. Learn more at **www.tricare.mil/trr**. **Note:** Retired Reservists aren't eligible to purchase TRR coverage if eligible for or enrolled in the Federal Employees Health Benefits program.

- **TRICARE Young Adult**
  Qualified adult children can purchase TYA after regular TRICARE coverage ends at either age 21 (or age 23 if enrolled in college full-time or at college graduation, whichever comes first). May choose TRICARE Prime coverage where locally available (TYA-Prime) or TRICARE Select coverage (TYA-Select). Learn more at **www.tricare.mil/tya**.

TRICARE FOR LIFE

TRICARE For Life is Medicare-wraparound coverage for TRICARE beneficiaries who have Medicare Part A and Part B, regardless of age or place of residence. There's no enrollment in TFL. Your TFL coverage will start automatically once you have Medicare Part A and Part B. Together with Medicare, TFL provides comprehensive health care coverage. You can get care from any Medicare participating, non-participating, or opt-out provider. You can also receive care at military hospitals and clinics, if space is available. **Note**: You'll have significant out-of-pocket expenses when you get care from opt-out providers. Medicare participating providers accept the Medicare-allowed amount as payment in full. Medicare non-participating providers may bill 15% above the Medicare-allowed amount.

Medicare participating providers file your claims with Medicare. After paying its portion, Medicare automatically forwards the claim to the TFL claims processor, WPS Government Services, for processing, unless you have other health insurance. If your OHI pays after Medicare, you'll need to file a claim with TRICARE for reimbursement of any remaining balance. TRICARE pays after Medicare and OHI for TRICARE-covered health care services.

When seeking care overseas from a civilian provider using TFL, be ready to pay up front for services and submit a claim to the TRICARE Overseas claims processor, International SOS. Overseas, TRICARE is the primary payer unless you have OHI.

Learn more at **www.tricare.mil/tfl**.

OTHER HEALTH CARE OPTIONS

TRICARE Plus

TRICARE Plus is a primary care program offered at some military hospitals and clinics. You must enroll to participate and your enrollment is only for the hospital or clinic where you're enrolled. TRICARE Plus gives you access to primary care at the military hospital or clinic where you're enrolled. This plan doesn't guarantee access to specialty care. TRICARE Plus won't pay for care by civilian providers, even if the military facility refers you for care. Learn more at **www.tricare.mil/plus**.

Coverage When Transitioning to Civilian Life

TRICARE offers benefits to help certain service members and their family members transition to civilian life.

- **Transitional Assistance Management Program**:
  TAMP offers 180 days of premium-free health coverage to certain sponsors (and their eligible family members) upon separation from TAMP-qualifying active duty. If applicable, TAMP coverage starts the day after the sponsor separates from TAMP-qualifying active duty. Learn more at **www.tricare.mil/tamp**.

- **Continued Health Care Benefit Program**: A premium-based health plan available for purchase by certain individuals when TRICARE eligibility ends. CHCBP offers health coverage for 18–36 months. Learn more at **www.tricare.mil/chcbp**.

PHARMACY COVERAGE

You have the same prescription drug coverage through the TRICARE Pharmacy Program, regardless of your TRICARE health plan. However, the US Family Health Plan offers separate pharmacy coverage. The TRICARE pharmacy benefit allows you to fill your prescription at military pharmacies, retail network pharmacies, non-network pharmacies, and through home delivery. Learn more at **www.tricare.mil/pharmacy**.

WHAT ELSE TO CONSIDER

Which Plans Am I Eligible For?

Use the TRICARE Plan Finder to see what health plans might be available to you or your family members at **www.tricare.mil/planfinder**. Eligibility for health plans depends on your beneficiary category, your sponsor status, and your location. Your uniformed service determines your eligibility and records it in the Defense Enrollment Eligibility Reporting System. Learn more at **www.tricare.mil/deers**.

For more information about TRICARE plan eligibility, visit **www.tricare.mil/eligibility**.

What Services Are Covered?

Generally, you have the same covered services, including preventive, mental health, maternity, and pharmacy services, with any TRICARE health plan. Copayments and cost-shares may apply for certain covered services, depending on your TRICARE health plan and beneficiary status. To find covered services, go to **www.tricare.mil/coveredservices**.

How Much Will I Pay?

The amount you pay for coverage depends on the plan and who you are—like whether you or your sponsor is an active duty service member, a National Guard or Reserve member, or a military retiree. Costs may also differ depending on when you or your sponsor first became eligible for TRICARE. Learn more and review costs associated with your health plan at **www.tricare.mil/costs** or the *TRICARE Costs and Fees Fact Sheet* at **www.tricare.mil/publications**.

When Can I Enroll?

Enrollment rules may differ by plan and depend on your eligibility. Learn about enrollment at **www.tricare.mil/enroll**.

LOOKING FOR **More Information?** GO TO **www.tricare.mil**

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, LLC
www.tricare-overseas.com

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

TRICARE For Life
www.tricare.mil/tfl

In the U.S. and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands):
WPS Government Services
866-773-0404
www.TRICARE4u.com

Outside the U.S. and U.S. territories:
International SOS
Government Services, LLC
www.tricare-overseas.com

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

An Important Note About TRICARE Program Information
At the time of publication, this information is current. It's 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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