

**HIT1**  
(frente)

## Nombres de los Planes de TRICARE

- A. TRICARE for Life
- B. TRICARE Plus
- C. TRICARE Prime
- D. TRICARE Extra
- E. TRICARE Standard
- F. TRICARE Pharmacy / TRICARE Senior Pharmacy
- G. TRICARE Dental Program
- H. TRICARE Retiree Dental Program
- I. TRICARE Reserve Select (TRS)

# HIT1

(atrás)

## Tarjeta de Información al Beneficiario para TRICARE For Life

### FRENTE DE LA TARJETA

#### *TRICARE For Life*

**To Provider:** File claims in the usual manner to Medicare.

**To Patient :** *Services that are a benefit of both Medicare and TRICARE* :No deductible or cost share is required.

*Medicare only benefit* :Medicare deductible and cost share required.

*TRICARE only benefit*:TRICARE deductible and cost share required.

*For benefit questions call 1-888-DoD-LIFE (1-888-363-5433) [www.tricare.osd.mil](http://www.tricare.osd.mil)*

*For more information call 1-800-977-6753 [www.hnfs.net](http://www.hnfs.net)*

### PARTE DE ATRÁS DE LA TARJETA

#### *TRICARE Senior Pharmacy*

**Military Treatment Facility:** No Co-pay

**National Mail Order Pharmacy:** \$3 generic;\$9 brand name  
(90 day supply)

**TRICARE Network Pharmacy:** \$3 generic;\$9 brand name  
(30 day supply)

**TRICARE Non-network Pharmacy:** \$9 or 20%of cost (30 day supply)  
\$150/person or \$300/family  
annual deductible applies.

*For pharmacy questions call 1-877-DoD-MEDS (1-877-363-6337)*

(Co-pays subject to change)