

JUSTIFICATION FOR CHANGE

DD FORM 2876

TRICARE Prime Enrollment, Disenrollment, and Primary Care Manager (PCM) Change Form

ISSUE:

- Request approval to have six minor changes made to the DD Form 2876.
- The JAN13 version of the form was welcomed by the Contractors versus the Feb2011 version. It is now 5-pages long, versus the 7-pages. It is structured to allow use of only one or two pages for certain enrollments and disenrollments, saving processing time, paper and storage. For instance a single Active Duty Service Member (ADSM) enrolling would only complete page 2. If a Retiree is only changing his payment method, he/she would complete only page 5. The data collected was also changed to align with the web DOES enrollment system to expedite processing the form by our contractors.
- None of the changes requested result in additional information being collected by the Government or any change to TMA policies. The three Regional Contractors are responsible for processing the form and collection of all enrollment fees.
 - All six changes were requested by our three Regional Contractors (Human Military, Health Net, and our newest contractor, United Healthcare).
 - Changes were requested to further improve processing, scanning and filing.
 - Changes are primarily “wording” based on the Contractors’ customer service feedback or to more accurately provide guidance to the enrollee.

CHANGES REQUESTED:

- Page 1: None
- Page 2: Added “TRICARE Prime Remote” option back. This was included on the previous version of the form. We learned the contractors use that block when sorting, scanning and assigning the form for processing. No additional verbiage was added as the wording is under TRICARE Prime on the JAN2013 form.
- Page 3: None
- Page 4: Removed “with PCM” after Dissatisfied. There are multiple other reasons for being dissatisfied, which we obtain via multiple beneficiary surveys.
- Page 4: Added a checkbox to the first paragraph. This was also on the previous form as Section V. No new words were added other than those by the checkbox. We moved what was sentence 1, paragraph 1, to paragraph 2. The checkbox was requested by the Contractors since it (combined with the signature) provides better documentation that the enrollee read the drive time waiver paragraph.

- Page 5, Section VI: Deleted the first sentence since the Contractors no longer require our beneficiaries to complete their allotment form. This page 5 is now used as their documentation. This change does not change TMA Policy as collection of fees is the responsibility of the three Regional Contractors (TRICARE Operations Manual, Chapter 6, Paragraph 4.0).
- Page 5, Section VI: Deleted the second sentence based on feedback from the customer service centers. The sentence resulted in some beneficiaries submitting this form and also submitting an EFT form with their financial institution. This form is all the contractors need to collect the Prime fees.
- Page 5 Section VI-B: Our mistake. The word “for” should have been in first line instead of the 2nd check box.
- Page 5, Section VI-C: Our mistake. These same words are on the current form and were deleted in error as the beneficiary can pay their initial 3-month fees with their credit card. Contractors requested to reduce the number of customer service calls received.

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