TRICARE Select Survey of Civilian Providers 2025 (TSS-P)

Thank you in advance for participating in the Department of Defense's effort to survey civilian health care providers across the U.S. to determine whether military service members and their families have access to the health care they need.

We recognize that there may be more than one provider in your office and ask that you please answer this survey only on behalf of the provider indicated on the letter that you received in the mail. Since we may survey more than one provider in your office, please complete this survey only for the appropriate provider listed on the letter you received. If you have received more than one survey for other providers, you will be able to to complete the survey for those providers by entering their login information separately.

The survey that follows should only take five minutes of your time. Simply select the button that best represents your response. Once you have completed the survey, all you need to do is click on the "Submit" button and your completed survey will automatically be sent.

OMB Number 0720-0031 (Expiration Date: 8/31/2025)

The public reporting burden for this collection of information is estimated to average five (5) minutes to complete, including the time for reviewing instructions, getting the needed data, and completing and reviewing the survey. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. The OMB number above is currently valid, and you are not required to respond, unless this number is displayed.

Privacy Advisory Statement

Information collected for this Survey will be used to help TRICARE health policy makers gauge civilian provider awareness and acceptance of the TRICARE Select health care benefit option, and provide aggregated input to improve the Military Health System. TRICARE Select replaced TRICARE

Standard and Extra as of January 1, 2018 –bringing together features of both Standard and Extra into a single plan. All information will be de-identified prior to being reported. Completing the Survey is voluntary; you may stop the Survey at any time. There is no penalty if you choose not to respond, although maximum participation is encouraged so the data will be complete and representative.

There are 14 questions in this survey.

Screener

On average, does {TOKEN:ATTRIBUTE_1} provide treatment to patients at least 20 hours per week?

*

Please choose **only one** of the following:

◯ Yes

◯ No, does not provide treatment, has retired, or provides treatment to patients less than 20 hours per week on average.

◯ Don't know / no longer here

Which of the following best describes {TOKEN:ATTRIBUTE_1}'s principal employer?

Only answer this question if the following conditions are met:
Q1.NAOK eq 1

Please choose **only one** of the following:

- ◯ Government-sponsored facility or Government-run program
- ◯ Military or Veteran treatment facility
- ◯ School, university, or other academic institution
- ◯ Contractor providing services for employment, insurance, or legal proceedings
- ◯ Closed Panel HMO
- ◯ Open Panel HMO
- ◯ Prison or jail
- ◯ Other [ ]

Is {TOKEN:ATTRIBUTE_1} a case manager and/or medical student? *

Only answer this question if the following conditions are met:
Q1.NAOK eq 1

Select all that apply
Please choose **all** that apply:

- ☐ Yes, case manager
- ☐ Yes, medical student
- ☐ No, neither a case manager nor medical student

About You

Are you aware of TRICARE Select (*formerly known as TRICARE Standard or Extra*)?

Choose one of the following answers

Please choose **only one** of the following:

- ◯ Yes
- ◯ No

As of today, does {TOKEN:ATTRIBUTE_1} accept any of the following forms of health insurance?

Please choose the appropriate response for each item:

	Yes	No
Medicare	◯	◯
Medicaid	◯	◯
TRICARE Select	◯	◯
Private insurance	◯	◯
Other	◯	◯

What other type of health insurance does {TOKEN:ATTRIBUTE_1} accept?

Only answer this question if the following conditions are met:
Q5a_G.NAOK EQ 1

Please write your answer here:

You indicated that {TOKEN:ATTRIBUTE_1} does not accept any of the previously mentioned health insurances. Please indicate all of the following that is true: *

Only answer this question if the following conditions are met:
Q5a_A.NAOK EQ 2 AND Q5a_B.NAOK EQ 2 AND Q5a_C.NAOK EQ 2 AND Q5a_D.NAOK EQ 2 AND Q5a_G.NAOK EQ 2

Please choose **all** that apply:

- [ ] Does not accept any insurance
- [ ] Not applicable, provides treatment free of charge

About You

As of today, does {TOKEN:ATTRIBUTE_1} accept TRICARE Select as payment in full?

Only answer this question if the following conditions are met:
Q5a_C.NAOK NE 2 AND Q5c_B.NAOK NE 'Y'

Please choose **only one** of the following:

- ◯ Yes
- ◯ No
- ◯ Don't Know

As of today, is {TOKEN:ATTRIBUTE_1} a TRICARE Select network member?

Only answer this question if the following conditions are met:
Q6.NAOK NE 2 AND Q5a_C.NAOK NE 2 AND Q5c_B.NAOK NE 'Y'

Please choose **only one** of the following:

- ◯ Yes
- ◯ No
- ◯ Don't Know

As of today, is {TOKEN:ATTRIBUTE_1} accepting new TRICARE Select patients?

Only answer this question if the following conditions are met:
Q5a_C.NAOK NE 2

Please choose **only one** of the following:

- ◯ Yes
- ◯ No
- ◯ Don't Know

Why is {TOKEN:ATTRIBUTE_1} not accepting new TRICARE Select patients? MARK ALL THAT APPLY

Only answer this question if the following conditions are met:
Q8.NAOK NE 1 AND Q8.NAOK NE 3

Select all that apply
Please choose **all** that apply:

- [ ] Reimbursement too low
- [ ] Customer service/paperwork problems
- [ ] Problems with TRICARE in the past
- [ ] Not aware of TRICARE Select
- [ ] Inconvenience
- [ ] Specialty or credential not covered
- [ ] Prefers TRICARE Prime or TRICARE Plus
- [ ] Too busy
- [ ] Only takes private insurance
- [ ] Problems getting into program/application in progress
- [ ] Not accepting new patients
- [ ] Other: _____

As of today, is {TOKEN:ATTRIBUTE_1} accepting new Medicare patients?

Please choose **only one** of the following:

- ◯ Yes
- ◯ No
- ◯ Don't Know

Why is {TOKEN:ATTRIBUTE_1} not accepting new Medicare patients? MARK ALL THAT APPLY

Only answer this question if the following conditions are met:
Q10.NAOK eq 2

Select all that apply
Please choose **all** that apply:

- [ ] Reimbursement too low
- [ ] Customer service/paperwork problems
- [ ] Problems with Medicare in the past
- [ ] Inconvenience
- [ ] Specialty or credential not covered
- [ ] Too busy
- [ ] Only takes private insurance
- [ ] Problems getting into program/application in progress
- [ ] Not accepting new patients
- [ ] Other:

As of today, is {TOKEN:ATTRIBUTE_1} accepting new patients?

Only answer this question if the following conditions are met:
Q10.NAOK NE 1

Choose one of the following answers
Please choose **only one** of the following:

- ◯ Yes
- ◯ No
- ◯ Don't Know

Thank you for taking the time to complete this survey. If you have any questions about TRICARE, its specific health plans, or the benefits it provides, please visit the TRICARE web site at www.tricare.mil for assistance.

Submit your survey.
Thank you for completing this survey.