



TRICARE HELP E-MAIL SERVICE (THEMS) NEWSLETTER

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“Helping to Understand”



TRICARE Help Newsletter

This newsletter is a publication of the TRICARE Help E-mail Service, operated by the US Army Medical Command in San Antonio, Texas.

THEMS

What is THEMS?

THEMS is a free e-mail service that provides quick answers to TRICARE questions. Clinical issues should be referred to your primary care provider. The e-mail address is: TRICARE_help@amedd.army.mil.



Click here to send your TRICARE questions, concerns, or comments.

Health Care Alternatives for Retirees

Health care alternatives for most active duty (AD) service members and their families is fairly straightforward. Since most AD families do not have private commercial

health insurance, they either get their care through the direct care system at a military treatment facility (MTF), or they use a civilian provider through TRICARE Prime or TRICARE Prime Remote. Once the sponsor retires, the family members must carefully consider the alternatives to get the best care for their individual needs.

The first thing to remember is that TRICARE is an entitlement. Regardless of the other alternatives, TRICARE is there to provide coverage. The beneficiary may choose not to use TRICARE, but the benefit is still available to use whenever desired. The second thing to remember is other health insurance (OHI) is always primary to TRICARE. The only exceptions are Medicaid, designated TRICARE supplements, and a limited number of other programs identified by the

TRICARE Management Activity.

Many people find that if coverage is available through employee group health insurance, TRICARE Standard or Extra work well as secondary coverage. As long as the beneficiary follows the rules established by the OHI and uses doctors who agree to accept TRICARE, the provider is usually paid the full TRICARE-allowed amount and, after the \$150.00 deductible has been met, patients will be reimbursed any cost share they may have paid through the OHI. Many variables are involved in coordinating benefits between two insurances, and it is important to contact your servicing TRICARE Service Center (TSC) or the Beneficiary Counseling and Assistance Coordinator (BCAC) at the nearest MTF to discuss specific claims issues. You may also contact THEMS if you have a question.

If you live in an area where TRICARE Prime is available, you may want to use this option. If you wish to get your care at a MTF, Prime is usually the best program for getting timely care at the MTF. Most retirees find that Prime is the most cost-effective TRICARE program. Since Prime is modeled after the civilian HMO, authorization and referral requirements must be followed to avoid point-of-service charges.

A third option is to use TRICARE Standard or Extra as primary coverage. In this circumstance, many beneficiaries choose to buy a TRICARE supplemental policy to protect them from high out-of-pocket costs associated with serious illness or injury. Since the retiree family catastrophic cap was reduced to \$3,000 per fiscal year, you may choose to use TRICARE Standard or Extra without a supplement. As long as you use providers who accept assignment, your out-of-pocket expenses will be limited to \$3,000 in any fiscal year. Then, TRICARE will pay your

providers the full TRICARE-allowed amount for TRICARE-covered services, leaving you with nothing to pay.

When you become eligible for Medicare Part A at the age of 65, your eligibility for normal TRICARE ends. However, as long as you also get Medicare Part B, you will transition directly into "TRICARE for Life" (TFL). Under TFL, TRICARE will pay your Medicare deductibles and cost shares for TRICARE-covered services. In most cases, you will pay nothing.

These alternatives can be confusing to compare. It is a good idea to work with a TRICARE expert to make sure you use your benefits to control costs and provide you and your family with the care you deserve. Your servicing TSC, BCACs at the nearest MTF, or THEMS personnel are available to assist you with making the best choice.

Claims from Internet Pharmacies not reimbursable

Claims for drugs obtained through Internet services are not reimbursable. The reason for denial of these claims is Internet pharmacies offer mail order services. Under Title 32 of the Code of Federal Regulations (CFR), Part 199.21(c), there are four TRICARE authorized categories of providers of pharmacy services: MTFs, network retail providers, non-network retail providers, and the mail service pharmacy program. The mail service pharmacy program is currently the National Mail Order Pharmacy. Other mail order pharmacy providers are not authorized under the CFR.

TFL and OHI

Some TFL beneficiaries with OHI other than Medicare have reported difficulty with claims processing. This is usually due to incorrect information in the contractor's database. Below is a link to TFL claims processors <http://www.tricare.osd.mil/main/chart.html> to help you with your claims issues.