



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, Fort Sam Houston, Texas.

THEMS

What is THEMS?

THEMS is a free e-mail service that provides quick answers to TRICARE questions. Clinical questions 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.

Coordination of Benefits With Other Health Insurance (OHI)

The coordination of benefits between OHI

and TRICARE can be confusing. This information describes the most common double coverage situations. For more detailed information or to discuss possible exceptions, contact a Beneficiary Counseling and Assistance Coordinator (BCAC) at the nearest military treatment facility (MTF). The web address for the BCAC directory is: <http://www.tricare.osd.mil/beneficiary/beneficiary/BCACDirectory.htm>

Under Federal law, TRICARE covers only the unpaid charges after all OHIs have paid. The exceptions are Medicaid, TRICARE supplemental insurance, and a limited number of other programs identified by the TRICARE Management Activity (TMA). TRICARE beneficiaries cannot waive benefits from OHI. If you have

OHI, a claim must be filed first with the OHI. After your OHI has paid, a claim may be filed with TRICARE. The explanation of benefits (EOB) from your OHI must accompany the TRICARE claim, so the TRICARE claims processor can determine the amount remaining after the OHI has paid its portion. In addition to the OHI EOB, a copy of the provider bill must be sent along with the TRICARE claim ([DD Form 2642](#)).

TRICARE will not pay more as secondary payer than it would have paid in the absence of OHI. TRICARE will pay the lesser of:

- The amount of the provider's allowable billed charges, minus the OHI payment; or
- The amount TRICARE would have paid if you didn't have any primary OHI.

The beneficiary for the following examples is a retiree or retiree family member using TRICARE Standard and assumes the annual deductible has been met:

EXAMPLE 1:

The participating doctor bills you \$100, which is the same as the TRICARE Standard allowable charge for the care. Your OHI pays \$80, leaving \$20 unpaid. The TRICARE Standard share of the doctor's bill would be \$75, if there were no OHI. Since the beneficiary has OHI, TRICARE Standard will pay whichever amount (\$75 or \$20) is less. So in this example, TRICARE Standard pays the \$20 that your OHI didn't cover.

If you go to a non-participating provider (one who does not accept the TRICARE Standard allowable charge as the full fee for the care provided, and may charge more for your care), TRICARE will pay the lesser of:

- An amount up to 15 percent more than the TRICARE Standard allowable charge, minus the amount your OHI paid; or
- The amount that TRICARE Standard would have paid if you didn't have OHI.

EXAMPLE 2:

Although the TRICARE allowable charge for the care is \$100, the non-participating doctor bills you \$150. Your OHI pays \$125 of that, leaving \$25 unpaid. The TRICARE Standard share of the doctor's bill would be \$75 (that is, 75 percent of the \$100 allowable charge) if you didn't have OHI. Since you do have OHI, and it paid \$125, TRICARE Standard will pay nothing. Why? Because the TRICARE Standard payment for care received from a non-participating provider, when you have OHI, is limited to 15 percent above the allowable charge (in this case, \$115), minus the amount your OHI paid (in this case,

\$125). Since the OHI paid more than \$115, TRICARE Standard won't pick up any of the rest of the charges.

You are responsible for any amount the provider has not been paid for TRICARE-covered services, but only up to the legal limit of 15 percent above the TRICARE allowable charge. In the last example, the non-participating provider has been paid more than 15 percent above the \$100 allowable charge, so you would owe nothing. In this example, you would not be legally liable for more than \$115 in medical bills. You are, however, responsible for all charges for care that isn't covered by TRICARE Standard.