



TRICARE CHANGES FACT SHEET

Beginning January 2018, there will be changes to the TRICARE benefit. The changes will expand beneficiary choice, improve access to network providers, simplify beneficiary copayments and enhance administrative efficiency.

KEY CHANGES

- **TRICARE Select will replace TRICARE Standard and TRICARE Extra on January 1, 2018.** TRICARE Select brings together the features of TRICARE Standard and TRICARE Extra in a single plan. Select enrollees may obtain care from any TRICARE-authorized provider without a referral or authorization. Enrollees who obtain services from TRICARE-network providers will pay lower cost-share amounts for in-network care.
- **All current TRICARE beneficiaries will be automatically enrolled in their respective plan on January 1, 2018.** TRICARE Prime enrollees will remain in TRICARE Prime. TRICARE Standard and Extra beneficiaries will be enrolled in TRICARE Select. Appendix B outlines what actions will unfold automatically, effective January 1, 2018. Future beneficiaries, or beneficiaries wishing to change their TRICARE plan, must proactively change their enrollment during enrollment-eligibility periods.
- **Beneficiary out-of-pocket costs will be updated.** A detailed break-out of costs is available in Appendix A.
- **Beneficiaries can choose to enroll in or change their TRICARE Prime or TRICARE Select coverage during an annual open-enrollment period in November – December, 2018 for coverage beginning on January 1, 2019.** Failure to enroll in TRICARE Prime or TRICARE Select results in the termination of coverage for civilian care. Those beneficiaries who choose to not enroll may only receive care at a military clinic or hospital on a space-available basis.
- For the most up-to-date changes, please visit www.tricare.mil/changes and sign up for email updates.

TRICARE PROGRAM AND PLAN CHANGES

Transition from Fiscal Year to Calendar Year Administration

The TRICARE benefit will change from a fiscal year (October – September) period to a calendar year (January – December) period to align with the annual enrollment period.

There will be a transition period from October 1, 2017, to December 31, 2017, to protect beneficiaries from incurring additional costs. During this time, enrollment fees will be pro-rated



for the three-month period and billed accordingly for enrollees who pay on a monthly or quarterly basis. Individuals who pay enrollment fees on an annual basis will have their payments credited appropriately.

Payments that would normally count toward catastrophic caps and deductibles until October 1, 2017, will continue to count until January 1, 2018. This means that enrollees who reach their fiscal year 2017 catastrophic caps will not have additional out-of-pocket costs for authorized TRICARE-covered services for the last three months of calendar year 2017. On January 1, 2018, new rules for deductibles and catastrophic caps will apply to some costs. (See Appendix A.)

Grandfathering (Group A & Group B)

Sponsor Joined BEFORE Jan 1, 2018	Sponsor Joined ON OR AFTER Jan 1, 2018
Group A	Group B

Starting January 1, 2018, enrollees will fall into one of two categories based on when their sponsor first joined the military. **These categories were established in law and are not affected by other actions taken by the beneficiary** (i.e., switching plans or failure to pay).

- Enrollees whose military sponsor’s initial enlistment or appointment occurs before January 1, 2018 (i.e., all current eligible beneficiaries,) are in Group A, also known as “grandfathered.”
- Enrollees whose military sponsor’s initial enlistment or appointment occurs on or after January 1, 2018, are in Group B, also known as “non-grandfathered.”

Group A and Group B enrollees will have distinct enrollment fees and out-of-pocket costs in accordance with current law. (See Appendix A.)

Health Plan Choices

TRICARE will continue to offer a wide range of health care plans to meet the needs of beneficiaries:

- **TRICARE Prime.** A health maintenance organization-style managed plan in which enrollees receive care from an established network of doctors and other health care providers. Care is coordinated through a primary care manager (PCM) who also provides referrals for specialty care.
- **TRICARE Select.** A preferred provider plan in which enrollees can seek care from any authorized provider, but pay lower out-of-pocket costs when they receive care from the TRICARE network. This plan replaces TRICARE Standard and TRICARE Extra.



- **Premium-based plans.** Health care coverage is available for purchase by certain populations who, by law, are no longer eligible for TRICARE Prime or Select due to age or inactive military status, or who are no longer eligible for military health care.
 - **Continued Health Care Benefits Program (CHCBP).** This plan offers health coverage for 18 to 36 months (or longer for qualified former spouses) after TRICARE eligibility or premium-based plan coverage ends. CHCBP offers TRICARE Select benefits.
 - **TRICARE For Life (TFL).** TFL provides wrap-around medical coverage to beneficiaries eligible for Medicare and TRICARE who generally must pay for Medicare Part B.
 - **TRICARE Retired Reserve (TRR).** Retired Reserve members may purchase TRR for themselves and eligible family members. TRR offers TRICARE Select benefits.
 - **TRICARE Reserve Select (TRS).** Qualified Selected Reserve members may purchase TRS for themselves and eligible family members. TRS offers TRICARE Select benefits.
 - **TRICARE Young Adult (TYA).** TYA extends TRICARE to certain former dependent children under the age of 26 who lose TRICARE eligibility due to age (typically at age 21, but up to age 23). TYA offers TRICARE Prime or TRICARE Select benefits.

ENROLLMENT CHANGES AND QUALIFYING LIFE EVENTS

Beginning January 1, 2018, beneficiaries must enroll in a TRICARE plan to be covered for civilian care. Beneficiaries eligible for and/or enrolled in TRICARE coverage as of December 31, 2017, will be automatically enrolled in their respective TRICARE plans on January 1, 2018; TRICARE Standard beneficiaries will be automatically be enrolled in TRICARE Select. No action is required by beneficiaries.

Lack of enrollment means beneficiaries can only receive care at a military clinic or hospital on a space-available basis. Failure to enroll or maintain enrollment results in the termination of civilian purchased health care benefits.

Beneficiaries wishing to change their plans may do so during an open-enrollment period or following a qualifying life event (QLE).

(Note: Beneficiaries may enroll or disenroll in TRICARE health plans at will during an enrollment grace period between January 1, 2018, and December 31, 2018).



Enrollees may disenroll from any TRICARE plan at any time.

Enrollees who voluntarily disenroll from TRICARE Prime or TRICARE Select cannot re-enroll in a TRICARE plan unless a QLE occurs or until the next annual open-enrollment period. They remain eligible to receive covered care at a military hospital or clinic on a space-available basis.

Annual Open-Enrollment Season Begins in November 2018

For all beneficiaries eligible to enroll in TRICARE Prime or TRICARE Select, the annual open-enrollment period runs from Monday of the second full week in November to Monday of the second full week in December. In 2018, this timeframe is November 12 – December 10, 2018. This timeframe coincides with the Federal Employee Health Benefits program open-enrollment season.

During this period, eligible beneficiaries can enroll in or change their TRICARE Prime or TRICARE Select coverage, or choose to do nothing and remain enrolled in their current TRICARE Prime or Select coverage for the next calendar year.

Prior to each annual open-enrollment season, the Defense Health Agency will share known changes coming to the plans for the next calendar year and dates these changes will take effect.

Qualifying Life Events

Qualifying life events (QLE) are defined events that trigger a 90-day window for eligible beneficiaries to enroll in or change TRICARE purchased care coverage for the rest of the calendar year. They can enroll in a plan if they weren't enrolled before the QLE, or transfer their enrollment to a different plan. If one member of the family has a QLE, other members of the family can also elect to enroll or change their current enrolled TRICARE coverage during the 90-day window.

Most QLEs require an update in the Defense Enrollment Eligibility Reporting System (DEERS). The 90-day window begins from the date of the QLE.

QLEs are likely to include the following:

- Marriage, divorce or annulment
- Birth or adoption of a child
- Placement of a child by a court in a member's home
- Change in sponsor status (e.g., active duty to retiree)
- Loss of eligibility (e.g., due to age, Medicare, etc.)
- Move to a new ZIP code
- Loss/gain of other health insurance
- Death of a sponsor, spouse or child
- Change in eligibility status (e.g., a dependent child marries an active duty service member)



The effective coverage date for TRICARE coverage initiated as a result of a QLE is always the date of the QLE.

APPENDIX A: TRICARE Prime and TRICARE Select Costs

See tables below for TRICARE Prime and TRICARE Select out-of-pocket expenses that take effect January 1, 2018.

**TABLE 1:
TRICARE Select & TRICARE Prime Cost Sharing for Active Duty Family Members for 2018**

Category	Select Group A	Select Group B	Prime Group A	Prime Group B
Annual Enrollment	\$0	\$0	\$0	\$0
Annual Deductible	E1-E4: \$50/\$100 E5 & above: \$150/\$300	E1-E4: \$50/\$100 E5 & above: \$150/\$300	\$0	\$0
Annual Catastrophic Cap	\$1000	\$1000	\$1000	\$1000

Group A = “grandfathered” enrollees (initial military affiliation before January 1, 2018).

Group B = “non-grandfathered” enrollees (initial military affiliation after January 1, 2018).

TABLE 2: TRICARE Select & TRICARE Prime Cost Sharing for Retiree Families for 2018

Category	Select Group A	Select Group B	Prime Group A	Prime Group B
Annual Enrollment	\$0 until 2021; \$150/\$300 in 2021	\$450/\$900	FY17 amount (\$282.60/565.20) +COLA	\$350/\$700
Annual Deductible	\$150/\$300	Network: \$150/\$300 Out-of-Network: \$300/\$600	\$0	\$0
Catastrophic Cap. Per year	\$3000 until 2021; \$3500 in 2021	\$3500	\$3000	\$3500

COLA = Cost of Living Adjustment (applied to retired pay).



APPENDIX B: Choosing a TRICARE Health Plan Chart

Choosing a TRICARE Health Plan in 2018		
I'm in	I want to have	Then I will
TRICARE Prime	TRICARE Prime	Do nothing (you will auto-renewal in Prime)
	TRICARE Select	Disenroll from Prime, enroll in TRICARE Select
	No benefit	Disenroll (this is a bad idea)
TRICARE Extra/Standard	TRICARE Select	Do nothing (auto-conversion from Standard)
	TRICARE Prime	Enroll in TRICARE Prime
	No Benefit	Disenroll from Select (this is a bad idea)
TRICARE Young Adult	TRICARE Young Adult	Do nothing (auto-renewal) / Keep premiums paid
	No benefit	Disenroll from TYA (this is a bad idea)
TRICARE Reserve Select	TRICARE Reserve Select	Do nothing (auto-renewal) / Keep premiums paid
	No benefit	Disenroll from TYA (this is a bad idea)
TRICARE For Life	TRICARE For Life	Do nothing (and purchase Medicare Part B, if required)