

TRICARE Coverage While Traveling Overseas

When planning a trip overseas, you may ponder the sights to see and the foods to eat. Thoughts about health care may not even cross your mind. However, it is important to understand how TRICARE covers overseas care* in case you require medical attention.

Where You Seek Medical Care

Before leaving for an overseas destination, you should obtain routine care from your primary care manager (PCM) and fill prescription medications. To minimize out-of-pocket costs and the need to file claims, you should seek medical attention while traveling **only** in cases of urgent or emergency care.

Overseas MTFs

Always seek care at a military treatment facility (MTF) when possible. Overseas MTFs, like stateside MTFs, are managed and operated by the Military Health System and offer the best quality health care available. You can find a list of overseas MTFs by visiting www.tricare.osd.mil/mtf.

If you can't get to an MTF and need to seek care from a host nation hospital (i.e., in the country where you are

** This article addresses TRICARE beneficiaries traveling to overseas locations only. TRICARE beneficiaries who are stationed overseas receive health care through the TRICARE Overseas Program.*

traveling), contact the closest MTF. Overseas MTFs can provide you with a patient liaison who speaks the local language to help you make decisions at the host nation hospital. Overseas MTFs also can help you transfer to a different hospital, if needed.

Host Nation Facilities

If there is no MTF in the area in which you are traveling, active duty service members may contact International SOS, Inc., for help in choosing a hospital or provider. Active duty family members, as well as retired service members and their families, must seek care with a TRICARE-certified/authorized provider. If you need assistance in finding a TRICARE-certified/authorized provider, contact the nearest MTF or the U.S. Embassy. You can also find a provider by visiting the TRICARE Standard Directory at www.tricare.osd.mil/standardprovider/.

Remember, civilian health care in foreign countries can be quite different than what you are accustomed to in the United States. The TRICARE Area Office (TAO) Customer Service Center may be able to provide you with advice or assistance when seeking care. See page 2 for International SOS and TAO contact information.

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A Closer Look: Behavioral Health Care for Children

Childhood is meant to be a time of innocence. However, the formative years also can be a time fraught with emotional difficulties.

When a child shows signs of depression, anxiety or compulsive behavior, or cannot concentrate or behave at school, how do parents distinguish between the everyday challenges of growing up and a behavioral health problem that requires professional assessment?

Just as with our adult beneficiaries, children are entitled to eight unmanaged behavioral health outpatient visits with a network provider per fiscal year without a referral or prior authorization. These visits are per beneficiary and not per provider.

If ongoing treatment is needed, your child's behavioral health care provider will submit a report with that request.

Military Children Face Unique Challenges

Frequent moves and the stress of having a loved one in harm's way can take their toll on children.

During this time of deployment in the Middle East, many family members are worried about their loved ones and are having difficulty adjusting to the many changes in their lives. Over time, this can cause anxiety and stress in children.

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In an emergency, always go directly to the nearest emergency room (ER). Once there, active duty service members or someone acting on their behalf must call International SOS or the nearest MTF for assistance.

When You Need Authorization

If you are receiving urgent or routine care overseas (either at an MTF or a host nation facility), you must contact your PCM or regional contractor (Humana Military) for a referral prior to seeking care. If you are receiving emergency care, you should go directly to the ER, and you or someone acting on your behalf should contact your PCM or regional contractor as soon as possible to ensure continuity of care.

How You File Claims

Your regional contractor processes claims for overseas care. In most cases, you will be required to **pay for care up front** and file a claim for reimbursement with your regional contractor when you return to your stateside region.

How You Fill Prescriptions

If you need to fill a prescription while traveling overseas, you should try to do so at an MTF, as this is your least costly option. If you fill a prescription at a host nation pharmacy, you will have to **pay up front** and file a claim for reimbursement once you return. If you are traveling in U.S. Territories overseas (Puerto Rico, Guam and U.S. Virgin Islands), you may use a TRICARE network retail pharmacy to fill your prescriptions. To locate a network pharmacy in those areas, visit www.express-scripts.com/tricare.

If you need more information prior to traveling, call your regional contractor, Humana Military, at 1-800-444-5445 or visit them online at www.humana-military.com. ■

Before You Go:	
<ul style="list-style-type: none"> • Seek all routine medical care from your PCM. • Fill all prescription medications. • Find an MTF near your overseas destination. • Write down the contact information for International SOS, Inc. (active duty only), the TAOs, U.S. Embassies and MTFs in the areas in which you will be traveling. • Write down your PCM's and regional contractor's phone numbers. 	
Helpful Contact Information	
MTF Locator	www.tricare.osd.mil/mtf
TRICARE Area Office Customer Service	Latin America and Canada: 1-706-787-2424 http://tricare15.army.mil www.tricare.osd.mil/overseas/index.cfm Pacific: 81-6117-43-2036 www.tricare.osd.mil/overseas/index.cfm Europe: DSN: 496-6312/6314 Comm: 49-6302-67-6312/6314 www.europe.tricare.osd.mil
International SOS (active duty only)	Numbers by overseas region: www.internationalsos.com/private/tricare Toll-free service for selected EUCOM and CENTCOM countries: 44-20-8762-8133 Latin America and Canada: 1-800-834-5514 Pacific: Singapore 65-6338-9277 Sydney 61-2-9273-2760
U.S. Department of State	List of U.S. consular offices: http://usembassy.state.gov

A Closer Look: Behavioral Health Care for Children

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Finding the Right Provider

Experts stress the importance of finding an age-specific provider who specializes in the type of disorder you believe your child may have. Clinicians also emphasize that behavioral health care for children is shown to be most successful when every family member

is committed to the outcome and is willing to participate.

When seeking an outpatient therapist for your child, be careful to select a provider in the TRICARE network. Otherwise, you may incur additional charges under the TRICARE Prime point-of-service (POS) option. To obtain names of TRICARE

providers in your area, call 1-800-700-8646.

Please note: States have different regulations governing the release of behavioral health information. In many circumstances the patient (based on age) must authorize release before agents can give information to anyone other than the patient. ■

Separating from AD? Know Your Options

When separating from active duty (AD), understanding the transitional health care options offered by TRICARE is critical.

Transitional Assistance Management Program (TAMP)

You and your family members may be eligible for TAMP benefits if you are a service member involuntarily separating from AD under honorable conditions; separating from AD following involuntary retention (stop-loss) in support of a contingency operation; or separating from AD following a voluntary agreement to stay on AD for a period of less than one year in support of a contingency operation. In addition, a reservist (National Guard and Reserve) separating from an AD period of more than 30 days in support of a contingency operation (OEF, OIF and Noble Eagle) may also be eligible for TAMP benefits.

TAMP provides health care coverage as you transition to civilian life. Beginning on your separation date, you and your eligible family members are covered by TAMP for 180 days. Under TAMP, you may choose to re-enroll in TRICARE Prime if available. If you re-enroll in TRICARE Prime, you must submit a new TRICARE Prime Enrollment Application and PCM Change form on or before your release from AD to avoid a lapse in coverage. As a TRICARE Prime enrollee, you will not have enrollment fees. The TRICARE Prime Remote (TPR) and TPR for Active Duty Family Members health plan options are not available under TAMP. Beneficiaries who do not enroll in TRICARE Prime will be covered under TRICARE Extra/Standard and will be responsible for applicable cost-shares and a deductible. The annual deductible is waived for TAMP-eligible reservists and their families for as long as the TRICARE Reserve Family Demonstration Project remains in effect.

National Guard/Reserve members should note that during the 180-day TAMP period, if the sponsor is called again to AD in support of a contingency operation for more than 30 consecutive days, the sponsor becomes eligible for a new 180-day TAMP period upon deactivation. However, the original 180-day TAMP period does not stop if a sponsor is on AD for 30 days or less.

Continued Health Care Benefit Program (CHCBP)

The CHCBP provides additional, longer-term transitional benefits (18-36 months) to former service members and their families, some unremarried former spouses, and emancipated children (living on their own). CHCBP benefits can be purchased once your TAMP eligibility ends (if applicable; you do not have to qualify for TAMP to qualify for CHCBP). Those who qualify must enroll and pay quarterly premiums—currently \$933 for one person or \$1,996 for a family. Premiums are subject to annual increases. CHCBP benefits are similar to TRICARE Standard. Although not part of Standard, CHCBP operates under most of the same rules. TRICARE Prime is not available under CHCBP.

To receive CHCBP coverage, eligible persons must complete an application within 60 days after separating from AD or losing their eligibility for TRICARE, including TAMP. Beneficiaries who are using TAMP should enroll in CHCBP at the end of the 180-day TAMP period if they wish to continue receiving TRICARE health care benefits.

The DoD has partnered with Humana Military to administer CHCBP. Contact Humana Military in writing or by phone for more information about CHCBP: Humana Military Healthcare Services, CHCBP, P.O. Box 740072, Louisville, Ky., 40201 or 1-800-444-5445.

Certificate of Creditable Coverage

When you are no longer eligible for TRICARE, you will automatically receive a certificate of creditable coverage. This document serves as evidence of prior health care coverage during the time of your service. Most civilian health insurance programs impose a waiting period for pre-existing conditions for all new or reinstated members. The certificate of creditable coverage proves you were continuously covered under a qualifying health care plan and enables a waiver of any waiting period related to a pre-existing condition.

If you've lost your certificate, you may request a new one free of charge. Certificates **cannot** be requested by phone. Requests must be submitted in writing to: Defense Manpower Data Center Support Office, Certificate of Creditable Coverage, 400 Gigling Road, Seaside, Calif., 93955-6771. The request must include the following: sponsor's name and Social Security number; name of person for whom the certificate is requested; reason for the request; name and address to whom and where the certificate should be sent; and signature of the requester.

For more information about the certificate of creditable coverage, call the Defense Manpower Data Center Support Office at 1-800-538-9552 (TTY/TDD 1-866-363-2883), e-mail the TRICARE Management Activity HIPAA Program Office at hipaamail@tma.osd.mil or visit the TRICARE Web site at www.tricare.osd.mil/certificate.

For additional information about your health care options when you separate from active duty, contact a beneficiary counseling and assistance coordinator (BCAC). To find a BCAC near you, visit the BCAC directory online at www.tricare.osd.mil/bcac or contact Humana Military for assistance at 1-800-444-5445. ■

Humana Military Healthcare Services, Inc.
500 West Main Street
P.O. Box 740062
Louisville, KY 40201-7462

CONTACTS

Humana Military
1-800-444-5445
www.humana-military.com

PGBA (claims)
1-800-403-3950

ValueOptions (behavioral health)
1-800-700-8646

Pharmacy Customer Service
1-866-DoD-TRRx (retail)
1-866-DoD-TMOP (mail order)
www.express-scripts.com/TRICARE

National TRICARE Web Sites
www.tricare.osd.mil
www.tricareonline.com

Update DEERS
1-800-538-9552
www.tricare.osd.mil/DEERSAddress

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When Do You Have to File Claims for Care Received During the Aftermath of Hurricanes Katrina, Rita or Wilma?

As a TRICARE Prime beneficiary, you do not typically file your own claims. If you were displaced by Hurricanes Katrina, Rita or Wilma and have been receiving care from a provider in a different location, you most likely will still not be required to file claims. All TRICARE network providers and many non-network providers will file claims on your behalf. The only time you will need to file a claim with TRICARE for reimbursement is if you visit a non-network provider who also does not participate in TRICARE.

If you visited a nonparticipating, non-network provider, filing a TRICARE claim is easy:

- Download a TRICARE claim form (DD Form 2642) and instructions from www.tricare.osd.mil/claims or

www.humana-military.com. You can also obtain a copy from any TRICARE Service Center (TSC).

- Complete the claim form. When filling in your address, use your home address in the South Region—not your temporary address—and don't forget to sign the form.
- Attach the itemized bill from the provider. It should include the provider's name and address; your name; dates of service; the procedure(s) performed; the diagnosis code; and a corresponding breakdown for each procedure.
- If you have other health insurance (OHI), you'll also need to include an explanation of benefits (EOB) statement from that plan with a breakdown of how much the OHI paid on each charge.

- Submit the completed, signed claim form and attachments to:
TRICARE South Region
Claims Department
P.O. Box 7031
Camden, SC 29020-7031

Remember to keep a copy of all documents for your records. Once your claim is processed, you will be reimbursed directly.

A blanket referral was in effect in the South Region for Sept. through Nov. 2005, allowing you to receive urgent and routine care without a referral. If you have any issues with claims during this period of time, please contact Humana Military for assistance at 1-800-444-5445. ■