

# TRICARE Prime Maternity Care



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This flyer is **not** intended to be all-inclusive. For additional information, please contact your regional contractor or local military treatment facility.

### Maternity Care Coverage

TRICARE Prime covers all necessary maternity care, from your first obstetric visit through six weeks after your child is born, including:

- Obstetric visits throughout your pregnancy
- Medically necessary fetal ultrasounds\*
- Hospitalization for labor, delivery, and postpartum care
- Anesthesia for pain management during labor and delivery
- Medically necessary cesarean section
- Management of high-risk or complicated pregnancies

\* Refer to your regional contractor's Web site for maternity ultrasound coverage information.

The following services are **not** covered by TRICARE:

- Fetal ultrasounds that are not medically necessary (e.g., to determine your baby's sex), including three- and four-dimensional ultrasounds
- Services and supplies related to noncoital reproductive procedures (e.g., artificial insemination); however, you will be covered by TRICARE once you are pregnant
- Management of uterine contractions with drugs that are not approved for that use by the Food and Drug Administration (i.e., off-label use)
- Home uterine activity monitoring and related services
- Unproven procedures (e.g., lymphocyte or paternal leukocyte immunotherapy for the treatment of recurrent miscarriages, or salivary estriol test for preterm labor)

- Umbilical cord blood collection and storage, except when stem cells are collected for subsequent use in the treatment of tumor, blood, or lymphoid disease
- Private hospital rooms<sup>†</sup>

<sup>†</sup> TRICARE does not generally cover private rooms; however, some military treatment facilities (MTFs) may have private postpartum rooms.

### Getting Maternity Care

As soon as you think you may be pregnant, visit your primary care manager (PCM). If your PCM is not an obstetrician, he or she will refer you to one. You may see the same provider throughout your pregnancy or request a change at any time. If you relocate during your pregnancy, your PCM and regional contractor will coordinate with your new provider to ensure continuity of care.

Prior authorization is required for maternity care. It should be obtained at your first prenatal visit and remains valid through the sixth week after delivery. If you intend to deliver in a civilian facility or birthing center, you must obtain a separate prior authorization for the delivery.

**TRICARE Prime Beneficiaries:** If your PCM is at an MTF, you should receive maternity care from the MTF. If you are not located near an MTF or MTF care is unavailable, your PCM will refer you to a civilian network provider. All beneficiaries except active duty service members (ADSMs) may use the point of service option to self-refer to an obstetrician, but higher out-of-pocket costs will apply. ADSMs who are discharged due to pregnancy, or who are pregnant at the time of release from active duty, should contact their local Beneficiary Counseling and Assistance Coordinator to determine if maternity care may be available through the MTF.



## Getting Maternity Care (continued)

### TRICARE Prime Remote (TPR) and TRICARE Prime Remote for Active Duty Family Members (TPRADFM)

**Beneficiaries:** If you are enrolled in TPR or TPRADFM with an assigned PCM, your PCM will direct your care. Otherwise, you may obtain care from a civilian TRICARE-authorized provider with prior authorization from your regional contractor.

## Newborn Eligibility and Enrollment

You will continue to receive maternity care for up to six weeks after your baby is born, and your baby automatically will be covered under TRICARE Prime for the first 60 days after birth.\* To ensure your baby's coverage continues **after** the first 60 days, there are **two things you must do**:

1. Register your baby in the Defense Enrollment Eligibility Reporting System (DEERS) at a uniformed services identification card-issuing facility. A birth certificate or certificate of live birth from the hospital is required. If your baby is not registered in DEERS within one year after the date of birth, DEERS will show "loss of eligibility" and he or she will no longer be able to receive TRICARE benefits until registered in DEERS.
2. Enroll your baby in TRICARE Prime or TPRADFM within 60 days after birth via the Beneficiary Web Enrollment Web site at <https://www.dmdc.osd.mil/appj/bwe/> or by submitting a *TRICARE Prime Enrollment Application and PCM Change Form* to your regional contractor. On day 61, if you have not enrolled your baby in TRICARE Prime or TPRADFM, he or she will be covered under TRICARE Standard and TRICARE Extra.

**Note:** You must complete DEERS registration **before** you enroll your baby in TRICARE Prime or TPRADFM. Contact your regional contractor for enrollment assistance.

\* *Maternity care for a TRICARE-eligible dependent daughter of an ADSM or retired service member is covered; however, care for the newborn grandchild is not covered.*

## For Information and Assistance

If you have additional questions about maternity care or health information while you are pregnant, visit your regional contractor's Web site or call them.

<b>TRICARE North Region</b> Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) <a href="http://www.healthnetfederalservices.com">www.healthnetfederalservices.com</a>	<b>TRICARE South Region</b> Humana Military Healthcare Services, Inc. 1-800-444-5445 <a href="http://www.humana-military.com">www.humana-military.com</a>	<b>TRICARE West Region</b> TriWest Healthcare Alliance Corp. 1-888-TRIWEST (1-888-874-9378) <a href="http://www.triwest.com">www.triwest.com</a>
<b>Defense Enrollment Eligibility Reporting System (DEERS)—Update Information</b> Phone: 1-800-538-9552 Fax: 1-831-655-8317 <a href="http://www.tricare.mil/deers">www.tricare.mil/deers</a>	<b>Beneficiary Web Enrollment (BWE) Web Site</b> <a href="https://www.dmdc.osd.mil/appj/bwe/">https://www.dmdc.osd.mil/appj/bwe/</a>	<b>TRICARE Web Site</b> <a href="http://www.tricare.mil">www.tricare.mil</a> <b>Military Health System Web Site</b> <a href="http://www.health.mil">www.health.mil</a>

### An Important Note about TRICARE Program Information

At the time of printing, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law. Changes to TRICARE programs are continually made as public law is amended. **Military treatment facility guidelines and policies may be different than those outlined in this product.** For the most recent information, contact your TRICARE regional contractor, TRICARE Service Center, or local military treatment facility.

Please provide feedback on this flyer at [www.tricare.mil/evaluations/feedback](http://www.tricare.mil/evaluations/feedback).

## Costs

There are no maternity care costs for ADSMs and their family members enrolled in TRICARE Prime, TPR, or TPRADFM. Retirees and other beneficiaries have a copayment for the initial office visit and for their inpatient stay. For more information on costs, visit [www.tricare.mil/costs](http://www.tricare.mil/costs).

## If You Lose TRICARE Eligibility while Pregnant

You may lose TRICARE eligibility if:<sup>†</sup>

- You are an ADSM and you separate (*not retire*) from the military
- Your spouse is an ADSM and he separates (*not retires*) from the military
- You divorce from your ADSM or retired sponsor and do not qualify for former spouse benefits
- You are an unmarried daughter of an ADSM or retired service member and you reach your 21st birthday (*or 23rd if enrolled in college full-time*)

If you lose eligibility, you also lose your maternity care coverage unless you qualify for the Continued Health Care Benefit Program (CHCBP) or Transitional Assistance Management Program (TAMP). The CHCBP is administered by Humana Military Healthcare Services, Inc. For CHCBP details, visit [www.humana-military.com](http://www.humana-military.com). To learn more about TAMP, visit [www.tricare.mil](http://www.tricare.mil).

<sup>†</sup> *If you lose eligibility, you will automatically receive a certificate of creditable coverage, which serves as evidence of prior health care coverage under TRICARE.*