

# CONTINUED HEALTH CARE BENEFIT PROGRAM

CHCBP

The Continued Health Care Benefit Program (CHCBP) is a premium-based health care program administered by Humana Military. If you qualify, CHCBP provides you and your family with continued health care coverage for 18–36 months after you lose your military health care benefits. Participation in CHCBP is optional.

CHCBP is available to former qualified uniformed service members, their family members, former spouses who have not remarried, adult children and unmarried children by adoption or legal custody.

CHCBP is not a TRICARE program, but it offers coverage comparable to TRICARE Standard with similar benefits, providers and program rules. The main differences are that premium payments are required, and CHCBP beneficiaries are not legally entitled to routine, urgent or specialty care at military hospitals and clinics or to military pharmacy services.

The Affordable Care Act requires that individuals maintain health insurance or other health care coverage that meets the definition of “minimum essential coverage.” CHCBP is considered minimum essential coverage. You can also find other health care coverage options at [www.healthcare.gov](http://www.healthcare.gov).



## QUALIFICATION CRITERIA AND DURATION OF COVERAGE BY BENEFICIARY CATEGORY

BENEFICIARY CATEGORY	QUALIFICATION CRITERIA	DURATION OF COVERAGE
<b>Former active duty service members (ADSMs) and their family members</b>	<p>Former ADSMs and their family members may qualify for Continued Health Care Benefit Program (CHCBP) coverage when:</p> <ul style="list-style-type: none"> <li>• The sponsor is released or discharged from active duty under other than adverse conditions</li> <li>• The sponsor was entitled to medical care under a military health plan</li> <li>• ADSMs and their family members are not eligible for any benefits under TRICARE or the Transitional Assistance Management Program (TAMP)</li> </ul>	<p>Up to 18 months</p> <p><b>Note:</b> Former ADSMs and their family members qualify for CHCBP when TAMP benefits expire.</p>
<b>Members of the Selected Reserve, members of the Retired Reserve and their families</b>	<p>For members of the Selected Reserve, members of the Retired Reserve and their families, the CHCBP 18-month eligibility begins at the end of the active duty service or TAMP period, or upon termination of coverage under TRICARE Reserve Select or TRICARE Retired Reserve.</p>	<p>Up to 18 months</p>
<b>Former spouses who have not remarried</b>	<p>Former spouses who have not remarried may qualify for CHCBP when:</p> <ul style="list-style-type: none"> <li>• They are covered under TRICARE or TAMP as dependents of a current or former service member on the day before the date of the final decree of divorce, dissolution or annulment</li> <li>• They are not eligible for TRICARE as a former spouse of a member or former member of the uniformed services</li> </ul>	<p>Up to 36 months<sup>1</sup></p>
<b>Dependent spouses and children<sup>2</sup></b>	<p>Dependents of sponsors may qualify for CHCBP when:</p> <ul style="list-style-type: none"> <li>• They cease to meet requirements as a dependent of a member or former member of the uniformed services</li> <li>• They were covered under TRICARE, TAMP or TRICARE Young Adult (TYA)<sup>3</sup> as dependents of a member or former member of the uniformed services on the day before ceasing to meet the requirements for being considered a dependent</li> <li>• They would not otherwise be eligible for any benefits under TRICARE</li> </ul>	<p>Up to 36 months</p>

1. Certain former spouses who have not remarried before age 55 may qualify for an unlimited duration of coverage.

2. Includes children who were adopted or were placed in the legal custody of a uniformed service sponsor.

3. Children older than age 21 (but not yet age 26) who lose eligibility for TRICARE or TAMP may qualify to purchase TYA instead of CHCBP. Purchasing TYA after losing TRICARE or TAMP offers additional coverage options and may extend the qualification to purchase CHCBP. Go to [www.tricare.mil/tya](http://www.tricare.mil/tya) for more information.

## COSTS

CHCBP provides two types of coverage plans: individual or family. Coverage must be purchased in 90-day increments. **Individual coverage** is available to the sponsor, a former spouse who has not remarried or an adult child. Premiums for individuals are \$1,372 per quarter. **Family coverage** is only available to former service members and their dependents. For family coverage, dependents cannot enroll unless the sponsor enrolls. Premiums for families are \$3,087 per quarter.

When you get medical care under CHCBP, you will be responsible for paying a yearly deductible and cost-shares for covered services. These amounts are based on the status of the sponsor (for example, active duty or retired) at the time of enrollment and the type of provider seen. Provider types are discussed later.

**Note:** CHCBP costs and premiums are subject to adjustments each fiscal year (Oct. 1–Sept. 30).

## KEEP YOUR PERSONAL INFORMATION UP TO DATE

You must keep your personal information updated with Humana Military. This means when you have a life event such as moving, getting married or divorced or having a child, you must let Humana Military know. This helps ensure you receive timely, effective CHCBP benefits, including health care appointments, prescriptions and claim payments.

To update your information, call Humana Military at **1-800-444-5445**.

## ENROLLMENT

The uniformed services will notify service members who are eligible for health benefits under CHCBP as part of pre-separation counseling, and the Defense Manpower Data Center will notify others in writing that they are eligible. CHCBP must be purchased within 60 days of qualifying for coverage. To enroll in CHCBP, submit the following:

- A completed *Continued Health Care Benefit Program (CHCBP) Application* form (DD Form 2837)
- A payment in full for the first 90 days of coverage
- *Certificate of Release or Discharge From Active Duty* (DD Form 214), if applicable

Once Humana Military verifies that you qualify and completes your enrollment, you will get a CHCBP enrollment card by mail.

Former spouses who have not remarried must also submit a copy of the final divorce decree, dissolution or annulment.

Submit required materials by mail to:

Humana Military  
Attn: CHCBP  
P.O. Box 740072  
Louisville, KY 40201

**Note:** If your CHCBP coverage is terminated because you regain TRICARE entitlement or eligibility, you will be able to purchase CHCBP coverage again once that eligibility for TRICARE coverage ends.

## RENEWING COVERAGE

Because CHCBP coverage is purchased in 90-day increments, premiums are billed quarterly. Thirty days before the expiration of your current quarterly coverage period, you will get a renewal notice. Renewal premiums should be paid before the coverage expiration date printed on the renewal notice and on your CHCBP enrollment card.

Payments postmarked later than 30 days after the last date of coverage will result in termination of CHCBP benefits and permanent loss of qualification to purchase CHCBP coverage.



## GETTING CARE FROM TRICARE®-AUTHORIZED PROVIDERS

### Network Providers

Using a TRICARE network provider is your best option under CHCBP. A TRICARE network provider accepts TRICARE's payment as the full payment for any covered health care services you get (less any cost-shares and your deductible) and files claims for you.

### Participating Non-Network Providers

If you seek care from a non-network provider, a participating provider is your best option. Providers who participate in TRICARE accept TRICARE's payment as the full payment for any covered health care services you get (less any cost-shares and your deductible) and file claims for you on a case-by-case basis.

### Nonparticipating Non-Network Providers

If you visit a nonparticipating provider, you may have to pay the provider up front and file a claim with TRICARE to get money back. Nonparticipating providers do not accept TRICARE's payment as the full payment for covered health care services or file claims for you. They may charge up to 15 percent above the TRICARE-allowable charge. You are responsible for paying this amount in addition to any applicable patient costs.

**Note:** CHCBP beneficiaries may not use military hospitals and clinics except in emergency situations.

## Frequently Asked Questions

### Under what circumstances are premiums refunded?

Premiums may be refunded under only two conditions:

- If you no longer qualify for CHCBP (for example, a former active duty service member [ADSM] recalled to active duty or a former spouse who remarries). Refunds for these beneficiaries will be prorated from the date of loss of qualification for program benefits to the last day of the enrollment period for which the premium has been paid.
- If you submit a written refund request regarding your prepaid premium that is received by Humana Military before the effective start date of your CHCBP coverage (for example, a former ADSM enrolls and prepays for CHCBP family coverage beginning July 1. Before the CHCBP coverage goes into effect, the former ADSM becomes employed and gets employer-sponsored health insurance. Therefore, the CHCBP coverage is no longer needed. As long as the written refund request is received by Humana Military before July, the prepaid premium will be refunded in full).

### What services are covered by CHCBP?

Detailed information about covered services is available at [www.tricare.mil](http://www.tricare.mil). For more information, call Humana Military at 1-800-444-5445.

### How do I find a provider who participates in TRICARE?

You can find a list of participating providers with the "Find a Doctor" feature at [www.tricare.mil/finddoctor](http://www.tricare.mil/finddoctor).

### How do I know if my doctor is a participating provider?

Before getting care, call and ask if the provider participates (or will participate) in TRICARE. Be sure he or she understands that by participating in TRICARE, he or she agrees to accept TRICARE's payment as the full payment for any covered health care services you get. If the provider is not familiar with TRICARE or has questions, he or she may go to [www.tricare.mil/providers](http://www.tricare.mil/providers) or call Humana Military at 1-800-444-5445.

### I am an adult child losing TRICARE coverage due to age. What are my continuation-coverage options?

Adult children aging out of TRICARE or Transitional Assistance Management Program coverage may only purchase TRICARE Young Adult (TYA) if they qualify. Visit [www.tricare.mil/tya](http://www.tricare.mil/tya) for more information about TYA qualification, coverage and costs.

### How do I change my enrollment category from individual to family coverage?

Enrollment changes from individual to family coverage may only be made when one or more of the following qualifying events occur:

- Birth of a child
- Marriage of the sponsor
- Legal adoption of a child
- Placement of a child as a legal ward in the beneficiary's home

If one of these qualifying events occurs, you can change from individual to family coverage effective from the date of the qualifying event. You also must begin to pay the family premium rate effective on the date of the qualifying event. If the qualifying event occurred after initial enrollment in CHCBP, you must send a written request with supporting documentation to Humana Military at the address that follows no later than 60 days from the qualifying event.

### How do I change from family to individual coverage?

You may make enrollment changes by notifying Humana Military in writing at the following address:

Humana Military  
Attn: CHCBP  
P.O. Box 740072  
Louisville, KY 40201

For additional information about CHCBP, visit Humana Military's website at [HumanaMilitary.com](http://HumanaMilitary.com) or call 1-800-444-5445.