



TRICARE® Treatment of Line of Duty Conditions

National Guard and Reserve members may be covered for injury, illness, or disease incurred or aggravated in the line of duty

National Guard and Reserve members may be covered for an injury, illness, or disease determined to be incurred or aggravated while in a qualifying duty status or while traveling to or from the place of duty. Qualifying duty status may include inactive duty (*drill*), funeral honors duty, or active duty.

The member's service or Reserve component must issue a line of duty (LOD) determination that specifically identifies the qualifying medical or dental condition to be treated or covered at the expense of the Department of Defense. An LOD determination is sometimes called a Notification of Eligibility (NOE). Since treatment and coverage are limited to the particular LOD condition only, LOD determinations are not recorded in the Defense Enrollment Eligibility Reporting System (DEERS). It is the service member's responsibility to demonstrate and document that the requirements for an LOD determination are met in each case.

LINE OF DUTY MEDICAL CARE

Once the military issues an LOD determination or NOE for a qualifying medical condition, it is the service member's responsibility to ensure that the written LOD determination or NOE is submitted to either a military hospital or clinic or the Defense Health Agency—Great Lakes (DHA-GL).

- If the service member resides in the general area of a military hospital or clinic (*as indicated by the service member's residential ZIP code in DEERS*), the military hospital or clinic will manage the LOD care. The service member should make sure that his or her service-issued LOD determination is on file at the military hospital or clinic.
- If the service member does not reside in a military hospital or clinic area, DHA-GL will issue prior authorization via the service member's unit medical representative.

For more information on how to forward an LOD determination to DHA-GL, visit www.tricare.mil/greatlakes.

Civilian providers must submit all claims for LOD medical care to the TRICARE regional or overseas contractor in the TRICARE region where the service member lives.

Medications associated with LOD conditions are coordinated through DHA-GL. National Guard and Reserve members may be eligible to receive reimbursement for medications in connection with their LOD conditions. For more information, visit www.tricare.mil/greatlakes and download the instructions for "Pharmacy Reimbursement for Line of Duty Care."

LOD claims processing and payment is separate from any other TRICARE coverage a service member may receive, including:

- Coverage under the Transitional Assistance Management Program
- Coverage under TRICARE Reserve Select

EMERGENCY LINE OF DUTY CARE

Emergency care medical claims for National Guard and Reserve members on active duty for less than 30 days can only be paid after a completed *Medical Eligibility Verification for the Reserve Component* worksheet is submitted to and received by DHA-GL. The worksheet is available at www.tricare.mil/Resources/Forms/DHA-GL.

The service member's unit representative must submit the worksheet to the address or fax number provided on the worksheet. Paperwork should be submitted as soon as possible to avoid a delayed or denied claim. The service member's unit must contact DHA-GL if the LOD determination was not submitted before the service member received emergency medical care.

*This fact sheet is **not** all-inclusive. For additional information, please visit www.tricare.mil.*

Follow-up and routine LOD medical care requires prior authorization through DHA-GL or a military hospital or clinic. Units must complete the LOD process before directing a service member to seek nonemergency civilian medical care. A denied LOD determination or care received without prior authorization will result in the service member being responsible for all costs associated with that episode of care.

LINE OF DUTY DENTAL CARE

An LOD determination is issued for National Guard and Reserve members and for former active duty service members who incur or aggravate a dental injury, illness, or disease while on active duty, and are not otherwise eligible for care under the Active Duty Dental Program (ADDP).

An LOD determination is **not** a resource for funding civilian dental care for preexisting conditions or routine care (e.g., *untreated cavities, wisdom tooth extraction, cleanings*). Payment requests for civilian dental treatment of these conditions will be denied.

The following explains the process for receiving LOD dental care:

1. The service member reports the injury or illness to the unit chain of command.
2. The service member's unit initiates the LOD form. The LOD determination is signed by the commander or designated representative.
3. The service member or military unit submits LOD documentation to the ADDP contractor, United Concordia Companies, Inc. (United Concordia), for government review by a dental service point of contact (DSPOC) and schedules a follow-up appointment with a civilian dentist for a dental treatment plan related only to that injury or illness. No definitive treatment is to be provided at this treatment planning appointment.
4. The civilian dentist submits the *ADDP Authorization Form* and appropriate diagnostic materials to United Concordia.
5. United Concordia forwards LOD submission and diagnostic materials to the DSPOC for review and prior authorization.
6. United Concordia notifies the service member of the DSPOC determination, including any approved course of treatment.

Note: Submitting an LOD determination is **not** an approval to get dental care. An LOD treatment **must** be DSPOC-approved before receiving civilian dental care. If you have a dental emergency and feel that you cannot wait for the review and prior authorization, you may be responsible for all charges associated with that care. For more information, see the *Emergency Dental Care* section below.

EMERGENCY DENTAL CARE

Emergency dental care required before submitting and receiving approval for the LOD determination is limited to emergency care for immediate treatment of bleeding, pain, or infection and must be completed while the member is on active duty. ADDP emergency care claims for National Guard and Reserve members on active duty for less than 30 days can only be paid through a government-approved LOD determination or through service- or Reserve component-specific programs.

The member's military unit must contact United Concordia if the LOD determination was not submitted before receiving emergency civilian dental care. Definitive treatment is **not** authorized.

Units must complete the LOD process before directing a service member to seek nonemergency civilian medical care. A denied LOD determination or care received without prior authorization will result in the service member being responsible for all costs associated with that episode of care.

APPEALING DENIAL OF PAYMENT FOR LOD-RELATED DENTAL TREATMENT

If a National Guard or Reserve member's request for LOD-related dental treatment is not authorized for payment, he or she may request a review of the DSPOC's decision. The service member, military unit commander, or designated representative may submit an appeal of the DSPOC decision in writing to United Concordia. United Concordia will forward the appeal to the appropriate service branch for review.

To learn more, visit United Concordia at www.addp-ucci.com.

FOR INFORMATION AND ASSISTANCE

 TRICARE North Region Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) www.hnfs.com	 TRICARE South Region Humana Military, a division of Humana Government Business 1-800-444-5445 HumanaMilitary.com	 TRICARE West Region UnitedHealthcare Military & Veterans 1-877-988-WEST (1-877-988-9378) www.uhcmilitarywest.com
Active Duty Dental Program United Concordia Companies, Inc. ADDP Unit/LOD P.O. Box 69431 Harrisburg, PA 17106-9430 1-866-984-ADDP (1-866-984-2337) 1-866-308-4138 (fax) www.addp-ucci.com	Defense Health Agency—Great Lakes 1-888-647-6676 www.tricare.mil/greatlakes	Transitional Assistance Management Program www.tricare.mil/tamp
TRICARE Reserve Select Web Site www.tricare.mil/trs	TRICARE Retired Reserve Web Site www.tricare.mil/trr	Defense Enrollment Eligibility Reporting System (DEERS)—Update Information 1-800-538-9552 1-831-655-8317 (fax) www.tricare.mil/deers

An Important Note About TRICARE Program Information

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. **Military hospital and clinic guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.

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