

TRICARE® Philippine Demonstration

Demonstration project for TRICARE Overseas Program Standard beneficiaries who live in the Philippines and receive care in designated demonstration areas

On January 1, 2013, the Department of Defense (DoD) began a demonstration project for TRICARE Overseas Program (TOP) Standard beneficiaries who live in the Philippines and receive care in designated demonstration areas. The DoD is using a phased approach to implement the TRICARE Philippine Demonstration in multiple locations. The current schedule is outlined in the chart below.

Phase I January 1, 2013	Metro Manila; Angeles City, Pampanga; and Olongapo City, Zambales	
	Note: Metro Manila is defined as the metropolitan region encompassing the city of Manila and its surrounding areas in the Philippines. It is composed of 17 cities: the city of Manila, Caloocan, Las Piñas, Makati, Malabon, Mandaluyong, Marikina, Muntinlupa, Navotas, Pasay, Pasig, Parañaque, Quezon City, San Juan, Taguig, Valenzuela, and the Municipality of Pateros.	
Phase II December 1, 2013	General Trias, Cavite; Naic, Cavite; Bacoor, Cavite; Imus, Cavite; and Cavite City, Cavite	
Phase III July 1, 2014	Iloilo City, Iloilo	

When seeking care within designated demonstration areas, you are required to see approved demonstration providers who have agreed to comply with TRICARE requirements and business processes in order for TRICARE to cost-share your claims. Visit www.tricare-overseas.com/philippines.htm to find a provider.

International SOS Assistance, Inc., the TOP contractor, and its subcontractor, Global 24 Network Services, administer the health care benefit under the Philippine Demonstration.

BENEFICIARIES AFFECTED BY THE PHILIPPINE DEMONSTRATION

If you reside in the Philippines and use one of the following TRICARE options, you are eligible to participate in the Philippine Demonstration:

- TOP Standard
- TRICARE For Life
- TRICARE Reserve Select (TRS)
- TRICARE Retired Reserve (TRR)
- TRICARE Young Adult Standard

Eligibility for participating in the Philippine Demonstration is determined by your physical address listed on health care claims, regardless of the address listed in the Defense Enrollment Eligibility Reporting System (DEERS). TOP Standard beneficiaries using a Philippine APO/FPO address on the *TRICARE DoD/CHAMPUS Medical Claim—Patient's Request for Medical Payment* (DD Form 2642) for medical care received in Phases I–III designated demonstration areas are required to follow the rules of the Philippine Demonstration to ensure that TRICARE cost-shares their claims.

GETTING CARE

This section explains how to access health care in the Philippines. TRICARE Standard beneficiaries who reside in the Philippines and seek care within designated Philippine Demonstration areas must follow the requirements of the demonstration and see approved demonstration providers to ensure TRICARE cost-shares their claims.

Within designated Philippine Demonstration areas, **you will be responsible for the full cost of care** if you do not seek care from an approved demonstration provider or you do not have a waiver. If you get care outside the Philippine Demonstration areas or have a waiver for care inside a Philippine Demonstration area, TRICARE will only cost-share the claim if the provider is certified. To find a certified provider, visit www.tricare-overseas.com/philippines.htm. If you need to choose a provider who is not currently certified, TRICARE will cost-share the claim only if the provider participates in the certification process and successfully meets the certification criteria. For more information about waivers, see the *Waiver Requests and Waiver Appeals* section of this fact sheet.

To receive care under the Philippine Demonstration, follow these steps:

- Find an approved demonstration provider.
- Call the approved demonstration provider to arrange a visit.
- At the time of your visit, complete all documentation as requested, and get the care you need.

TRICARE Standard deductibles and cost-shares will apply. Cost-shares may be collected up front or after the beneficiary and the approved demonstration provider receive the TRICARE explanation of benefits (EOB).

Note: The Philippine Demonstration does not pertain to pharmacy or dental services. Beneficiaries must continue to use a certified provider in the Philippines. See the *TRICARE Pharmacy Program* or *Frequently Asked Questions* sections of this fact sheet for more information, or visit www.tricare-overseas.com/philippines.htm.

PROVIDER TYPES

Before your next visit to the doctor, you should be aware of the differences between two provider types in the Philippines: approved demonstration providers and certified providers.

Approved demonstration providers have signed agreements to accept established TRICARE-allowable reimbursement rates, submit claims to the TOP claims processor on your behalf, and collect only applicable deductibles and cost-shares from you for all TRICARE-covered services. Approved demonstration providers are certified providers who have complied with on-site verification, provider certification, credentialing requirements, and Philippine Demonstration reimbursement procedures. You are responsible for paying your deductible and cost-shares to the approved demonstration provider, who has the option of collecting payment at the time of service or after filing a claim and receiving the TRICARE EOB.

Approved demonstration providers may ask to see your military identification (ID) card, Philippine-issued ID card, or other form of ID to verify your identity and physical mailing address. Approved demonstration providers are also trained to validate TRICARE coverage using the secure claims portal on www.tricare-overseas.com.

Before any claim is processed, the TOP contractor must ensure that the provider has gone through the certification process.

Certified providers in the Philippines meet TRICARE required on-site verification and provider certification requirements. However, certified providers within a Philippine Demonstration area do **not** agree to the additional conditions necessary to be approved demonstration providers. For example, a certified provider in the Philippines may require TRICARE beneficiaries to pay up front for all services and file their own claims for reimbursement.

There may be no limit to the billed amount that certified providers (who do not participate in the Philippine Demonstration) charge in the Philippines. You are responsible for paying any amount that exceeds the TRICARE-allowable charge in addition to your deductible and cost-shares. Visit www.tricare.mil/costs for more information.

Remember to notify your regional contractor if you obtain other health insurance (OHI) or if existing OHI coverage ends. This is critical to ensuring that your claims are processed accurately. To find an approved demonstration provider or a certified provider, contact Global 24 Network Services or visit www.tricare-overseas.com/philippines.htm. The Philippine Approved/Certified Provider list is updated regularly.

WAIVER REQUESTS AND WAIVER APPEALS

If you reside in the Philippines and are a TOP Standard beneficiary receiving care within a designated demonstration area in the Philippines, you must use an approved demonstration provider. However, there are two different waivers that will allow you to receive care from a provider who is not on the Philippine Approved/Certified Provider list.

1. Beneficiary waiver: If you are currently undergoing a continuing episode of care with a provider that is not approved under the demonstration, you may submit a written waiver request to Global 24 Network Services to continue care with your current provider. Global 24 Network Services will review the request and notify you of the decision.

If your waiver request is denied, you have the right to submit a waiver appeal to Global 24 Network Services to request a formal review of the waiver denial. Appeals are forwarded to the TRICARE Area Office–Pacific for final determination.

To download these forms and find additional instructions, visit www.tricare-overseas.com/philippines.htm.

The waiver request or waiver appeal can be submitted by mail or fax:

Postal Address:

P.O. Box 13892

Emerald Avenue, Ortigas Center Post Office

Pasig City, Philippines 1605

Fax: +63-2687-8609

Physical Address for Delivery of Certified Mail:

Level 30, Unit 04

Antel Global Corporate Building

Julia Vargas Avenue

Ortigas Center

Pasig City, Philippines 1605

Fax: +63-2687-8609

2. Specialty waiver: There may be situations where the TOP contractor is unable to recruit approved providers in designated demonstration areas. In these situations, the TOP contractor may request a specialty waiver so that beneficiaries can receive care from non-approved demonstration providers in accordance with TRICARE Standard reimbursement policy. You will not be required to submit a waiver if a specialty waiver is already in place for your geographic area. To determine whether a specialty waiver is in place in your area, contact Global 24 Network Services. You must still see a certified provider and may need to pay up front for medical care and submit a claim, including proof of payment, for reimbursement.

Note: You are encouraged to see a certified provider to ensure TRICARE cost-shares the claim. If you choose to see a non-certified provider, the claim may be denied unless the provider successfully completes the certification process.

COSTS

If you are a TOP Standard beneficiary seeking health care services under the Philippine Demonstration, you will only be responsible for applicable deductibles and cost-shares. Approved demonstration providers have agreed to accept established reimbursement rates. Cost-shares may be collected up front or after the beneficiary and approved demonstration provider receive the TRICARE EOB. These costs, as well as annual deductibles, are outlined in the chart below. If the payment collected up front was in excess of the required amount, the TOP claims processor will reimburse you when the claim is processed.

Beneficiary Category	Annual Deductible	Cost-Shares
Active duty family members, sponsor grades E-1 through E-4	\$50 Individual \$100 Family	20% of allowable charges
Active duty family members, sponsor grades E-5 and above	\$150 Individual \$300 Family	20% of allowable charges
Retirees, retiree family members, survivors	\$150 Individual \$300 Family	25% of allowable charges

The catastrophic cap for active duty family members and TRS beneficiaries is \$1,000 per family per fiscal year (FY) (*October 1–September 30*). For retirees and their families, including TRR beneficiaries and all others, the catastrophic cap is \$3,000 per family per FY. The catastrophic cap is the maximum amount you will pay for health care each FY. The catastrophic cap applies to all TRICARE-covered services—annual deductibles, outpatient and inpatient cost-shares, and pharmacy copayments based on TRICARE-allowable charges.

OTHER HEALTH INSURANCE

If you have OHI, including host nation insurance (e.g., PhilHealth, the Philippine Health Insurance Corporation), your OHI pays first. TRICARE is always the last payer. Beneficiaries with OHI must follow the rules of their OHI program and seek care from an approved demonstration provider to ensure that TRICARE cost-shares the claim for covered medical services received in designated demonstration areas. The approved demonstration provider may file the claim on your behalf. For more information, including an OHI claim checklist, visit www.tricare.mil/forms/philippines.aspx.

SERVICES REQUIRING PRIOR AUTHORIZATION

As a TRICARE Standard beneficiary, you do not need referrals for routine, urgent, specialty, or preventive care; however, some services require prior authorization. A prior authorization is a review of the requested health care service to determine if it is medically necessary at the requested level of care.

No referrals or prior authorizations are required for emergency care. TRICARE defines an emergency as a serious medical condition that the average person would consider to be a threat to life, limb, sight, or safety. If you have an emergency, go to the nearest emergency care facility. Contact Global 24 Network Services if you are admitted or before leaving the facility, preferably within 24 hours or on the next business day, to coordinate continued care.

Examples of services that require prior authorization include:

- Adjunctive dental care (dental care necessary for the treatment of a covered medical condition)
- Nonemergency care received in the continental United States
- Home health care services (*only available in the United States and U.S. territories* [American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands])
- Hospice care (only available in the United States and U.S. territories)
- Nonemergency inpatient admissions for substance use disorders or behavioral health care
- Outpatient behavioral health care visits for medically diagnosed and covered conditions that exceed the first eight visits in an FY
- Other behavioral health care services such as child and adolescent psychiatric residential treatment center care and outpatient psychoanalysis
- Some prescription medications (e.g., brand name medications or medications with age or quantity limitations)
- Transplants—all solid organ and stem cell*

This list is **not** all-inclusive and each overseas area may have additional prior authorization requirements. Visit www.tricare.mil/coveredservices for more information. Additional limitations for behavioral health care services may apply. Contact your TOP Regional Call Center for more information. For contact information, see the *For Information and Assistance* section of this fact sheet.

* Medicare certification for organ transplant centers is only required for transplants performed in the United States and U.S. territories where Medicare is available. TRICARE may cover organ transplants in overseas locations when medically necessary, reasonable, and commonly accepted in the country where the transplant is performed.

COVERED SERVICES, LIMITATIONS, AND EXCLUSIONS

TRICARE covers most medically necessary inpatient and outpatient care that is considered proven. There are special rules and limitations for certain types of care, and some types of care are not covered at all.

TRICARE policies are specific about which services are covered and which are not. It is in your best interest to take an active role in verifying coverage. Visit www.tricare.mil/coveredservices for additional information about covered services and benefits.

In general, TRICARE excludes services and supplies that are not medically or psychologically necessary for the diagnosis or treatment of a covered illness (*including behavioral health disorders*) or injury, or necessary for the diagnosis and treatment of pregnancy or well-child care. All services and supplies related to non-covered conditions or treatments, or provided by unauthorized providers, are excluded.

For a list of medical, surgical, and behavioral health care services that may not be covered unless exceptional circumstances exist, visit www.tricare.mil/coveredservices/exclusions.aspx.

TRICARE PHARMACY PROGRAM

The Philippine Demonstration does not pertain to pharmacy services. TRICARE offers comprehensive prescription drug coverage and several options for filling prescriptions. In the Philippines, prescriptions will only be cost-shared when purchased at TRICARE-certified retail pharmacies or TRICARE-certified hospital-based pharmacies. Medications purchased at your health care provider's office will not be cost-shared by TRICARE.

Visit <u>www.tricare-overseas.com/philippines.htm</u> to find certified pharmacy providers where you live.

While visiting the United States or U.S. territories, you may fill prescriptions at military pharmacies, through TRICARE Pharmacy Home Delivery, or at TRICARE retail network or non-network retail pharmacies.*

Note: Mercury Drug, Rose Pharmacy, and Watsons Pharmacy are certified at their corporate level. Beneficiaries should confirm valid pharmacy locations through the corporate Web sites of Mercury Drug at www.mercurydrug.com, Rose Pharmacy at www.rosepharmacy.com, and Watsons Pharmacy at www.watsons.com.ph. Beneficiaries can use other pharmacies as well, as long as they are certified.

- Manson Drug is no longer certified (as of October 1, 2011).
- South Star Pharmacy is no longer certified (as of November 1, 2011).
- Claims with a date of service before these dates will be honored and processed by the TOP claims processor.
- * Currently, there are no retail network pharmacies in American Samoa or the Northern Mariana Islands.

FILING CLAIMS

Within designated demonstration areas, all care must be received from an approved demonstration provider to ensure your claim is cost-shared, unless you request and receive a waiver from Global 24 Network Services, or an approved specialty waiver is issued in your geographic area. If you do not get care from an approved demonstration provider and there is no applicable waiver, you will be responsible for the full cost of care. For more information about specialty waivers and waiver requests, see the *Waiver Requests and Waiver Appeals* section of this fact sheet.

Beneficiaries may download *DD Form 2642* and instructions from the TRICARE Web site at www.tricare.mil/claims or from the TOP contractor's Web site at www.tricare-overseas.com.

Claims for care received overseas must be filed within three years of the date of service or within three years of the date of an inpatient discharge.

Note: Claims for separately billed professional charges incurred during an inpatient admission must be submitted within three years of the date the service was received, even if that date is before the date you were discharged.

When you are hospitalized and you purchase hospital supplies from a source outside the approved demonstration institution, you may be required to pay for these medical supplies up front and then submit a claim to the TOP claims processor for reimbursement. If this applies, you should note on the claim that such external purchases were related to a hospital stay (*include the dates of hospitalization*) to ensure they are processed as part of the inpatient episode of care, rather than as a separate outpatient charge. Complete a *DD Form 2642*, include proof of payment, and attach a readable copy of the provider's bill, which must include the following:

- · Patient's name
- Sponsor's Social Security number (SSN) or DoD Benefits Number (DBN) (*Eligible former spouses should use their SSNs or DBNs, not the sponsor's.*)
- Provider's name and address (If more than one provider's name is on the bill, clearly circle the name of the person who provided the service. Failing to clearly identify the appropriate provider may delay or prevent claims processing.)
- Date and place of each service
- Description of each service or supply provided
- · Charge for each service
- Diagnosis (If the diagnosis is not on the bill, be sure to complete block 8a on the form.)

Make a copy of your paperwork for your records. Mail your completed paperwork to:

TRICARE Overseas Program P.O. Box 7985 Madison, WI 53707-7985

For more information about filing claims, visit www.tricare.mil/philippines.

Proof of Payment

You must submit proof of payment with your claim. Proof of payment may include a receipt, canceled check, credit card statement, or invoice from the provider that clearly states payment was received. If the invoice does not show how much you already paid, or if your claim is for \$1,000 or more, then you must include a copy of your canceled check, credit card receipt, or electronic funds transfer to show proof of payment.

Always keep a copy of the paperwork for your records. Be sure to use your overseas residential mailing address on the claim form.

Note: You can make a note on your *DD Form 2642* requesting that any additional money owed by the TOP claims processor be mailed to your P.O. box address instead of your physical mailing address.

Review your TRICARE Claims Information Online

Register online at <u>www.tricare-overseas.com/beneficiaries.htm</u> to access secure functions on the TOP Web site including:

- Eligibility query*
- OHI status/update
- Claim status
- Deductible/out-of-pocket expense
- Customer service
- EOB
- * Registering on the secure claims portal online does not affect your eligibility to participate in the Philippine Demonstration. Eligibility is determined by your physical address listed on health care claims, regardless of the address listed in DEERS.

RECEIVE E-MAIL UPDATES

You can sign up to receive e-mail updates about the Philippine Demonstration at www.tricare.mil/philippines. You may also contact Global 24 Network Services to be added to their e-mail distribution list. For contact information, see the *For Information and Assistance* section of this fact sheet. You may also find other useful resources online at www.tricare-overseas.com/philippines.htm. Sign up to receive e-mail updates about the Philippine Demonstration, the *TRICARE Overseas Program Health Matters* newsletter, and other news updates at www.tricare.mil/subscriptions.

TRAVEL TO THE PHILIPPINES

Beneficiaries who seek care while traveling to the Philippines should select certified providers. Choosing a provider who is not currently certified may put your reimbursement at risk, as TRICARE will only cost-share the claim if the provider is able to meet the certification criteria. To find a certified provider, visit at www.tricare-overseas.com/philippines.htm.

KEEP YOUR DEERS INFORMATION UP TO DATE

It is essential that you keep information in DEERS current for you and your family. Remember to check your DEERS information regularly and update DEERS with your new contact information. Below are several ways to update your contact information in DEERS.

Note: TOP Standard beneficiaries using a Philippine APO/FPO address on *DD Form 2642* for medical care received in Phases I–III designated demonstration areas are required to follow the rules of the Philippine Demonstration to ensure that TRICARE cost-shares their claims.

Phone	• +1-800-538-9552
	• +1-866-363-2883 (<i>TDD/TTY</i>)
Fax	• +1-831-655-8317
Mail	Defense Manpower Data Center Support Office 400 Gigling Road Seaside, CA 93955-6771 USA
Online	• milConnect Web site: http://milconnect.dmdc.mil

FREQUENTLY ASKED QUESTIONS

I live in a Philippine Demonstration area and my provider is on the Philippine Approved/ Certified Provider list. However, he is referring me to a specialist who is not on the Philippine Approved/Certified Provider list. Can I see that non-approved provider? What about ancillary services such as lab work and X-rays?

If you seek health care within a demonstration area, you must use an approved demonstration provider for TRICARE to cost-share your claim; otherwise, you will be responsible for all costs.

Before seeking specialty care, go to the Philippine Approved/ Certified Provider list to find an approved specialist. Find a provider online at www.tricare-overseas.com/philippines.htm. For additional information and assistance in this process, contact:

Global 24 Network Services

• **Phone:** +632-687-8656

• **Philippines toll-free:** +1-800-10-4562324*

• U.S. (*Stateside*) toll-free: +1-877-678-1208, option 7: Philippine Demonstration information

• Fax: +632-687-8609

• E-mail: Support@GLOBAL24NS.com

If you cannot find an approved demonstration provider within the designated demonstration area, or want to see a provider who is not an approved demonstration provider, you must submit a waiver request to Global 24 Network Services. Visit www.tricare-overseas.com/philippines.htm for more information about the waiver-request process.

* Toll-free number only available to callers with Philippine long-distance telephone service. Toll-free number may not be available for mobile phone carriers overseas.

Under the Philippine Demonstration, do I have to pay my cost-shares up front? What if there are additional charges after the procedure/admission?

An approved demonstration provider can request up-front payment of your deductible and cost-share. The overseas claims processor will send you and the provider an EOB showing how the claim was processed; if you overpaid, the overseas claims processor will reimburse you. If there are additional charges and you have met your deductible, the approved demonstration provider should only bill you your cost-share.

If the approved demonstration provider does not require that you pay up front, the provider will bill you for the deductible and cost-share (noted on the EOB) once the claim is processed. (You can check what your payment is if you are registered to view your claims online.)

Go to http://www.tricare-overseas.com/Beneficiaries.htm to register or log in.

What is the benefit of using an approved demonstration provider in a designated demonstration area under the TRICARE Philippine Demonstration?

When you use approved demonstration providers, you:

- · Access providers who offer quality medical care
- May avoid paying the full, up-front cost of expensive services and procedures; instead you will pay only your deductible and cost-share at the time of the visit
 - You and the approved demonstration provider each receive an EOB
 - If the approved demonstration provider does not require up-front payment, he or she collects your deductible and cost-share as noted in the EOB
- Do not have to file claims; approved demonstration providers file claims for you
- Have reduced out-of-pocket costs because approved demonstration providers agree to accept the TRICAREallowable charge as payment in full for covered services

The Philippine Approved/Certified Provider list is available at www.tricare-overseas.com/philippines.htm.

What's the difference between an approved demonstration provider and a certified provider under the Philippine Demonstration?

An **approved demonstration provider** meets the same requirements as a certified provider and complies with Philippine Demonstration reimbursement procedures. An approved demonstration provider also agrees to accept the TRICARE-allowable charge as payment in full, agrees to submit claims for beneficiaries, and may collect applicable deductibles and cost-shares at the time of the visit. You and the approved demonstration provider receive an EOB showing how a claim was processed. If you do not pay up front, the approved demonstration provider bills you for your deductible and cost-shares, which you are required to pay.

A **certified provider** meets TRICARE required on-site verification and provider certification requirements but does not agree to the additional conditions to be an approved demonstration provider. For example, a certified provider in the Philippines requires TRICARE beneficiaries to pay up front for the entire cost of services and file their own claims for reimbursement.

To find a list of approved and certified providers, visit www.tricare-overseas.com/philippines.htm.

Does the Philippine Demonstration apply to pharmacy and dental services?

The Philippine Demonstration does not apply to pharmacy or dental services. Beneficiaries must continue to use certified providers in the Philippines. For the most up-to-date information on the Philippine Demonstration and to find a Philippine approved or certified provider, visit www.tricare-overseas.com/philippines.htm.

I was referred by my approved provider in Pampanga to a specialist in Manila who is also on the approved demonstration provider list, but in Manila. Will TRICARE cost-share this claim under the Philippine Demonstration?

Yes. Regardless of where you live in the Philippines, you can see an approved demonstration provider in **any** designated demonstration area, or you can see a certified provider outside of demonstration areas. When you see an approved demonstration provider in a demonstration area, or if you have a waiver, TRICARE will cost-share the claim. You are still responsible for applicable deductibles and cost-shares related to that TRICARE-covered service.

FOR INFORMATION AND ASSISTANCE

TRICARE Overseas Program (TOP) Regional Call Center—Eurasia-Africa ¹	TOP Regional Call Center—Latin America	TOP Regional Call Centers—Pacific ¹
+44-20-8762-8384 (overseas) 1-877-678-1207 (stateside) tricarelon@internationalsos.com	+1-215-942-8393 (overseas) 1-877-451-8659 (stateside) tricarephl@internationalsos.com	Singapore: +65-6339-2676 (overseas) 1-877-678-1208 (stateside) sin.tricare@internationalsos.com Sydney: +61-2-9273-2710 (overseas) 1-877-678-1209 (stateside) sydtricare@internationalsos.com
milConnect Web site http://milconnect.dmdc.mil	TRICARE Philippine Demonstration www.tricare.mil/philippines www.tricare-overseas.com/philippines.htm	Global 24 Network Services +632-687-8656 +1-800-10-4562324 (Philippines toll-free) ² +1-877-678-1208 (stateside toll-free, select option 7: Philippine Demonstration information) +632-687-8609 (fax) E-mail: Support@GLOBAL24NS.com

- 1. For toll-free contact information, visit <u>www.tricare-overseas.com</u>. Toll-free lines may not be available for all mobile phone carriers overseas.
- 2. The Philippine toll-free number is only available to callers with Philippine long-distance telephone service.

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, TRICARE Service Center, or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.