

TRICARE®

MATERNITY CARE



If you're pregnant, your care and costs are determined by your beneficiary status, how close you live to a military hospital or clinic that provides obstetric and gynecological services, and your choice of TRICARE program and provider.

MATERNITY CARE COVERAGE

TRICARE covers the following maternity care services, if medically necessary:

- Obstetric visits throughout your pregnancy
- Fetal ultrasounds
- Management of high-risk or complicated pregnancies
- Hospitalization for labor, delivery, and postpartum care
- Deliveries at TRICARE-certified/authorized birthing centers or deliveries planned at home (stateside only)
Note: Home births overseas aren't normally covered. Contact your regional contractor for specific guidance.
- Anesthesia for pain management during labor and delivery
- Cesarean sections
- Breast pumps, breast pump supplies, and breastfeeding counseling

Additional childbirth and breastfeeding services (including certain doulas and lactation specialists) are available to TRICARE Prime and TRICARE Select enrollees under the Childbirth and Breastfeeding Support Demonstration. The demonstration is currently available stateside only. Learn more at www.tricare.mil/cbsd.

For more information on covered services, go to www.tricare.mil/coveredservices.

COSTS

Active duty service members (ADSMs) and active duty family members have no costs for maternity care when enrolled in a TRICARE Prime plan.

All others (including those enrolled in TRICARE Select, TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult Select, the Continued Health Care Benefit Program, and retirees, their family members, and all others) have copayments or cost-shares or both. For detailed cost information, go to www.tricare.mil/costs.

Beneficiaries with a TRICARE Prime plan (except for ADSMs) may use the point-of-service (POS) option to self-refer to an obstetrician but will pay higher out-of-pocket costs. For more information about the POS option, go to www.tricare.mil/pointofservice.



GETTING MATERNITY CARE

Your guidelines for getting care vary based on your TRICARE health plan and whether you live stateside or overseas. Maternity care services may require referrals or pre-authorizations or both.

HEALTH PLAN		GUIDELINES
Stateside	TRICARE Prime	If your primary care manager (PCM) is at a military hospital or clinic with maternity care services, the military hospital or clinic will provide your maternity care. If maternity care is unavailable at your military hospital or clinic, your PCM will refer you to a civilian network provider. If you have a civilian PCM, your PCM will direct your maternity care or give you a referral to an obstetrician.
	TRICARE Prime Remote (TPR)	If you have TPR with an assigned PCM, your PCM may direct your care. Otherwise, you may visit a TRICARE-authorized civilian provider with pre-authorization from your regional contractor.
	TRICARE Select, TRICARE Reserve Select (TRS), TRICARE Retired Reserve (TRR), and Continued Health Care Benefit Program (CHCBP)	You may get care from any TRICARE-authorized provider without a referral. Visits to a network provider will cost you less out of pocket, and the provider will file claims for you. With a non-network provider, you may pay more out of pocket and have to file your own claims. Non-network providers may charge up to 15% above the TRICARE-allowable charge, and you're responsible for that amount, in addition to any deductible or cost-shares.
Overseas	TRICARE Prime Overseas and TRICARE Prime Remote Overseas	You should get maternity care from a military hospital or clinic if your PCM is located there. If you aren't located near a military hospital or clinic, or it can't offer you maternity care services, your PCM will give you a referral to a TRICARE-authorized civilian provider in your area. If you have TRICARE Prime Remote Overseas, your TRICARE Overseas Program Regional Call Center will help you coordinate care.
	TRICARE Select Overseas, TRS, TRR, and CHCBP	You may seek care from almost any TRICARE-authorized civilian provider without a referral. Overseas providers aren't required to bill TRICARE on your behalf. You should expect to pay up front for care and submit a claim with proof of payment to get money back. Outside the U.S. and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands), there may be no limit to the amount that nonparticipating non-network providers may bill, and you're responsible for paying any amount that exceeds the TRICARE-allowable charge, in addition to your deductible, cost-shares, and copayments. For more information, visit www.tricare.mil/selectoverseas . Note: If you live in or travel to the Philippines, you're encouraged to visit Philippine Preferred Provider Network (PPN) providers. Your out-of-pocket costs are lower when you use a PPN provider. Learn more at www.tricare-overseas.com/beneficiaries/philippines .
TRICARE Young Adult (TYA)		Young adults who have purchased coverage under TYA follow the rules (including costs and provider choices) of the plan they have—either TYA Prime or TYA Select.
TRICARE Dental Program		During pregnancy, a third cleaning is covered in a 12-month period.

COVERAGE FOR YOUR NEW CHILD

Your new child must be registered in the Defense Enrollment Eligibility Reporting System (DEERS) within 90 days (120 days if overseas) of birth (or adoption or court appointment). To do this, the sponsor must go to a Uniformed Services ID card office and present the child's official birth certificate or FS-240 Consular Report of Birth Abroad, record of adoption, or letter of placement of your child into your home by a recognized placement or adoption agency or the court.



If registered in DEERS after the allotted time period, your child will only be able to get military pharmacy services and care at a military hospital or clinic—if space is available. The sponsor can only enroll the child in an eligible TRICARE plan either after another Qualifying Life Event (QLE) or during the annual TRICARE Open Season. Newborn children of TRS or TRR members can't become qualified for coverage and enroll in TRS or TRR until registered in DEERS. Visit <https://idco.dmdc.osd.mil/idco> to find a Uniformed Services ID card office in your area.

TRICARE Prime® and TRICARE Select®

Once registered in DEERS, a newborn, adopted, or court-appointed child of an ADSM will be automatically enrolled in a TRICARE plan based on where the child lives.

Stateside children of ADSMs are automatically enrolled in TRICARE Prime as long as:

- They're registered in DEERS.
- They live in a stateside Prime Service Area (PSA). If they don't live in a PSA, the child will be automatically enrolled in TRICARE Select.

For children of retirees, there is no automatic enrollment process. Children of retirees must be registered in DEERS within 90 days (120 days if overseas) of birth, adoption, or court appointment, and the family must contact their TRICARE contractor to enroll them in a desired TRICARE plan.

Visit milConnect (<https://milconnect.dmdc.osd.mil>) to confirm your child's enrollment within 90 days of birth, adoption, or court appointment. You may choose to change your child's coverage to another TRICARE plan or US Family Health Plan, if eligible, within 90 days from the date entered in DEERS. After 90 days, you must wait until another QLE or TRICARE Open Season to enroll your child in a different TRICARE plan.

Overseas Enrollment

For ADSMs, once your new child is registered in DEERS, your child will automatically be enrolled in TRICARE Select Overseas. If you want to change or transfer your newborn's enrollment to TRICARE Prime Overseas or TRICARE Prime Remote Overseas, you have 90 days to do so (if eligible and command-sponsored). Otherwise, your child stays in TRICARE Select Overseas.

If the sponsor enrolls the new child in TRICARE Prime Overseas or TRICARE Prime Remote Overseas, coverage is backdated to the date of birth and the family may ask the TRICARE Overseas Program (TOP) contractor to reprocess any claims that either were denied or should be processed under TRICARE Prime Overseas or TRICARE Prime Remote Overseas.

Retirees have 120 days from the date of birth (or adoption or court appointment) to register their child in DEERS and enroll them in TRICARE Select Overseas.

TRICARE Reserve Select® and TRICARE Retired Reserve®

Your child will be covered by TRS or TRR if you purchased family coverage, registered him or her in DEERS, and enrolled him or her in TRS or TRR. Submit your child's enrollment form to your regional contractor within 90 days (120 days if overseas) of birth or adoption. For information about covering your child with TRS or TRR family coverage, visit www.tricare.mil/trs or www.tricare.mil/trr.

TRICARE Young Adult

A new child of a TYA member isn't covered by TRICARE unless the child's other parent is a sponsor or the child is adopted by a sponsor. They also won't be able to receive care from a military hospital or clinic.

Continued Health Care Benefit Program

If your child is born, adopted, or court appointed while you have CHCBP coverage, you may not need to register him or her in DEERS. Contact the CHCBP contractor, Humana Military, to enroll your child in the CHCBP. Visit www.tricare.mil/chcbp for more information.

HOW TO ENROLL OR CHANGE ENROLLMENT

Once your child is registered in DEERS, you can enroll or make enrollment changes online, by phone, by mail, or in person at a TRICARE Service Center (overseas only). For details and specific instructions, visit www.tricare.mil/enroll.

RELOCATING DURING YOUR PREGNANCY

If you move and change your address in DEERS, this is a Qualifying Life Event. Visit www.tricare.mil/lifeevents to learn more.

If you have TRICARE Prime and plan to be out of your current area during your pregnancy for more than 30 days, you may either keep your current TRICARE Prime enrollment or transfer your enrollment, if you're eligible for TRICARE Prime in your new location. If you keep your TRICARE Prime enrollment in your original enrolled location, you need to coordinate with your PCM to get referrals for non-emergency health care services in the location you're visiting. To transfer your enrollment, contact your regional contractor.

Overseas, different rules apply. Contact your TOP Regional Call Center for guidance.

If you're using TRICARE Select or TRICARE Select Overseas, you may get care from any TRICARE-authorized provider (unless local country restrictions apply) in your new location without a referral.

IF YOU LOSE TRICARE ELIGIBILITY

You may lose TRICARE eligibility, including maternity coverage, for various reasons related to life events and sponsor status changes. Depending on the reason for losing eligibility, you may qualify for continued coverage under the Transitional Assistance Management Program or CHCBP. The CHCBP requires premium payments. If you're an ADSM who is pregnant at the time of release from active duty, you may also work with your service (unit personnel and military hospital or clinic administrative channels) to determine if you're eligible for ongoing care at a military hospital or clinic.

Visit www.tricare.mil/maternitycare for more information.

LOOKING FOR More Information?

This brochure is **not** all-inclusive. For additional information, please go to www.tricare.mil.

E

TRICARE East Region

Humana Military
1-800-444-5445
HumanaMilitary.com
www.tricare-east.com

W

TRICARE West Region

Health Net Federal Services, LLC
1-844-866-WEST (1-844-866-9378)
www.tricare-west.com

O

TRICARE Overseas Program (TOP)

International SOS
Government Services, Inc.
www.tricare-overseas.com

For toll-free contact information, visit
www.tricare-overseas.com/contact-us

US Family Health Plan

1-800-74-USFHP (1-800-748-7347)
www.tricare.mil/usfhp

Continued Health Care Benefit Program

www.tricare.mil/chcbp

Transitional Assistance Management Program (TAMP)

www.tricare.mil/tamp

Defense Enrollment Eligibility Reporting System (DEERS)

www.tricare.mil/deers

TOP Regional Call Centers

Eurasia-Africa
+44-20-8762-8384 (overseas)
1-877-678-1207 (stateside)
tricarelon@internationalsos.com

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+1-215-942-8393 (overseas)
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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.

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