



Retiring From Active Duty



When you retire from active duty, you must take action to keep your TRICARE coverage. Understanding your TRICARE options will help you and your family members make the best health care decisions.

WHAT STAYS THE SAME?

After retirement, some parts of your TRICARE benefit will stay the same:

- You remain eligible for care and the use of the pharmacy at military hospitals and clinics.
- Your TRICARE benefit is still portable. When you move or travel, TRICARE coverage goes with you.
- You can still use the TRICARE Pharmacy Program.

WHAT CHANGES?

After retirement, you'll have these changes with TRICARE:

- Your TRICARE status changes, so you and your family members will need to get new Uniformed Services ID cards.
- You'll need to take action to enroll in a TRICARE health plan if you want coverage for civilian care.
- You'll pay retiree costs for care.
- You'll no longer have coverage for certain services, like those provided under the Extended Care Health Option for active duty family members.
- If you're eligible for Medicare Part A, you must have Part B to keep TRICARE coverage.

WHAT ACTIONS DO I NEED TO TAKE?

1. Update your information in the Defense Enrollment Eligibility Reporting System.
2. Update your Uniformed Services ID card.
3. If you're eligible for Medicare Part A, sign up for Part B before you retire.
4. The next steps depend on which plans you want to use. Sponsor and family members don't have to be in the same plan:
 - **TRICARE Prime:** Reenroll yourself and eligible family members within 90 days of retirement to avoid a gap in coverage and claims processing.
 - **TRICARE Select:** Enroll yourself and eligible family members within 90 days of retirement to avoid a gap in coverage and claims processing.
5. Pay the single or family enrollment fee.

Note: Enrollment requests received up to 12 months from retirement date will be accepted if enrollment fees are paid. Claims for the period of lapsed coverage will be reprocessed upon request.

Other program options: See the *Other TRICARE Program Options After Retirement* section.



Options for You and Your Family Members After Retirement

Before Age 65

- TRICARE Prime**
- US Family Health Plan**
- TRICARE Select**
- TRICARE For Life** (if you're eligible for Medicare Part A and have Part B)
- TRICARE Retired Reserve** (up to age 60)
- TRICARE Select Overseas**
- TRICARE Plus**

ECHO services for families with special needs aren't available in retirement. For more information, contact your ECHO Case Management Department.

Age 65 and After

- TRICARE For Life**
(If you're eligible for Medicare Part A based on the eligibility age of 65 and have Part B. See the *Other TRICARE Program Options After Retirement* section for more information.)

- TRICARE Plus**
(Those eligible for Medicare and enrolled in TRICARE Plus won't be eligible for TRICARE-covered civilian care unless they also have Medicare Part A and Part B.)

TRICARE Coverage in Retirement

If you want TRICARE Prime or TRICARE Select with no break in coverage, you must enroll in an eligible plan within 90 days of your retirement date. The effective date of coverage will be the date you retire. **Note:** TRICARE Prime is only available in certain stateside areas. It isn't available overseas.

If you don't enroll in TRICARE Prime or TRICARE Select within 90 days of retirement, you may request a retroactive enrollment within 12 months of your retirement date. Coverage is effective from the date of the sponsor's retirement. If applicable, you'll need to pay enrollment fees back to your retirement date.

If you don't enroll within 90 days of your retirement date or request retroactive enrollment, you can only enroll in a TRICARE plan during TRICARE Open Season or after you or a family member experiences a TRICARE Qualifying Life Event. Until then, you'll only be eligible for care at military hospitals and clinics, if space is available. For more information, visit www.tricare.mil/openseason and www.tricare.mil/lifeevents.

How To Enroll

You can enroll online, by phone, or by mail. Visit www.tricare.mil/enroll for more details.

Note: When a retiree or retiree family member becomes individually eligible for Medicare Part A, that individual isn't eligible to enroll in TRICARE Select. However, the individual may be eligible to enroll in TRICARE Prime if their Medicare eligibility isn't based on age. Generally, when a retiree or retiree family member becomes individually eligible for Medicare Part A and enrolls in Part B, they're automatically eligible for TRICARE For Life.

Getting Care With TRICARE Prime®

Routine

Your primary care manager will provide or arrange your routine care. You may enroll with a PCM at a military hospital or clinic, if space is available. Otherwise, your PCM may be a civilian provider.

Specialty

Your PCM may refer you to a military or civilian provider for specialty care. Military hospitals and clinics in Prime Service Areas have the right of first refusal to deliver TRICARE Prime specialty care. Some services may require pre-authorization. Learn more at www.tricare.mil/referrals.

Costs

As a retiree, you pay a yearly TRICARE Prime enrollment fee (unless you have Medicare Part B). You'll pay copayments or cost-shares when you get care from TRICARE-authorized civilian providers. Point-of-service fees will apply if you get care without a referral from your PCM. POS fees don't apply if you have other health insurance. If you have OHI, it pays before TRICARE.

Getting Care With TRICARE Select®

Routine

You'll see your preferred primary care provider or the TRICARE-authorized provider of your choice for routine care.

Specialty

In most situations, you don't need a referral or pre-authorization for specialty care. You may see the TRICARE-authorized provider of your choice.

Costs

As a retiree, you may pay a yearly TRICARE Select enrollment fee.* Your deductible, copayments, or cost-shares will apply when you get care from TRICARE-authorized civilian providers. You'll have lower out-of-pocket costs if you use a TRICARE network provider versus a non-network TRICARE-authorized provider. If you choose a non-authorized non-network provider, TRICARE won't reimburse you. If you have OHI, it pays before TRICARE.

*To see costs for medically retired service members, go to www.tricare.mil/costs.

Other TRICARE Program Options After Retirement

US Family Health Plan

The US Family Health Plan is a TRICARE Prime plan administered by not-for-profit healthcare systems in six designated service areas in the U.S. They cover care exclusively through their own provider and pharmacy networks. With USFHP, you can't get care at military hospitals, clinics, or pharmacies. However, you can get emergency care at military emergency departments. To enroll in USFHP, you must live in one of the designated service areas. You must be under age 65 to enroll in USFHP. For more information, visit www.tricare.mil/usfhp.

TRICARE For Life

TRICARE For Life is Medicare-wraparound coverage for TRICARE beneficiaries who are eligible for Medicare Part A and have Part B, regardless of age or where you live. Your TFL coverage begins the first day that your Medicare Part A and Part B coverage are effective. There are no enrollment forms or enrollment fees for TFL. Once you have both Medicare Part A and Part B, you automatically receive TRICARE benefits under TFL. If you're eligible for premium-free Medicare Part A, you must also have Part B to keep TRICARE. For Medicare details, visit www.medicare.gov. For Medicare enrollment information, visit www.ssa.gov. For more details, visit www.tricare.mil/tfl.

TRICARE Young Adult

Children who lose TRICARE coverage due to age may qualify to purchase premium-based TRICARE Young Adult coverage up to age 26. Children who were enrolled in TYA when you retired may need to reenroll. For more information about TYA-Prime and TYA-Select, visit www.tricare.mil/tya.

TRICARE Retired Reserve®

TRICARE Retired Reserve is a premium-based health plan available for purchase by qualified members of the Retired Reserve until reaching age 60. TRR provides coverage and costs similar to TRICARE Select, but TRR beneficiaries must also pay monthly premiums in addition to copayments, cost-shares, and deductibles. If you have TRR, you may get care from any TRICARE-authorized provider, unless overseas restrictions apply. You may get care at military hospitals and clinics, if space is available. For TRR details, visit www.tricare.mil/trr.

TRICARE Select Overseas

TRICARE Select Overseas is an option for retired service members, their eligible family members, and certain others living overseas. You may get care at military hospitals and clinics, if space is available. It's similar to TRICARE Select in the U.S., including copayments or cost-shares and an annual deductible. TRICARE Prime Overseas and TRICARE Prime Remote Overseas aren't available to retirees or retiree family members. For more information about TRICARE Select Overseas, visit www.tricare.mil/selectoverseas. Additional rules apply in the Philippines. Visit www.tricare-overseas.com/beneficiaries/philippines for more information.

Your TRICARE Benefit and the Affordable Care Act

Most TRICARE plans meet the Affordable Care Act requirement for minimum essential coverage. You'll get an Internal Revenue Service Form 1095 from your pay center each January listing the coverage you had during the previous tax year. For more information, visit www.tricare.mil/aca.

TRICARE Plus

TRICARE Plus is a primary care program offered at some military hospitals and clinics. You must enroll to participate. Your enrollment is only for the hospital or clinic where you enroll. Contact your local military hospital or clinic to learn if TRICARE Plus is an option for you. Visit www.tricare.mil/plus for more information.

WHAT IS MY PHARMACY BENEFIT?

If you have a TRICARE health plan, you have pharmacy coverage.* You may fill prescriptions through:

- Military pharmacies
- TRICARE Pharmacy Home Delivery (some limitations overseas)
- TRICARE retail network pharmacies (only available in the U.S. and U.S. territories, except for American Samoa)
- Non-network pharmacies



Voluntary Dental and Vision Coverage

Retired service members and family members may qualify to purchase dental coverage through the Federal Employees Dental and Vision Insurance Program, offered by the U.S. Office of Personnel Management.

You may also qualify to purchase vision coverage through FEDVIP if you're enrolled in a TRICARE health plan.

For more information, visit www.benefeds.gov.

Your options for filling prescriptions depend on the type of drug your provider prescribes and where you live. Most retirees and their eligible family members are required to fill certain maintenance drugs using home delivery.

For TRICARE Pharmacy Program details and cost information, visit www.tricare.mil/pharmacy.

** If you're enrolled in USFHP, you aren't eligible for the TRICARE Pharmacy Program. You must use USFHP pharmacy providers.*

LOOKING FOR More Information?

E

TRICARE East Region
Humana Military
800-444-5445
www.tricare.mil/east

W

TRICARE West Region
TriWest Healthcare Alliance
888-TRIWEST (888-874-9378)
www.tricare.mil/west



TRICARE For Life
www.tricare.mil/tfl
WPS Government Services
866-773-0404
www.TRICARE4u.com

O

TRICARE Overseas Program
International SOS
Government Services, LLC
www.tricare-overseas.com
For toll-free contact information, visit www.tricare-overseas.com/contact-us.

TRICARE Prime
www.tricare.mil/prime

TRICARE Select
www.tricare.mil/select

US Family Health Plan
www.tricare.mil/usfhp

TOP Regional Call Centers

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

Latin America and Canada
+1-215-942-8393 (overseas)
877-451-8659 (stateside)
tricarephl@internationalsos.com

Pacific
+65-6339-2676 (overseas)
877-678-1208 (stateside)
sin.tricare@internationalsos.com

TRICARE Retired Reserve
www.tricare.mil/trr

TRICARE Young Adult
www.tricare.mil/tya

Defense Enrollment Eligibility Reporting System
www.tricare.mil/deers

An Important Note About TRICARE Program Information
At the time of publication, this information is current. It's 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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