



HEALTH MATTERS

A PUBLICATION FOR TRICARE® BENEFICIARIES

TRICARE Open Season Begins Nov. 8; Prepare Now for 2022 Enrollment Changes

It's almost TRICARE Open Season, and now is the time to consider whether you or your family members want to make changes to your current health coverage.

“Open season gives you a chance to assess your plan and, if you choose to do so, make changes for 2022 coverage,” said Debra Fisher, program analyst with the Policy and Programs Section of the TRICARE Health Plan at the Defense Health Agency. “This chance only comes around once a year, unless you experience a Qualifying Life Event, so don't miss this opportunity.”

As you get ready for open season, you may have questions. We've got answers.

When is open season?

TRICARE Open Season begins Monday, Nov. 8 and ends Monday, Dec. 13. Enrollment changes made during this period will take effect on Jan. 1, 2022.

Who can participate in open season?

TRICARE Open Season applies to anyone enrolled in or eligible for TRICARE Prime, including the US

Family Health Plan, or TRICARE Select. TRICARE Open Season doesn't apply to active duty service members.

What changes can be made during open season?

Eligible beneficiaries may enroll in or change their or their family member's TRICARE Prime or TRICARE Select health plan.

If you're eligible to take part in open season, you have three choices:

- **Stay in your plan.** If you want to stay in your current TRICARE health plan, you don't have to take any action. You'll continue in your current health plan through 2022—or as long as you're eligible.
- **Enroll in a health plan.** If you're eligible for TRICARE Prime or TRICARE Select but not enrolled, you can enroll in either health plan.
- **Change health plans.** If you're already enrolled in a TRICARE Prime option or TRICARE Select, you can switch health plans and switch between individual and family enrollment.

(Continued on page 2)



ISSUE 3 | 2021

ISSUE HIGHLIGHTS

Enroll or Change FEDVIP Plans Starting Nov. 8, page 2

Partner with Your Provider for Life-Long Well-Being, page 3

How TRICARE Works When You Have Other Health Insurance, page 4

How TRICARE Prime and TRICARE Select Differ, page 5

Setting Your Communication Preferences is Now Easier than Ever, page 6

New Telemedicine Options Available at No Cost, page 7

FAQ Corner, page 8

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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. Most TRICARE plans meet the Affordable Care Act requirement for minimum essential coverage.

Enroll or Change FEDVIP Plans Starting Nov. 8

The Federal Benefits Open Season begins on Monday, Nov. 8. If you're eligible for dental or vision coverage through the Federal Employees Dental and Vision Insurance Program (FEDVIP), don't miss your chance to enroll in or change your FEDVIP dental or vision plan. Your eligibility for a FEDVIP plan depends on your beneficiary status. You'll also need to be enrolled in a TRICARE health plan to be eligible for vision coverage. Keep in mind, FEDVIP dental and vision plans are separate and you may or may not qualify for both. Visit www.benefeds.com to check your eligibility, as well as compare FEDVIP plans and rates, enroll in a plan, and more.

Outside of open season, you can only enroll in or make changes to your existing FEDVIP plan if you're newly eligible or experience a FEDVIP Qualifying Life Event (QLE). These may differ from TRICARE QLEs.

If you're currently enrolled in a plan and don't want to make a change, you don't have to do anything. Although your current FEDVIP plan will continue next year as long as you remain eligible, you should still check to make sure you understand any changes to your plan and plan costs for the next year. ★

(Continued from page 1)

Can I still enroll or change plans after open season?

Outside of TRICARE Open Season, you can only enroll in or make these changes to TRICARE Prime or TRICARE Select enrollment following a Qualifying Life Event (QLE). A QLE is a certain change in your life, such as marriage or retirement, which opens a 90-day period for you to make eligible enrollment changes for you and your family members.

How do I enroll or change plans?

You can enroll or change your stateside health plan online, by phone, or by mail. For more information, go to www.tricare.mil/enroll.

Does open season apply to all TRICARE plans?

No. TRICARE Open Season doesn't apply to TRICARE For Life (TFL). TFL coverage is automatic if you have Medicare Part A and Part B. It also doesn't apply to these premium-based health plans that offer continuous open enrollment:

- TRICARE Reserve Select
- TRICARE Retired Reserve
- TRICARE Young Adult
- Continued Health Care Benefit Program (CHCBP)

Note: You can only purchase CHCBP coverage within 60 days of loss of eligibility.

To learn more, visit www.tricare.mil/openseason. Find information about plans in the *TRICARE Plans Overview* at www.tricare.mil/publications. You can also use the TRICARE Plan Finder (www.tricare.mil/planfinder) and Compare Costs Tool (www.tricare.mil/comparecosts). ★

Partner with Your Provider for Life-Long Well-Being

Your well-being is your provider's top priority. When you work in partnership with your provider, you can get the most out of your benefit and stay healthy. We asked providers what they want their patients to know about getting the most out of the provider-patient relationship. Here are some of their answers:

- **Providers often run behind.** Your time is valuable, and providers know that waiting can be frustrating. They also want to make the most of each visit, which can result in additional time with patients. They want a patients to feel relaxed and not rushed during a visit.
- **Build trust with your provider.** Strong relationships are built on a foundation of trust. Once established, you'll feel more at ease asking your provider questions about health concerns, medications, or treatment. Open communication is necessary for both patients and providers.
- **Many types of providers can offer quality care.** The demand for providers is outgrowing the rate of trained physicians. You can choose to work with nurse practitioners (NP), physician assistants (PA), mid-level providers, physician extenders, or allied health professionals. NPs and PAs work in a multidisciplinary team with your doctor. Choosing providers other than physicians can bridge the gap between physician shortage and patient demand.
- **Teamwork is key.** You and your provider are a team, and your well-being is the priority. Providers sometimes must share news that you don't want to hear. They are there to encourage and champion your health. If you and your provider show equal effort and partnership, you can reach the desired outcomes together.
- **Reserve some empathy.** A provider's focus may be on saving lives. At the end of the day. However, they're people too. Navigating health care can be stressful and expensive for patients. But remember that your provider is your teammate, advocate, and partner, committed to giving you the best care and advice possible. ★



Manage Your Prescriptions Using the Express Scripts Mobile App

Looking for a fast and easy way to manage your prescriptions? Visit the Apple App Store or Google Play app store to download the Express Scripts mobile app. You can also visit www.express-scripts.com/mobileapp/index.html.

This free app lets you manage your TRICARE pharmacy benefit when you're at home or on the go. To get started, simply log in with your TRICARE Express Scripts username and password. If you don't have an account, you can register for one online at <https://militaryrx.express-scripts.com>.

Once you've signed in on your phone, you can securely:

- Order refills or renewals
- Pay bills
- Set automatic refills
- Manage medications

If you're eligible, you can also request to move any eligible prescription you take on a regular basis to TRICARE Pharmacy Home Delivery (www.tricare.mil/homedelivery). Take command of your TRICARE pharmacy benefit, and get the medications and care that you need. ★

How TRICARE Works When You Have Other Health Insurance

Did you know you can use other health insurance (OHI) with your TRICARE coverage?

OHI is health insurance you have in addition to TRICARE. It can be Medicare, health insurance you get through your employer, or a private insurance program. OHI is your primary insurance and it works with TRICARE to coordinate your health care benefits.

“OHI must be used before TRICARE,” said Valerie Palmer, management and program analyst for the Policy and Programs Section of the TRICARE Health Plan at the Defense Health Agency. “That means any claims you have must be filed and processed with your OHI before TRICARE can consider the charges. If TRICARE receives your claim before your OHI processes it, TRICARE will deny it.”

Keep in mind, if you’re using Medicaid, TRICARE supplements, or certain state or federal programs, TRICARE is the primary payer.

How do I report a change in OHI?

Whenever you gain or lose OHI, tell your TRICARE contractor, pharmacy, and doctor about the change. This will help them coordinate your benefits for payment by both OHI and TRICARE. It will also prevent any claim delays or denials. TRICARE becomes the primary payer when you lose OHI.

Report changes to your OHI with one of the below methods:

- **Online:** Go to your TRICARE contractor’s website (www.humanamilitary.com), sign in with your DS Logon, and update your OHI information.
- **By phone:** Call your TRICARE contractor.
- **By mail or fax:** Go to www.tricare.mil/formsclaims/forms/ohi to fill out and submit your TRICARE contractor’s OHI form.
- **In person:** Visit your local military hospital or clinic, or a RAPIDS ID Card Office (<https://idco.dmdc.osd.mil/idco>).

What are my health plan options after my OHI changes??

As outlined in the *TRICARE Qualifying Life Events Fact Sheet* (www.tricare.mil/publications), a change in OHI status, such as gaining or losing OHI, is a Qualifying Life Event (QLE). This gives you 90 days to make eligible enrollment changes to your TRICARE plan. For example, you may choose to switch from TRICARE Prime to TRICARE Select. Visit www.tricare.mil/lifeevents to learn more about your options after a QLE.

Whether you’ve gained or lost OHI, be sure to report your OHI status and follow your plans’ rules. This will help you get the care you need and ensure your claims are processed without issue. For more on OHI, go to www.tricare.mil/ohi. ★



How TRICARE Prime and TRICARE Select Differ

Each open season gives you an opportunity to assess your and your family’s health care needs and current TRICARE plans, and then decide if you want to change plans.

Look into which TRICARE plans you may be eligible for based on your sponsor’s status. Ask yourself:

- How much does the plan cost?
- Do you want to pick your own health care provider?
- Do you expect any big life changes in the next year?

Consider these types of questions to make the best decisions for your family.

You can learn which plans you’re eligible for based on sponsor status and where you live at www.tricare.mil/planfinder. Compare plans and costs using TRICARE tools at www.tricare.mil/compareplans and www.tricare.mil/comparecosts.

Use this chart to compare some of the key features of TRICARE Prime and TRICARE Select. ★



TRICARE PRIME	TRICARE SELECT
A health maintenance organization, or HMO, style plan available when living in a stateside Prime Service Area	A preferred provider organization, or PPO, style plan available when living anywhere stateside
Get most of your care coordinated through your primary care manager	Manage your own health care and choose your own TRICARE-authorized providers
Referrals required for specialty care and certain other services	Referrals not required for most services
Pre-authorization for some services	Pre-authorization for some services
Get care from an established network of doctors and other health care providers	Seek care from any TRICARE-authorized provider. However, you pay higher out-of-pocket costs if you get care outside the established network of providers
No deductible applies. Copayments apply for beneficiaries, except active duty service members and their family members	Deductible, copayments, and cost-shares apply

Setting Your Communication Preferences is Now Easier than Ever

As Humana Military moves more communications to electronic formats, you can use beneficiary self-service to choose how you want to get your communications. Confirm or update your communication preferences, and provide your current email address. You can also submit your phone number and consent to get information by text. This will help you stay up to date with the latest information.

Use your existing Department of Defense Self-Service Logon (DS Logon) or create your own account at www.humanamilitary.com to view, research, and interact with many aspects of your health care. Engage with beneficiary self-service to stay informed. ★

Update DEERS to Maintain Coverage

Are you looking to get the most out of your TRICARE coverage? It starts with keeping your information up-to-date in the Defense Enrollment Eligibility Reporting System (DEERS). DEERS records show your and your family's eligibility for TRICARE and helps you get the care you need. You'll need to update your DEERS info anytime you or a family member experiences a Qualifying Life Event, like marriage, moving, or birth of a child.

You can make DEERS updates using one of the following options:

- **Online:** Log in to milConnect at <https://milconnect.dmdc.osd.mil>.
- **Phone:** Call 1-800-538-9552 (TTY/TDD: 1-866-363-2883) or fax updates to 1-800-336-4416.
- **In person:** Visit a local RAPIDS ID Card Office. Find an office near you at <https://idco.dmdc.osd.mil/idco>.
- **Mail:** Mail updates to:
Defense Manpower Data Center Support Office
Attention: COA
400 Gigling Road
Seaside, CA 93955-6771

Visit www.tricare.mil/deers to learn more about DEERS. ★



New Telemedicine Options Available at No Cost

TRICARE is evolving and discovering different and innovative ways to help you in your health care journey. New telemedicine options allow you to receive necessary services through interactive audio/video technology. Meet with a provider in a convenient, private setting without having to leave your home.

For some, referrals may apply. Active duty service members (ADSM) always need a referral before getting care under the telemedicine benefit. TRICARE Prime active duty family members and retirees don't need a referral or authorization. All others enrolled in TRICARE Prime or TRICARE Select don't need a referral or authorization for covered telemedicine services.

Telemedicine options at Humana Military now include:

- **Provider locator.** This locator helps you find network providers who offer telemedicine/telemental health. Filter

your search to show telemedicine providers, shown by a green "Telemedicine" indicator.

- **Doctor on Demand.** Urgent care and behavioral health services (excludes tele-psychiatry). Doctor On Demand is a pilot program and not currently available to ADSMs.
- **Telemetrynd.** Behavioral health services, psychology, and psychiatry (Medicine Assisted Treatment, Substance Use Disorder, and Applied Behavioral Analysis services excluded). This option isn't available in all states. Contact Telemetrynd at **1-866-991-2103** for more information about your state.

Telemedicine services don't include texting, and not all services are available through telemedicine. For more information, visit <https://www.humanamilitary.com/telemedicine>. ★

Need to Talk? WE'RE HERE FOR YOU.

THE MILITARY HEALTH SYSTEM OFFERS MANY MENTAL HEALTH RESOURCES.
REMEMBER, YOU ARE NOT ALONE.

<p>TRICARE Mental Health Coverage See what's covered and how to make an appointment at: www.tricare.mil/MentalHealth</p>	
<p>Military Crisis Line 1-800-273-8255, option 1 http://veteranscrisisline.net</p>	<p>Psychological Health Resource Center 1-866-966-1020 www.health.mil/PHRC</p>
<p>InTransition Program 1-800-424-7877 www.health.mil/inTransition</p>	<p>Real Warriors Campaign www.health.mil/RealWarriors</p>





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CHECK THIS OUT...

Open season will take place from Nov. 8 to Dec. 13

TRICARE Open Season begins on Nov. 8. Find out what this means for you and what you can do to prepare.

See page 1.

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How do I find a network doctor?

You can find a network provider in your area with the Find a Doctor Tool (www.tricare.mil/finddoctor). You can access provider directories in the left sidebar or at www.tricare.mil/networkproviders. A network provider may minimize your out-of-pocket costs. And when using TRICARE Select, you have a choice of providers.

How can I learn about the latest TRICARE news and changes to coverage?

Have you visited the TRICARE Newsroom? Think of it as your one-stop source for everything TRICARE. From COVID-19 news to TRICARE coverage changes, the newsroom can help you get the information you need. Go to <https://newsroom.tricare.mil> and make sure you bookmark it. Sign up at www.tricare.mil/subscriptions to have updates sent automatically by email to you. ★



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