



# HEALTH MATTERS

A PUBLICATION FOR TRICARE® BENEFICIARIES

## Prepare for 2021 Enrollment, TRICARE Open Season Begins

**Open season is almost here. Now is the time to consider whether you or your family members want to make changes to your current health, dental, and vision plan coverage.**

TRICARE Open Season and the Federal Benefits Open Season begin Nov. 9 and end Dec. 14. Enrollment choices made during this period will take effect on Jan. 1, 2021. (See “Federal Benefits Open Season Begins Nov. 9” on page 3.)

TRICARE Open Season applies to anyone enrolled in or eligible for TRICARE Prime, including the US Family Health Plan (USFHP), or TRICARE Select. Note that TRICARE Open Season doesn’t apply to active duty service members (ADSMs). During open season, eligible beneficiaries may enroll in or change their or their family member’s TRICARE Prime or TRICARE Select health plan.

“Your health coverage needs may change from year to year,” said Mark Ellis, chief of the Policy and Programs Section of the TRICARE Health Plan with the Defense Health Agency. “Open season gives you a chance to assess your plan and, if you

choose to do so, make changes for the upcoming year.”

If you’re eligible to take part in open season, you have three choices for 2021 coverage:

- **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 2021, or as long as you’re eligible. (Note: If you’re a Group A retiree enrolled in TRICARE Select, you may still have to take action. See “TRICARE Select Enrollment Fees Begin Jan. 1” on page 2.)
- **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 TRICARE Prime (including USFHP) or TRICARE Select, you can switch health plans and switch between individual and family enrollment.

Outside of TRICARE Open Season, you can only enroll in or make these changes following a Qualifying Life Event (QLE). (Read “TRICARE Qualifying Life Events: What You Need to Know” on page 5.)

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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.

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If you choose to enroll in a health plan or change a health plan, you have three options:

- **Online** (preferred method). Log in to milConnect at <https://milconnect.dmdc.osd.mil> and click on “Benefits.” Then select “Beneficiary Web Enrollment (BWE)” from the menu. You may only enroll or make changes to stateside health plans.
- **By phone.** Call Health Net Federal Services, LLC.
- **By mail.** Mail your enrollment form to your regional contractor. Find forms and mailing addresses at [www.tricare.mil/forms](http://www.tricare.mil/forms).

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 premium-based health plans. These health plans offer continuous open enrollment and include:

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

Learn more about TRICARE Open Season at [www.tricare.mil/openseason](http://www.tricare.mil/openseason). ★

## TRICARE Select Enrollment Fees Begin Jan. 1

Starting on Jan. 1, 2021, TRICARE Select Group A retirees must pay monthly enrollment fees in order to maintain their TRICARE health coverage. You must set up an enrollment fee payment to avoid a break in coverage.

The monthly enrollment fees are:

- **Individual plan:** \$12.50 per month or \$150 annually
- **Family plan:** \$25 per month or \$300 annually

“In 2021, some TRICARE beneficiaries will pay enrollment fees for the first time, a change mandated by Congress,” said Dr. Danita Hunter, director of the TRICARE Health Plan at the Defense Health Agency. “We’re communicating this well before the change is implemented so beneficiaries can be informed about the change, as well as their TRICARE plan and cost options.”

You're in Group A if your initial enlistment or appointment or that of your uniformed services sponsor began before Jan. 1, 2018. Active duty family members enrolled in TRICARE Select will experience no change, and won't pay enrollment fees. This change doesn't apply to survivors of deceased active duty service members or medically retired retirees and family members. This doesn't apply to you if you use TRICARE Prime, TRICARE For Life, or a premium-based plan.

Visit [www.tricare-west.com](http://www.tricare-west.com) to set up payment. Contact Health Net Federal Services, LLC. by Nov. 20 to set up your automatic payments. If you wait until after Nov. 20, you may have to pay for one or more months up front to avoid a break in coverage. For areas where US Family Health Plan is offered, visit [www.usfhp.com/enroll-today-2](http://www.usfhp.com/enroll-today-2).

If you fail to pay your enrollment fees by Dec. 31, 2020, you'll be disenrolled from TRICARE Select. You'll have 180 days from your last paid-through date to request reinstatement. You're also responsible for past enrollment fees.

If you get your retirement or other pay from a military pay center, you'll pay your TRICARE Select fees via a monthly allotment, where feasible. If you don't get your retired pay through a military pay center or if your pay doesn't cover the monthly enrollment fee, you'll pay your fees by a recurring credit or debit card transaction. You can also pay your monthly fees through electronic funds transfer (EFT). Your EFT must be from a U.S. bank.

For updates, visit [www.tricare.mil/selectenrollmentfees](http://www.tricare.mil/selectenrollmentfees). ★

# Federal Benefits Open Season Begins Nov. 9

## Enroll in or Make Changes to Your FEDVIP Plans

Your chance to enroll in the Federal Employees Dental and Vision Insurance Program (FEDVIP) or make changes to your existing plan is during the Federal Benefits Open Season. This year, Federal Benefits Open Season runs from Nov. 9 to Dec. 14. Your coverage will start on Jan. 1, 2021. This is a separate enrollment from TRICARE Open Season.

If you're already enrolled in a FEDVIP dental and/or vision plan and you don't want to make a change, your enrollment will automatically continue in 2021.

Those eligible for FEDVIP dental coverage include:

- Retired service members and their eligible family members
- Retired Reservists and their eligible family members
- Certain survivors
- Medal of Honor recipients and their immediate family members and survivors

You may be able to purchase FEDVIP vision coverage if you're enrolled in a TRICARE health plan or you have TRICARE For Life.

Adult children enrolled in or eligible for TRICARE Young Adult aren't eligible for FEDVIP. Service members and their eligible family members covered by the Transitional Assistance Management Program are also ineligible.

For more information, visit [www.benefeds.com](http://www.benefeds.com). ★



## HIPAA Rights Protect You

The Health Insurance Portability and Accountability Act (HIPAA) established national standards to protect patient health information. HIPAA requires providers to inform patients of privacy standards and their rights when it comes to their protected health information.

Health plans and covered health care providers must develop and distribute a Notice of Privacy Practices (NoPP) that provides a clear explanation of these rights and practices. The NoPP makes you aware of privacy issues and concerns, encourages you to exercise your rights, and prompts you to have discussions with your health care plan administrators and health care providers.

The Military Health System (MHS) NoPP explains:

- How the MHS will use your protected health information (PHI)
- When and where the MHS may disclose your PHI
- How to limit where the MHS will disclose your PHI
- How the MHS will protect your PHI

You can read the NoPP online in several languages at [www.health.mil/nopp](http://www.health.mil/nopp). It's also available in paper copy at your military hospital or clinic. You may ask for a copy at your next appointment, or call and request a mailed copy. ★

# Your Options for Getting Health Care this Fall

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Since March, military hospitals and clinics adjusted policy and procedures to keep you safe during the national health emergency due to the coronavirus pandemic. After a pause in the spring, routine appointments and elective surgeries have generally resumed but may vary depending on location. Be sure to check with your local health care provider or facility.

“Now’s the time to pencil these services back into your calendar,” said Dr. James Black, medical director of the Clinical Support Division at Defense Health Agency. “They can help identify and treat potential health issues before becoming serious.”

## Consider Telemedicine

The Centers for Disease Control and Prevention encouraged providers to tweak methods of health care delivery to support social distancing, preserve personal protective equipment, and minimize patient surges in facilities. Telemedicine is a way that you may be able to meet with your TRICARE-authorized provider while also reducing patient and staff contact.

Using a computer or smartphone, you connect with your provider by secure video conferencing. Some services include office visits, and preventive or telemental health screenings.

Ask your provider if they offer telemedicine services, because not all do. Depending on your plan, you may need an authorization or referral first. Ask your regional contractor for help. Learn more about telemedicine services at [www.tricare.mil/telemedicine](http://www.tricare.mil/telemedicine).

## Call the Military Health System Nurse Advice Line

If you aren’t clear whether your nonemergency injury or illness requires urgent care or you have a health-related question or concern, you can contact the Military Health System Nurse Advice Line 24/7. A registered nurse can help you if you’re uncertain about the care you need. They can also help direct you to the appropriate care. Visit [www.mhsnurseadvice.com](http://www.mhsnurseadvice.com) to chat or video chat with a nurse. In the U.S., Guam, or Puerto Rico, you can also call 1-800-874-2273 and choose option 1.

## Seek Urgent Care

Urgent care might be an option for you if you need care quickly, typically 24 hours before it becomes an emergency. Examples might include a cut without much blood that needs stitches or a sprained ankle. Most TRICARE beneficiaries can visit an urgent care center when needed, but you should follow the urgent care rules for your plan.

When possible, visit a TRICARE network provider or a TRICARE-authorized (network or non-network) urgent care center to avoid additional out-of-pocket costs. Locate a provider by using the provider search tool on your regional contractor’s website. Check with your urgent care provider before going in person. There may be new safety protocols in place.

Active duty service members (ADSMs) enrolled in TRICARE Prime should contact their local military hospital or clinic for urgent care. To seek civilian urgent care, ADSMs need a referral. ADSMs enrolled in TRICARE Prime Remote don’t need a referral, but must follow applicable Department of Defense and service regulations concerning ADSM care outside of military hospitals and clinics.

Learn more at [www.tricare.mil/urgentcare](http://www.tricare.mil/urgentcare). Stay safe this fall, get the care you need, and take command of your health. ★

# TRICARE Qualifying Life Events: What You Need to Know

You know you can enroll in TRICARE Prime or TRICARE Select during TRICARE Open Season. But did you know that certain Qualifying Life Events (QLEs) may also give you and family members the chance to enroll in a new health plan?

A QLE is a certain change in your life, such as marriage, birth of a child, change of address, or retirement from active duty. This means different TRICARE health plan options may be available to you and your family members after a QLE. A QLE for one family member creates a chance for all eligible family members to change their health plan during the QLE period. Learn more by downloading the *TRICARE Qualifying Life Events Fact Sheet* at [www.tricare.mil/publications](http://www.tricare.mil/publications).

“After you experience a QLE, you have the same options available to you as you do during TRICARE Open Season,” said Debra Fisher with the TRICARE Policy and Benefits Office at the Defense Health Agency. “Those options may include doing nothing, enrolling in a health plan, or changing health plans.”

If you want to make a change to your health plan, you must make any eligible changes within 90 calendar days of the QLE. First, after any QLE, update your or your family member’s

information in the Defense Enrollment Eligibility Reporting System (DEERS).

Visit [www.tricare.mil/deers](http://www.tricare.mil/deers) for options for updating your DEERS record. Depending on your QLE, you may need to provide official documents, like a birth or marriage certificate. In that case, you’ll need to visit your nearest ID card office. Call first to make an appointment or to verify which documents you need to bring.

“Updating DEERS is just the first of two important steps,” Fisher said. “You also need to make your eligible health plan enrollment or enrollment changes.”

Enrollment fees, if required, begin back to the QLE date, not the date when the enrollment request is submitted.

Knowing how to navigate QLEs with TRICARE can help you take command of your health and the health of your family this year. For more information about QLEs and the impact they may have on you or your family, download the *TRICARE Qualifying Life Events Fact Sheet* or visit [www.tricare.mil/lifevents](http://www.tricare.mil/lifevents). ★



## Simple Ways to Maintain Your Health

Did you know you can take charge of your health by following these three simple preventive steps after you've been hospitalized? You can have a positive impact on your health, greatly decrease the risk of going back into the hospital, and significantly reduce the chance for potential complications.

- **Be sure to follow your post-discharge treatment plan.** If you were in the hospital for a behavioral health problem, this includes visiting with a psychiatrist, psychologist, or social worker within a week of discharge. Attending an early outpatient visit helps make sure the treatment plan is working.
- **See your primary care manager for an annual check-up.** Getting an annual check-up that includes blood tests, such as diabetes screening, can help you catch problems early when they're most treatable.
- **Take all medications as prescribed.** Stopping medications too early can lead to relapse.

These actions can boost your changes of getting and staying healthy after hospitalization. ★

## Preventive Care Can Keep Your Kids Healthy

Staying healthy this fall and winter is a priority for everyone. Routine immunizations, health screenings, and preventive services are great ways to keep your kids healthy. TRICARE offers preventive health care services with no out-of-pocket costs to you.

If your child is enrolled in a TRICARE Prime or TRICARE Select plan, they can get preventive care from their primary care manager (PCM) or any TRICARE network provider within their region without an authorization or referral.

Follow these tips to help your children thrive this fall:

- If your child hasn't had a school physical or routine vaccinations before the fall school year began, schedule the appointments now.
- Make sure your child is current on vaccinations. According to the Centers for Disease Control and Prevention, vaccines reduce your child's risk of infection by helping them safely develop immunity to diseases. You can get covered vaccines from any TRICARE-authorized provider at no cost. You may have to pay copayments or cost-shares for the office visit or for other services received during the same visit. You can get some covered vaccines at TRICARE retail network pharmacies. Remember that TRICARE covers well-child exams for children up to age 6 (from birth through age 5). Learn more at [www.tricare.mil/immunizations](http://www.tricare.mil/immunizations).
- Healthy vision helps your child see clearly and reduce barriers to learning. Your child's vision benefits, including eye exams, depend on their sponsor's status, their TRICARE health plan, and age. They may need a referral and authorization for vision care. If your child has vision coverage through the Federal Employees Dental and Vision Insurance Program (FEDVIP), follow the rules of that plan. Learn more at [www.tricare.mil/vision](http://www.tricare.mil/vision).
- Don't forget your child's smile. TRICARE offers dental coverage to active duty family members through the TRICARE Dental Program (TDP). As outlined in the *TRICARE Dental Program Handbook*, TDP covers two routine cleanings and two fluoride treatments. This is during a consecutive 12-month time period for children ages 1 and older. If you or your family members have dental coverage through FEDVIP ([www.benefeds.com](http://www.benefeds.com)), follow the rules of your plan.

Help your kids stay healthy. Find out more about preventive services TRICARE covers to prevent serious diseases at [www.tricare.mil/preventive](http://www.tricare.mil/preventive). ★

# Take Action to Prevent Prediabetes Today

Prediabetes means your blood sugar levels are higher than normal, but not high enough yet to be diagnosed as type 2 diabetes. According to the Centers for Disease Control and Prevention (CDC), over 88 million American adults have prediabetes.

Eight in ten of these adults are unaware they're prediabetic. With numbers like that, it's important to learn more about prediabetes and whether you may be at risk.

Without taking action, someone with prediabetes could develop type 2 diabetes within five years. Prediabetes can lead to possible heart disease and stroke. But prediabetes can often be reversed by losing weight, and adding 30 minutes of physical activity each day.

## Risk Factors for Prediabetes and Diabetes

You may be at higher risk for prediabetes and type 2 diabetes if you are:

- Overweight
- Age 45 or older
- A person who has a parent or sibling with type 2 diabetes
- Physically active fewer than three times per week
- A person who gave birth to a baby that weighed more than nine pounds
- Diabetic while pregnant (gestational diabetes)

Additionally, Black/African American, Hispanic/Latino, American Indian, and Asian American people are disproportionately affected by type 2 diabetes. If you aren't sure if you're at risk, take the CDC's online risk test at [www.cdc.gov/diabetes/risktest](http://www.cdc.gov/diabetes/risktest) or talk with your doctor about getting a blood sugar test.

## Take Action

If you've been diagnosed with prediabetes or diabetes, Health Net Federal Services, LLC offers support options:

- Register for our on-demand telephone-based class to learn more about risk factors, and preventing and managing diabetes. Visit our online Learning Center today at [www.tricare-west.com/go/learningcenter](http://www.tricare-west.com/go/learningcenter) and click on "The Essentials of Diabetes Management."
- Self-nominate for individualized education, support, and coaching with a disease management specialist. Call the Chronic Care/Disease Management program at 1-844-732-2436 from 8 a.m. to 6 p.m. local time, Monday through Friday. You can also complete the self-nomination form at [www.tricare-west.com/go/dmfaq](http://www.tricare-west.com/go/dmfaq). ★

## Connect with a Telemedicine Provider

Now more than ever, it's important for beneficiaries to easily connect with providers who can see them via virtual appointments. Health Net Federal Services, LLC (HNFS) is here to help. From the beneficiary portal at [www.tricare-west.com](http://www.tricare-west.com), click on Network Provider Directory and select "Telemedicine" to get started.

While TRICARE is temporarily allowing for audio-only telehealth in response to COVID-19, directory search results will only include providers who have notified HNFS they offer video telemedicine services. For video telehealth, you'll need a camera-enabled device that also allows for audio, such as a computer, telephone, or tablet.

## TRICARE Benefits

TRICARE covers the use of telemedicine to provide medically and psychologically necessary health care. Some exclusions apply. Find complete benefit details at [www.tricare.mil/coveredservices](http://www.tricare.mil/coveredservices).

## Referrals

Referral requirements for covered telemedicine services are the same as those for in-person visits. You don't need a new or unique referral outside of these requirements because care is rendered via telemedicine.

Learn more about your options at [www.tricare.mil/telemedicine](http://www.tricare.mil/telemedicine). If you're looking for COVID-19 information and resources, go to [www.tricare.mil/coronavirus](http://www.tricare.mil/coronavirus). ★



# HEALTH MATTERS

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## CHECK THIS OUT...

### Open season will take place from Nov. 9 to Dec. 14

TRICARE Open Season begins on Nov. 9. Find out what this means for you and what you can do to prepare.

See page 1.

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## How do I start using TRICARE Pharmacy Home Delivery?

Express Scripts is the pharmacy contractor. There are many easy ways to switch your prescription to home delivery. You can ask your military pharmacist to transfer your prescription to home delivery. You can also enroll by phone, on the Express Scripts mobile app, online at <https://militaryrx.express-scripts.com/home-delivery>, and by mail. Learn more about the TRICARE Pharmacy Home Delivery Program at [www.tricare.mil/homedelivery](http://www.tricare.mil/homedelivery).

## What does Group A and Group B mean?

Group A and Group B beneficiaries have different enrollment fees and out-of-pocket costs. If you or your sponsor's initial enlistment or appointment occurred before Jan. 1, 2018, you're in Group A. If your sponsor's initial enlistment or appointment occurred on or after Jan. 1, 2018, you're in Group B. Are you enrolled in a premium-based plan: TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult, or the Continued Health Care Benefit Program? If so, both Group A and Group B follow Group B costs. You can view costs based on your beneficiary group at [www.tricare.mil/costs](http://www.tricare.mil/costs). ★



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