TRICARE® Young Adult Program

TRICARE offers health care coverage to qualifying young adults

The TRICARE Young Adult (TYA) program is a premium-based health care plan available for purchase by qualified dependents. TYA offers TRICARE Prime and TRICARE Select coverage worldwide. TYA includes medical and pharmacy benefits, but excludes dental coverage.

**WHO QUALIFIES?**

If you are an adult-age dependent, your geographic location and sponsor’s status determine whether you qualify for TYA Prime and/or TYA Select. Please see the chart on page 2 for qualification information.

**Note:** Special qualification conditions may exist.

You may generally purchase TYA coverage if you are all of the following:

- A dependent of an eligible uniformed service sponsor
- Unmarried
- At least age 21 (or age 23 if previously enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support), but have not yet reached age 26

You may not purchase TYA coverage if you are:

- Eligible for an employer-sponsored health plan under your own employment as defined in TYA regulations
- Otherwise eligible for TRICARE program coverage
- Married

- A uniformed service sponsor (e.g., an active duty service member or a member of the Selected Reserve)

The Affordable Care Act (ACA) requires that individuals maintain health insurance or other coverage that meets the definition of “minimum essential coverage.” If purchased, TYA is considered minimum essential coverage.

Adult-age dependents are encouraged to evaluate all health care coverage options after aging out of TRICARE. While you may qualify to purchase TYA coverage, it is not your only health care coverage option to fulfill the minimum essential coverage requirement under the ACA. Financial assistance to purchase commercial health care coverage may be available through the health insurance marketplace. Also, you may qualify for Medicaid coverage, depending on your status and the state you live in. To assess other health care coverage options before purchasing TYA, visit [www.healthcare.gov](http://www.healthcare.gov).

**PURCHASING TRICARE YOUNG ADULT**

If you qualify, you may purchase TYA coverage at any time. The Beneficiary Web Enrollment (BWE) website is a secure portal that allows eligible TRICARE beneficiaries in the United States to update their contact information in the Defense Enrollment Eligibility Reporting System (DEERS). BWE also allows TYA beneficiaries to enroll in TYA and to update information online. To access BWE, visit [www.dmdc.osd.mil/appj/bwe](http://www.dmdc.osd.mil/appj/bwe).

This fact sheet is not all-inclusive. For additional information, go to [www.tricare.mil](http://www.tricare.mil).
TYA enrollment is available by phone. In the United States, call your regional contractor. Overseas, call your TRICARE Overseas Program (TOP) Regional Call Center and select option 4 to speak to a Global TRICARE Service Center representative. To enroll in TYA TOP Prime or TYA TOP Prime Remote, you must show command sponsorship. You will need the sponsor’s order number and date on the orders to enroll by phone. If you live in an Uniformed Services Family Health Plan (USFHP) Service Area and are qualified, you can enroll in a USFHP plan. Call the USFHP to enroll over the phone.

You may also enroll by fax or via mail. The TRICARE Young Adult Application (DD Form 2947) is available at www.tricare.mil/enroll by clicking on “TRICARE Young Adult.” When applying, you must verify that you are not married and not eligible to enroll in an employer-sponsored health plan.

Once you complete and sign DD Form 2947, submit it by fax or mail with the initial premium payment to your regional contractor using the contact information provided on the form.

Your completed application must include the first two months of premium payments paid by personal check, cashier’s check, money order, or credit/debit card. After the initial payment, premiums must be paid in advance by monthly automated electronic payment.

**Note:** If you are not already registered in DEERS, your sponsor must add you to the system before the TYA application process can begin. For information on adding family members to DEERS, visit www.tricare.mil/deers.

### Qualification to Purchase TRICARE Young Adult Coverage Based on Sponsor Status

<table>
<thead>
<tr>
<th>SPONSOR STATUS</th>
<th>TRICARE PRIME®</th>
<th>TRICARE PRIME REMOTE</th>
<th>TRICARE SELECTSM</th>
<th>US FAMILY HEALTH PLAN</th>
<th>TRICARE OVERSEAS PROGRAM (TOP) PRIME</th>
<th>TOP PRIME REMOTE</th>
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1. To enroll in this program, it must be offered in your geographic area, and you must meet all other qualification criteria (e.g., command sponsorship overseas).
2. Includes National Guard and Reserve members called or ordered to active service for more than 30 consecutive days.
3. If you are an adult child of a non-activated member of the Selected Reserve or of the Retired Reserve, your sponsor must be a TRICARE Reserve Select or TRICARE Retired Reserve member for you to qualify to purchase TYA coverage.
4. TAMP provides 180 days of transitional health care benefits to help certain members of the uniformed services and their families transition to civilian life. For more information, visit www.tricare.mil/tamp.
ENROLLMENT IN TRICARE YOUNG ADULT

When you purchase TYA Prime or TYA Select, your coverage begins on the date the completed request is received by the regional contractor or on a date up to 90 days in the future that you specify.

Note: You may qualify for the Continued Health Care Benefit Program (CHCBP) after TYA coverage ends, unless you are locked out of TYA coverage. Visit [www.tricare.mil/chcbp](http://www.tricare.mil/chcbp) for more information. You can also find other health care coverage options at [www.healthcare.gov](http://www.healthcare.gov).

OBTAINING A UNIFORMED SERVICES IDENTIFICATION CARD

After enrolling in TYA and receiving notification from your regional contractor that your application processed, you and your sponsor will need to visit a uniformed services identification (ID) card-issuing facility to obtain your ID card. Visit [www.dmdc.mil/rsl](http://www.dmdc.mil/rsl) to find an ID card-issuing facility near you and to verify if an appointment is required. If your sponsor is unable to accompany you, visit [www.dmdc.mil/rsl](http://www.dmdc.mil/rsl) to obtain the phone number for your local site and call to verify what documentation is required.

COVERED SERVICES

The TYA benefit includes TRICARE Prime or TRICARE Select. TYA coverage includes medical and pharmacy benefits, but excludes dental coverage. TYA Prime beneficiaries have TRICARE Prime access to care through their assigned military or civilian primary care managers. All TYA beneficiaries are eligible for care at military hospitals and clinics, but TYA Select beneficiaries have access only on a space-available basis. TYA is only available for individuals and is not offered as a family plan. For more information on covered services, visit [www.tricare.mil/coveredservices](http://www.tricare.mil/coveredservices).

Note: Expectant mothers enrolled in a TYA program option receive maternity care for the duration of their pregnancy. However, the child will not be covered by TRICARE, unless the newborn’s other parent is a sponsor or the newborn is adopted by a sponsor.

TRICARE YOUNG ADULT COSTS AND FEES

For information on current premiums and costs, visit [www.tricare.mil/costs](http://www.tricare.mil/costs).

TYA premiums are adjusted annually, effective Jan. 1. Ongoing premiums must be paid in advance by automated electronic payment. Premiums do not count toward your deductible or catastrophic cap.

Depending on your sponsor’s initial enlistment or appointment, you fall into one of two groups: Group A or Group B. Your group designation determines your costs. However, when enrolled in TYA, CHCBP or other premium-based plans, all enrollees follow Group B cost-shares, deductibles and catastrophic caps.

Copayments and cost-shares count toward your family’s catastrophic cap. For TYA Select, TYA cost-shares contribute to individual and family deductibles, which vary based on your sponsor’s category.

ENDING TRICARE YOUNG ADULT COVERAGE

Choosing To End Coverage

You may end TYA coverage at any time by completing the fields related to terminating coverage on DD Form 2947 and submitting it to your regional contractor. If you end TYA coverage, you will be locked out from purchasing TYA coverage for 12 months from the date of termination. There is no lockout if the coverage is terminated because you gain access to an employer-sponsored health plan or you gain other TRICARE coverage.

Nonpayment

Your premium payment is due no later than the last day of the month for the next month’s coverage. Failure to pay total premium amounts due and any insufficient funds or fees owed will result in a termination of coverage. A 12-month TYA purchase lockout will go into effect.
Change in Status

Your sponsor must always report all family and status changes to DEERS.

Your TYA coverage ends when any of the following occurs:

- You get married.
- You become eligible for an employer-sponsored health plan under your own employment as defined in TYA regulations.
- You gain or are otherwise eligible for TRICARE program coverage.
- You no longer qualify because your sponsor no longer establishes your eligibility for TYA.

CHANGING TRICARE YOUNG ADULT OPTIONS

If you are currently enrolled in a TYA plan and would like to change your TYA option, you can do so online, by phone, or by mail. The BWE website allows you to change your TYA options online. To access BWE, visit www.dmdc.osd.mil/appj/bwe. To change your option by phone, call your regional contractor in the United States or your TOP Regional Call Center overseas. To switch your TYA plan by phone to a TOP Prime option overseas, you will need the sponsor’s order number and date on the orders. To switch your TYA plan by fax or via mail, submit a new DD Form 2947 to your regional contractor or the TOP regional contractor.

If you switch plans within the same region and your regional contractor does not change, your regional contractor simply adjusts future premium payments by applying any overages to future premium payments, and adjusting the automated electronic payments so you are not overcharged or undercharged for the coverage requested. If you want to change your TYA plan option and you are also transferring to a new region, you can only do so if you are current in your monthly premium payments. After you submit your transfer request with recurring premium payment information, your coverage transfers within 10 calendar days. Your future automated electronic payments will be adjusted accordingly.
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. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.

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