

## Getting Started with Medicare and TRICARE

### **Webinar**

#### **Host:**

Good afternoon and welcome to today's webinar titled "Getting Started with Medicare and TRICARE."

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Are you or someone in your family turning 65 soon? To get TRICARE For Life Coverage, you must have Medicare Part A and Part B. This webinar will give you a step-by-step overview of when and how to sign up for Medicare. You'll also learn how Medicare and TRICARE work together to minimize your out-of-pocket expenses. We're thrilled to have with us today, Ms. Anne Breslin, TRICARE For Life Program Manager, TRICARE Health Plan, Defense Health Agency. Without further delay, I'll turn things over to Anne.

#### **Anne Breslin:**

Thank you so much. Welcome everyone. Thank you for joining us today. I believe you will find the next hour to be informative and helpful as you make plans to use the TRICARE For Life Program. Let's get started.

So we have a packed agenda for you today. I will be discussing TRICARE For Life, Medicare enrollment, the parts of Medicare, TRICARE pharmacy program, dental and vision coverage is available to you, as well as how Medicare and TRICARE work together and how other insurance impacts that coordination of benefits, as well as resources and hopefully we have time to answer many of your questions.

So what is TRICARE For Life? TRICARE for life is Medicare-wraparound coverage for military retirees, their family members who are entitled to Medicare Part A and Part B and also TRICARE. You'll receive TRICARE benefits under TRICARE For Life on the first day that both your Medicare Part A and Part B coverage are in effect, and of course, provided you also meet TRICARE eligibility requirement. So, you'll need to enroll in both Part A and Part B and show in DEERS as being eligible for TRICARE. TRICARE For Life Coverage is available worldwide.

So I'm frequently asked when spouses are not of the same age, how does one of them turning 65 and becoming entitled to Medicare impact the other? It doesn't. Medicare is an individual enrollment unless your birth dates are the exact same day your coverage or within the same month, your coverage isn't going to start at the same time. So, the younger spouse remains eligible for TRICARE Prime or Select and the enrollment fee would be reduced to the individual enrollment fee. If you have children that are still eligible then the family enrollment fee would remain.

So how and when does one sign up for Medicare? If you're already receiving Social Security retirement or disability pay, you're automatically signed up for Medicare. You may have actually received it while under the age of 65, or already have Medicare. In that case, it just changes to eligibility based on age. So, you can sign up for Medicare on the Social Security website which is [ssa.gov](http://ssa.gov), you can call the Social Security Administration in the numbers listed here, 800-772-1213 or if you're hearing impaired, you can call 800-325-0778. You can also establish a meeting in person at your local Social Security office and you can find those offices online at [ssa.gov](http://ssa.gov). Medicare has three different enrollment periods, and they're listed here, it's either initial, general or special enrollment period and then we will cover the details of those.

So everyone's individual enrollment period is based on their actual birth date as I alluded to previously. Your first chance to sign up for Medicare Part A and B based on age is during your initial enrollment period, which is the seven-month period. If your birthday falls on the first day of the month, just sign up for Medicare between two and four months before the month you turn 65 and that's in order to avoid a break in TRICARE coverage.

You do have seven months to do so but if you don't sign up before you turn 65 or within just two to four months before, they'll end up having a gap between when your Medicare Part B starts and when your Part A starts which would result in a gap in your TRICARE coverage. If your birthday falls after the first day of the month, sign up for Medicare between one and three months before the month you turn 65 to avoid a break in coverage. Medicare coverage will start on the first day of the month you turn 65. The goal is to sign up according to how I described it here, so that your Part A and Part B begin on the same date. Medicare or Social Security do not send out notices to remind you when to sign up, but we do. But it's important that your contact information is up to date in DEERS or that notice will go to a prior address that you have in DEERS. So please first thing is to check to make sure that your contact information is up to date.

So here are some specific examples of what I was just discussing. Mr. Smith will turn age 55 on October 1st. He should sign up for Medicare between June 1st and actually August 31st. You have until the end of the month to avoid a break in TRICARE coverage. Now, if he waits and signs up on August 31st, how many people would think that he's going to have his Medicare card on September 1st? I don't see any hands going up and that's correct because he won't get it that quickly. So, while he can wait till August 31st, the sooner you sign up the better because it will just work out better for you. His Medicare coverage starts September 1<sup>st</sup>. That's because his birthday falls on the 1st. If

your birthday falls on any other date, for example, Mrs. Green is going to turn 65 on October 2nd. She should sign up for Medicare between July 1st and September 31st to avoid a break in TRICARE coverage. Her Medicare coverage will start October 1st. So many people ask, does Medicare start on my birthday? That's not correct. It either starts the first of the month in which you turn 65 or in the case when your birthday falls on the 1st, it's going to start at 1st of the month prior to the month in which you turn 65.

The general enrollment period. This is an enrollment period for those folks who either do not sign up for Medicare Part B when they're first eligible or for some reason they get terminated because they didn't pay their premiums. They have another opportunity to enroll and that's during this time called the general enrollment period. It occurs every year between January 1st and March 31st. If you enroll during the general enrollment period, your coverage will start the month after you sign up and your monthly Part B premiums can go up by 10% for every 12-month period. You could have had Medicare Part B but didn't. So it's not just a one-time fee. This is something that you would pay for the rest of your life. Generally, you won't have to pay a penalty if you qualify for a special enrollment period, and I'll talk about that.

So special enrollment period is available for Medicare Part B. And the penalty for late enrollment is waived. If you are an active-duty service member or a dependent of an active-duty service member and you're enrolled in the TRICARE Plan, or if you're still working and have health coverage based on that job. So, it's employer-sponsored coverage while working. If you qualify for a special enrollment period, you still must have Medicare Part A and B to have TRICARE For Life Coverage. So while Medicare allows you to delay enrollment in Medicare Part B and rely on your employer-sponsored coverage, you would not have TRICARE as a secondary payer to your employer coverage. You can sign up for Medicare Part A and B at any time under this enrollment period. You can sign up any time while covered by the employer-sponsored plan and you're currently still working for the employer.

As you plan for your retirement from that job, you should sign up for Medicare the month before you stop working or lose employer coverage, whichever comes first, or if you're an active-duty sponsor. Any family members who are entitled to Medicare, either based on age or disability, would sign up for Medicare a month before they retire. So that you would avoid a break in your TRICARE coverage.

So, I often get the question about if someone hasn't worked to meet the requirements for being eligible for Medicare which is you have to have a job where you paid into the Social Security System for at least 10 years. Under that situation, if the individual is not married and never has been married, they would remain eligible for TRICARE without having Medicare. But they actually have to file for Medicare and get a Notice of Disapproved Claim.

If you aren't eligible for Medicare Part A on your own work history but you have a current former or deceased spouse, you may sign up for Medicare on their record. If your spouse is 62 or older when you turn 65, you would sign up for Medicare on your

own record and if you're denied, then sign up for Medicare on your spouse's record. If your spouse is younger than age 62, at the time you are turning 65, you sign up for Medicare on your own record and if you're denied, you would get a Notice of Disapproved Claim or a Notice of Award. The award would be if you filed for Medicare Part B and that's what I would recommend that you do if you anticipate being eligible on your spouse's record when he or she is 62. And the reason being is everyone can get Part B at age 65 because it's premium-based. So, if your spouse is younger, you're not eligible for Medicare. Sign up, get the Notice of Disapproved Claim or Notice of Award and that is the document that you would use to present to an ID card office and that would allow you to continue your TRICARE coverage in the absence of Medicare Part A. But prior to your spouse's turning 62, you would then sign up for Medicare on your spouse's record, and then have A and B and TRICARE For Life.

Medicare will send you a welcome package once you have been enrolled in Medicare. They will include your Medicare card and the Medicare handbook and a letter welcoming you to the Medicare program. As I mentioned, your TRICARE For Life will start the first day you have both Medicare Part A and Part B.

We have a data match between the centers for Medicare and Medicaid services and the Defense Manpower Data Center, which manages DEERS (Defense Enrollment Eligibility Reporting System). And so that's how the system is updated and tracks your Medicare entitlement. You will obviously need to pay for your Part B premiums. If you're not collecting Social Security, you'll be billed for those and you'll have to submit a check. Most likely, your ID card will be expiring and you would need to take documentation to the ID card facility to have your ID card updated. I recommend calling them in advance to make sure you don't have to make a return trip to get some documents.

With respect to the Part B premium, they are income-based, if your income goes down, you can get your premium revised. There's information on the Medicare site about the breakouts of income and how that impacts your premium rates. Learn more about how to sign up for Medicare when your Medicare coverage starts at [medicare.gov/basics](https://www.medicare.gov/basics).

So, we do not issue a TRICARE For Life card to present at a doctor's office. What you use is your military ID card along with your Medicare card. Your providers will generally bill Medicare first, and then the claims will come over to TRICARE for payment towards your health care cost. If you lose your Medicare card, you can log on to your Medicare account, which you can establish on [medicare.gov](https://www.medicare.gov) and print an official copy of your card. You can also contact Medicare at 800-633-4227 to order a replacement card.

So, what are the parts of Medicare and what do you need in order to have continued TRICARE coverage? First is Medicare Part A. Original Medicare refers to Medicare Part A and Part B. Part A is referred to as hospital insurance, but covers more than care in a hospital. It can include care provided in a skilled nursing facility, hospice care, home health care, et cetera. You're eligible for premium-free Medicare Part A if you or your spouse worked and paid into the Social Security System for at least 10 years. There is something else called Medicare Supplemental Insurance or Medigap. This is optional

coverage; it is a premium-based coverage and Medigap pays your out-of-pocket cost after original Medicare. You can learn more about Medigap at [medicare.gov/health-drug-plans/medigap](https://www.medicare.gov/health-drug-plans/medigap).

Original Medicare Part B. Part B is referred to as medical insurance. It's funded through monthly premiums paid by the beneficiary, and it helps to cover costs for all of your, like outpatient care with physicians, physical therapists, et cetera, including home health, durable medical equipment such as wheelchairs, walkers, hospital beds, and also preventative services like screenings, yearly wellness visits, and certain vaccines. As I previously mentioned, your Part B premium will be based on your income. The Social Security Administration would get information from the IRS so they are aware of what your income is and as it changes you can request changes to your Part B premium. Learn more about Part B cost at [medicare.gov](https://www.medicare.gov).

Medicare Part C and Part D. Medicare Part C refers to Medicare Advantage Plans. These are health plans offered by private companies that contract with Medicare. They provide Medicare Part A and B services, and the majority of them now provide Part D, which is prescription drug coverage from the Medicare program. They may offer some extra benefits that original Medicare doesn't cover, like vision, hearing and dental services. But many of those services are limited to preventive services, so they're not comparable to affect the federal employee dental and vision insurance program, which I will talk about later.

Medicare Part D is prescription drug coverage. It also has monthly premium. Plans are run by private insurance companies that follow the rules by Medicare. Medicare Advantage Plans typically include the Part B coverage, and you can learn more about these options at [medicare.gov/drug-coverage-part-d](https://www.medicare.gov/drug-coverage-part-d). You don't need Medicare Part C or Part D to have. TRICARE For Life. TRICARE For Life beneficiaries continue to be covered by the TRICARE prescription drug coverage, managed by our TRICARE Pharmacy Program and Express Scripts. With TRICARE For Life, you may be eligible to buy dental and vision coverage through the Federal Employees Dental and Vision Insurance Program.

This is a simple comparison of original Medicare with TRICARE For Life versus a Medicare Advantage Plan. Under Original Medicare and TRICARE For Life, you only pay your Part B premium. Under the Medicare Advantage Plan, you may have a monthly premium in addition to your Medicare Part B premium. Also, under Original Medicare and TRICARE For Life, you can get health care from any Medicare-participating or Medicare non-participating provider, and you don't need a referral or pre-authorization to see a specialist for care, Medicare covers. Under Medicare Advantage, you must get all of your health care from your Medicare Advantage Plan providers that each has an HMO model, you're limited to their network with the exception of emergency services. They also usually require referrals and prior authorizations to see a specialist. Again, under the Medicare, Original Medicare and TRICARE For Life, they work together to coordinate your benefits. When the care you receive is covered by Medicare and TRICARE, you pay nothing and you don't have to file any paperwork, no claims provided,

you follow the rules of obtaining care from Medicare participating and non-participating providers.

Under Medicare Advantage Plan, you pay copayments for care at the time of service. And if you would like reimbursement from TRICARE For Life, you will need to file a claim with our contractor, Wisconsin Physicians Services, which is the TRICARE and Medicare eligible program contractor. Otherwise, referred as the TFL contractor. So as I mentioned, you continue to be eligible for coverage for prescription drug coverage under the TRICARE Pharmacy Program. There are no monthly premiums for the TRICARE Pharmacy Program and you can learn about the options and copayments at [tricare.mil/pharmacy](http://tricare.mil/pharmacy) and you can find how TRICARE covers specific drugs at [esrx.com/tform](http://esrx.com/tform). Before you enroll in a Medicare prescription drug plan if that's something you want to do, compare the following with your TRICARE prescription drug coverage: monthly premiums, deductibles, copayments and drug coverage.

So as previously mentioned you will likely qualify to purchase dental and/or vision coverage through the Federal Employee Dental and Vision Insurance Program which is referred to as FEDVIP. FEDVIP offered by the U.S. Office of Personnel Management is available to retired service members and their eligible family members. You can learn more about FEDVIP at [benefeds.com](http://benefeds.com). So, let me just say briefly that there are, I believe like 10 different insurance companies under FEDVIP that provide dental coverage and with options for high or standard options. In vision coverage, I think is like five maybe. So, it's a little bit of work but it's worth the effort to go to [benefeds.com](http://benefeds.com) compare what's available to you and what best suits your needs.

You can sign up 31 days before or 60 days after retirement from the military or during a FEDVIP qualifying life event. The FEDVIP qualifying life event don't line up exactly as those for TRICARE so it's important to go to [BENEFEDS](http://BENEFEDS) to learn about what those are. In addition, you can sign up during the FEDVIP open season. This year's open season will be from November 13th through December 11th.

So I mentioned previously that there are Medicare providers known as participating providers and these providers accept the Medicare allowed amount as payment in full. They will file claims with Medicare for the care you receive and you have no out-of-pocket costs when the care you receive is covered by both Medicare and TRICARE.

Non-participating Medicare providers don't accept the Medicare allowed amount as payment in full and they can be paid up to 15% above the Medicare allowed amount. This doesn't impact you as TRICARE will pick up that additional 15% provided the care is TRICARE covered benefit. Now, there are some providers that don't want to participate in the Medicare program at all so therefore they cannot bill Medicare. And of course, Medicare is not going to pay them. If you see an opt-out provider, they will ask you to sign a private agreement with them about how much they will charge. TRICARE under this scenario will pay up to 20% of the TRICARE allowable amount and you will remain responsible for the remainder of the billed charges. So, that is not the most cost-

effective way of getting your health care but if that is something you want, that is how it would play out.

So how can you find a Medicare provider? Medicare has a search tool on their website at [medicare.gov/care-compare](https://www.medicare.gov/care-compare). You can also call the Medicare customer service line at 800-633-4227. You can search for doctors, hospitals, nursing homes, et cetera. You can type in your ZIP code and the type of provider you're looking for whether it's an internist, a cardiologist, dermatologist, et cetera. And they will provide you the locations of their offices, whether or not they're accepting new patients and the contact information. So, that's one way.

You can also contact your current providers and see if they participate with Medicare and talk to your friends to see who they see and who they like. Lots of ways to look for a doc. I do recommend that you start looking before you turn 65 and before you become Medicare eligible because it's nice to have an established relationship with a provider before you actually need them. So, start now. If you choose to enroll in Medicare Advantage Plan, you'll need to contact that plan for their list of network providers.

So if you're living overseas, you will need to pay for services up front and file claims for reimbursement. TRICARE is the primary payer unless you have other health insurance. Medicare does not provide coverage overseas.

Some folks are used to getting care through the Veterans Affairs providers. Those providers are not permitted to bill Medicare and Medicare can't pay for services received from VA facilities or their providers. If you see a VA provider for non-service-connected care, you will have significant out-of-pocket expenses similar to the opt-out providers that I previously talked about. When you see a VA provider for non-service-connected care, TRICARE will pay up to 20% of the TRICARE allowable amount and you may be responsible for paying the remainder of the bill charges. So it's much more cost-effective to go outside the VA for non-service-connected care because you would have the advantage of both coverage from Medicare and TRICARE. You also have the option of receiving care at military hospital and clinics if space is available.

So here's a couple examples of what I previously described about provider types and how it impacts your out-of-pocket expenses. On the left, Mr. Smith gets care from a Medicare participating or non-participating provider. The provider bills \$1,000. Medicare allowed \$400. Medicare pays 80% of their allowable amount and TRICARE pays the remaining 20%, in this case \$80, leaving Mr. Smith with no out-of-pocket expenses. On the right side, Mr. Smith gets non-service-connected care from a VA provider or hospital. The provider bills \$1,000. TRICARE allowable amount is \$400. Medicare pays nothing and TRICARE pays 20% or \$80. And Mr. Smith ends up with a bill of \$320.

How do you know what Medicare and TRICARE cover? Our policies are not identical so you will find some differences. At some point, you may have some out-of-pocket expenses because the only time you have no out-of-pocket expenses is when the care you receive is covered by both plans. Medicare has limits on the amount of care it

covers. In some cases, TRICARE For Life may cover these health care services after your Medicare benefits run out. One example there is skilled nursing facility care. Medicare's limit for skilled nursing facility care is 100 days. TRICARE does not have a limit however, you have to still meet the requirements for skilled care so that's important to understand. To see if Medicare covers a specific service or benefit, you can visit the Medicare website at [medicare.gov/coverage](https://www.medicare.gov/coverage) or call Medicare at their customer service line 800-633-4227.

TRICARE covers proven medically necessary and appropriate care. To see if TRICARE For Life covers a specific service or benefit, you can visit the TRICARE website at [tricare.mil/coveredservices](https://www.tricare.mil/coveredservices) or call the TRICARE For Life contractor, which is Wisconsin Physicians Service at 866-773-0404. For those of you in the East Region, who are used to working with Wisconsin Physicians Service, please know that this is a separate contract and separate phone numbers, et cetera. So this chart is a brief description of who pays what.

So as I mentioned, if care is covered by Medicare and TRICARE, you will have no out-of-pocket expenses because both Medicare and TRICARE work together to cover the cost. If the care you receive is covered by Medicare only, TRICARE will not pay anything and you will be responsible for the Medicare deductible and cost-share. If the care you receive is covered only by TRICARE, Medicare pays nothing and you will be responsible for the TRICARE deductible and cost share. If you receive care that is covered by neither Medicare nor TRICARE, you will be responsible for 100% of the bill charges.

If you have TRICARE For Life, which means you have Medicare also and perhaps you have other health insurance, things can work a little differently. How Medicare coordinates with your other health insurers depends on whether that other health insurance is based on current employment. In either case, TRICARE For Life will pay last. If you have employer-sponsored insurance based on current employment, your other health insurance pays first, Medicare pays second and TRICARE pays last.

Your provider will file claims with Medicare and Medicare will forward the claim to your other health insurance. But at that point, if your other health insurance does not forward the claim to TRICARE, you would have to file a paper claim after receiving your Medicare summary notice which is basically an explanation of benefits along with your explanation of benefits from your other health insurance. If you have OHI that isn't based on your or your family members' current employment, Medicare pays first, the OHI pays second and TRICARE pays last. I'm sorry, when I previously spoke when your OHI pays first, the Medicare pays second, Medicare coordinates with TRICARE. It's the second example there when Medicare pays first and OHI pays second, TRICARE pays last. That's when you have to file a claim. Sorry about that.

So before we move on to your questions, I want to take a moment or two to highlight some helpful resources. As a reminder, you can find these resources in the copy of the slide that you received. There are a few places on [tricare.mil](https://www.tricare.mil) that are good starting points for learning about TRICARE For Life, [tricare.mil/tfl](https://www.tricare.mil/tfl) and



tricare.mil/medicareeligible. I also recommend checking out [tricare.mil/faqs](https://www.tricare.mil/faqs). This is a great way to find answers to common TRICARE questions. You can also go to [tricare.mil/publications](https://www.tricare.mil/publications) to download the TRICARE For Life handbook and two different TRICARE For Life brochures. One is about becoming Medicare-eligible at age 65 and the other is about becoming Medicare-eligible before age 65.

If you would like a hard copy of a Tricare For Life handbook, you can request one from the TRICARE For Life contractor Wisconsin Physician Service. Their contact info is on the next slide. I also want to encourage you to check out the Get to Know TRICARE podcast in the TRICARE Newsroom. There are six episodes about Medicare and TRICARE For Life topics. To find this podcast, go to [newsroom.tricare.mil](https://newsroom.tricare.mil), hover over the multimedia tab on the navigation bar and click podcast. You can play each podcast directly on the web page. You can also download a transcript if you prefer to read the information from that podcast.

Here's the contact info for the two TRICARE For Life support contractors and as a reminder, if you have questions about your TRICARE eligibility, or DEERS, contact the Defense Manpower Data Center. If you have questions about signing up for Medicare itself, you should contact the Social Security Administration. For other Medicare questions, contact Medicare and if you have questions about FEDVIP dental and vision plans, and enrollment you should reach out to BENEFEDS.

Lastly, I want to remind you that there are many ways to stay up-to-date with TRICARE. You can go [tricare.mil/subscriptions](https://www.tricare.mil/subscriptions) to subscribe to benefit the email. You can also follow TRICARE on Facebook and Twitter.

Now, let's answer some of your question.

**Host:**

Once on Medicare and TRICARE Prime has enrolled to TRICARE For Life, will my prescriptions still be covered as they are now or is this when Part D comes into play?

**Anne Breslin:**

So, there's no requirement for Part D and so your coverage would remain the same under the TRICARE Prescription Drug Program.

**Host:**

Do we still have to sign up for Part B if we still have employer health care through a spouse?

**Anne Breslin:**

So I covered this during the presentation. I'll just briefly go over that Medicare allows you to delay your enrollment at Part B but if you do that you will rely on your employer coverage and will not have TRICARE coverage until you have Part B.

**Host:**

I live in Portugal. Do I need TRICARE For Life or TRICARE Overseas or some other TRICARE program? I believe I have TRICARE For Life right now.

**Anne Breslin:**

So if you're living in Portugal and you want TRICARE coverage and you're entitled to Medicare, you must have Medicare Part A and B, as in boy, even though Medicare will not pay for services, health care services, you received in Portugal or anywhere else overseas.

**Host:**

If I switch to US Family Health Plan at PACMED, do I need to switch back to TRICARE before I enroll in Medicare?

**Anne Breslin:**

So if you weren't enrolled in US Family Health Plan before I believe, October 1, 2012, I think is the right date. If you weren't enrolled from that point and continuously until the point in which you become 65, you will be disenrolled. So if you enroll now and turn 65 next year, let's say, you will be disenrolled and you'll have to have Medicare Part A and B.

**Host:**

OK. Is the enrollment fee change automatic or do we need to inform TRICARE of the change?

**Anne Breslin:**

It should be automatic as they will disenroll the individual turning 65 and adjust it at that point.

**Host:**

Can we access pharmacy benefits if we don't have TRICARE For Life, if we do not have Medicare Part B because of having employer health?

**Anne Breslin:**

No. In order to remain eligible for the TRICARE prescription drug benefit, you would have to be eligible for TRICARE For Life or another TRICARE program.

**Host:**

If we're still working at 65, can you stay with TRICARE?

**Anne Breslin:**

Only if you enroll in Medicare Part A and B, as in boy.

**Host:**

What if I'm sick — receiving Social Security and still have coverage under Blue Cross Blue Shield, and do not want to be enrolled in Medicare or TRICARE For Life? Will I be signed up automatically? How do I stop it?

**Anne Breslin:**

So if you're already receiving Social Security before the age of 65, you are automatically enrolled in Medicare Part A and Part B, as in boy. If they're working and have employer coverage, they can ask not to have the Part B because they're eligible for that special enrollment period that I referred to earlier. However, they would not have TRICARE.

**Host:**

If I have private insurance through my work and don't sign up for Part B until later with a special enrollment, is my eligibility for TRICARE For Life restored when I sign up for Part B?

**Anne Breslin:**

Yes, you will have Tricare For Life the first date that you have Medicare Part A and Part B, as in boy.

**Host:**

Is the premium based on the individual or the household income?

**Anne Breslin:**

If there are two wage earners, it's based on the couple. If it's a single wage earner, it's based on the single person.

**Host:**

Can we use an allotment from retirement pay, to pay for Part B?

**Anne Breslin:**

No, it's either taken from your Social Security pay. If you're not receiving that, you receive a bill every quarter.

**Host:**

Can I use military-based pharmacy? Can I still —

**Anne Breslin:**

Yes, that's right. Your pharmacy options do not change, it's the same program.

**Host:**

OK. And I know we had a similar question to this one. If you're still employed and have medical insurance, do you still go to Social Security Administration to sign up for Part A and Part B or just Part A?

**Anne Breslin:**

So, if you're choosing to rely on your employer-sponsored coverage, you would sign up for just Part A because you can delay Part B without penalty. However, you won't have TRICARE coverage.

**Host:**

OK. Can someone who has Medicare, but is on US FHP use the TRICARE Pharmacy?

**Anne Breslin:**

No. They cannot. US Family Health Program has their own pharmacy program. You have to follow their guidelines.

**Host:**

How can I continue to see my assigned PCM for my time on TRICARE Prime?

**Anne Breslin:**

So, if that is a provider within a military treatment facility, there's a program called TRICARE Plus. It's offered in some, but not all military facilities, and it's based on their capability and capacity to keep you so you would have to inquire at that facility. If the provider is outside, you would simply have to ask them if they participate in Medicare and if they would continue to be your provider.

**Host:**

Do my current prescription and referral under TRICARE expire when I turned 65?

**Anne Breslin:**

No. So, as I mentioned, the TRICARE Pharmacy Program is the same no matter what TRICARE health plan you're enrolled in. So, becoming eligible for TRICARE For Life does not change your pharmacy benefits.

**Host:**

If you don't live overseas, but travel overseas for vacation, are you still covered by TRICARE For Life?

**Anne Breslin:**

You are. So, you wouldn't have Medicare as a primary insurer. So, TRICARE would become your primary payer, and you'd be responsible for the TRICARE deductible and cost share associated with the care you receive. Generally, when you receive care overseas, you have to pay up front for that care, and then file a claim. You would file that with the TRICARE Overseas Program contractor, which is International SOS and I believe you have up to three years to submit those versus in United States, they have to be submitted within one year.

**Host:**

For TRICARE for Life coverage, do we need to ensure the provider accepts Medicare and TRICARE For Life, or is TRICARE for life assumed?

**Anne Breslin:**

If the care you are receiving is provided by Medicare, the most important thing is that you find a provider that accepts Medicare either as a Medicare participating or Medicare non-participating provider.

**Host:**

So, once I'm eligible for Medicare, my wife who is younger stays on TRICARE Select as I'm a retiree, and the TRICARE Premium goes to single instead of family?

**Anne Breslin:**

That's correct.

**Host:**

Are pharmacies at military treatment facilities MTF part of the TRICARE Pharmacy Program?

**Anne Breslin:**

Yes, they are.

**Host:**

Under TRICARE Prescription Program, do we need to do anything to transition from Walgreens to the program?

**Anne Breslin:**

So I believe Walgreens is one of the network providers. You can verify whether a pharmacy is part of the TRICARE network of providers, the [tricare.mil/pharmacy](http://tricare.mil/pharmacy) webpage. So, there would be no transition if that pharmacy is part of the network.

**Host:**

How do you cancel TRICARE Select?

**Anne Breslin:**

I'm not an expert on enrollment, but we have annual enrollment periods for TRICARE Select, but if you're turning 65, then you become entitled to Medicare, you will be automatically disenrolled from Select. And then your TRICARE For Life starts the date you have A and B.

So, if you sign up late for Part B, then you have a period of time where you have Part A only. You will already have been disenrolled from TRICARE Select and you will have nothing until your Part B coverage starts. Refer back to my slides. Anytime you have Part A only, there's no coverage. The month that you turn 65, let's say your birthday is any

day other than the 1st, your Medicare coverage should be effective the first of the month in which you turned 65.

So, you will be disenrolled from Select or Prime at midnight before the first of the month in which you turn 65. So, that's when you want to make sure you have your A and B.

**Lennya Bonivento:**

Hi, Anne. This is Lennya Bonivento. Sorry, from DHA communications. Just wanted to add on to the information about TRICARE Select. You can disenroll from TRICARE Select at any time by contacting the contractor or going through the BWE. However, if you do disenroll, you cannot enroll into any other plan until, like Anne mentioned, during open season and this is just about disenrolling from TRICARE Select.

It has nothing to do with the information that Anne gave about the TRICARE For Life transition. So, just to answer the question about disenrolling from TRICARE Select, you can do so by contacting your contractor or going to the BWE website. But you would not be able to switch into another plan unless you have a qualifying life event.

**Host:**

I retired from the Navy Reserve after 27 years. I'm under my husband's insurance at present. Will my TRICARE For Life be different from anyone who was active duty?

**Anne Breslin:**

You're eligible on your own or on your sponsors' record. Anyone else have anything else to add to that?

**Calvin Keller:**

Yeah. Hi, Anne. This is Calvin. I'm calling from DHA Communications as well. When you say you retired from the reserves after 27 years, I am hoping that you mean that you have reached the age of 65. Because if not, you don't become eligible for TRICARE benefits until you are 60. And then you're eligible for Prime if available in your area or Select thus, when you become 65 and you're ready to become TRICARE For Life. As Anne stated, you must have Medicare Part A and B to get TRICARE.

**Host:**

Then last question, Anne, I already have Part A and Part B, birthday is June 5, do I need to go to DEERS and update my status?

**Anne Breslin:**

DEERS, if you already have your A and B, they probably know that. It would have come across on data match. But what you need to do is, look at your military ID card and see when it says firing and contact your local ID card facility and get a new updated card.

**Host:**

And Anne, do you have any final or closing thoughts that you'd like to share with the audience?

**Anne Breslin:**

I am thankful that you all took the time to listen to the information I had to share with you today. Do use the multiple references that are included because everything that I've shared with you should be in print and very clear.

If something I said didn't make sense to you, maybe if you read it directly, you'll find it more helpful. If we didn't answer your questions, I believe there may be an opportunity to submit more and we're happy to address them as time permits. Thank you very much.

**Host:**

I just want to thank Anne and her team for sharing your invaluable experience and expertise today. I'd also like to thank you all of our attendees for participating in today's webinar. If we didn't answer your question today, please refer to the contact information and your copy of the webinar slide deck. Also, you may find the answers to questions about TRICARE on the TRICARE website at [tricare.mil](http://tricare.mil). This concludes today's webinar on Getting Started with Medicare and TRICARE. Thank you.