

Making the Most of the TRICARE Open Season

Transcript

- **[Moderator]** Welcome to today's webinar, titled, Making the Most of the TRICARE Open Season. Open season for TRICARE beneficiaries starts November 8 and ends December 13. Now is the time to review your and your family's current health plans, consider your needs for 2022 and learn about your coverage choices. Join us as TRICARE experts review your health care coverage option for the upcoming plan year.

We are thrilled to have with us today, Jeremy Schneider, program analyst, TRICARE Policy and Program Section, Defense Health Agency; Valerie Palmer, program analyst TRICARE Policy and Program Section, Defense Health Agency; and Zelly Zim, program analyst TRICARE Policy and Program Section, Defense Health Agency. Without further delay, I will turn things over to Mr. Schneider.

- **[Jeremy Schneider]** Thank you, ma'am. To start with, a couple of housekeeping notes. The disclaimer: The appearance of hyperlinks does not constitute endorsement by the Department of Defense of this website or the information, products or services contained therein. For other than authorized activities such as military exchanges and Morale, Welfare and Recreation sites, the Department of Defense does not exercise any editorial control over the information you may find at these locations. Such links are provided consistent with the stated purpose of this Department of Defense-sponsored webinar.

And just a summary of our briefing today. Open season for TRICARE beneficiaries starts November 8 and ends December 13. Now is the time to review your and your family members' current health plan, consider your needs for 2022 and learn about your coverage choices. Join us as TRICARE experts review your health care coverage options for the upcoming plan year.

Here's an agenda and an overview of what we're going to be talking today. Beginning with an overview of the open season itself, moving through the different Prime and Select options covering the FEDVIP program and some of our resources and closing out with an opportunity to field your questions.

What is open season? TRICARE open season is the annual period where you can enroll or change your health care coverage for the upcoming year. This year it runs from November 8 to December 13. Generally, it runs from the Monday of the second full week of November through the Monday of the second full week in December. Changes you make during this, unless you are in a current QLE, will take effect on January 1,

2022. For example, if you're currently in TRICARE Select and you elect to move to TRICARE Prime, you would remain covered under TRICARE Select through December 31 of this year.

Outside of open season, you can only enroll in plans, or make changes during a qualifying life event and the period following. Qualifying life events, you can find the full list at tricare.mil/lifeevents, but this is typically things like marriage or divorce, having or adopting a child, especially in the military community, moving and PCSes. We also have a link here to learn more about open season at tricare.mil/openseason.

Who does open season apply to? Basically, it's anybody who's eligible for or enrolled in TRICARE Prime or TRICARE Select or the US Family Health Plan, excepting active-duty service members who are always TRICARE Prime, and we have a link here for you as well.

Who does not apply to? As mentioned, active-duty service members who are always TRICARE Prime, TRICARE Remote or TRICARE Overseas Prime Remote or TRICARE Overseas Prime. It also does not apply to TRICARE For Life. People with TRICARE For Life are those who are eligible for and enrolled in Medicare Part A and Part B. Learn more about TRICARE For Life coverage at tricare.mil/tfl.

TRICARE Open Season also does not apply to the premium plans of TRICARE Retired Reserve, TRICARE Reserve Select or TRICARE Young Adult. These are continuously open-enrollment programs which at any time that you are not locked out or previously going to pay premiums you can enroll in these plans. We also have here a link where you can compare your health plans.

What are your options during open season? Basically, you've got three different options. You can stay in your plan. You can enroll in a plan or you can change plans.

If you want to stay in your current plan, you don't have to take any action. You just continue on your current plan coverage throughout 2022 or as long as you remain eligible. If you're currently eligible for a plan but not enrolled and you are not currently in a qualifying life event period, then this is your opportunity to enroll in a TRICARE Prime option or TRICARE Select. If you're already enrolled in either TRICARE Prime or TRICARE Select, you can elect at this point to switch health plans, either between Prime, US Family Health Plan, Select or the other options for overseas. You can also make changes between individual and family enrollment. Again, assuming that you're not currently within a qualifying life event period. Have a note, if you are not enrolled in a health plan and you choose not to enroll in one, you're only going to be eligible for space available care at military treatment facilities.

Questions for choosing a health plan. We've got several different links here. Based on the questions, there's a lot of resources on [tricare.mil](https://www.tricare.mil) for making your decisions. Which TRICARE plans you may be eligible for, which health plan is most suitable for you and your family, how much it costs, or whether you prefer care in the direct care system at military treatment facilities or you prefer private-sector providers. Your level of choice and independence in choosing which providers you see, and whether you've got any big life changes such as moves or having or adopting children, any of those.

Who is eligible for TRICARE Prime? TRICARE Prime is the health care option for active-duty service members, their families, retirees and their family members and certain other folks that are located within Prime service areas — that big circle that we draw around the military treatment facilities.

Depending where you live and your TRICARE and your sponsor's status, you may have other TRICARE Prime options, including TRICARE Prime Remote for active-duty service members and their eligible family members who live outside of the Prime service area; the US Family Health Plan, which is in six different geographic areas; and then, the TRICARE Overseas Prime and Prime Remote plans, which are for active-duty service members and command-sponsored family members in those locations. As noted with active duty, active-duty service members are always in TRICARE Prime and there is not an option to not be enrolled in TRICARE Prime.

TRICARE Prime is a managed care option, similar to the health maintenance organization or HMOs. What this means is, we also call this gatekeeper medicine, primarily you get all of your care through your primary care manager. And that would either be a provider in a military treatment facility. It can be a civilian TRICARE network provider or if you're in the US Family Health Plan, you have a primary care provider there as well. The primary care provider then provides you with referrals for any specialty care needs and any care that they cannot provide.

Out-of-pocket cost for TRICARE Prime. In general, TRICARE Prime has some slightly lower out-of-pocket costs than TRICARE Select. Active-duty service members, family members and transitional survivors have no enrollment costs. There are enrollment fees for retirees and their family members. Active-duty service members have no out-of-pocket costs for covered health care services or any costs with appropriate referrals and authorizations to use civilian providers. Active-duty family members have no out-of-pocket costs for covered health care services from a network provider or with appropriate referrals and authorizations. Retirees do pay copayments and cost-shares for covered health services. And for each of the plan and depending on what your status is as active-duty or retiree with sponsor, your out-of-pocket costs are limited by your catastrophic cap. And we have a link here to [tricare.mil/comparecosts](https://www.tricare.mil/comparecosts) for you to be able to see the cost information. One note is, as of this point, we do not have the finalized published numbers for 2022.

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We do expect that those will be published in the very near future. So, if you go there right now, you will not see those, but we are hopeful that those will be at latest by the start of open season, if not within a short period after. I understand that our folks do have a gov.delivery automated email which you can sign up for on [tricare.mil](https://www.tricare.mil) if you'd like to receive an email notification when those are published.

TRICARE Select eligibility. TRICARE Select is a health care option for people who aren't enrolled in TRICARE Prime and who are not entitled to Medicare except for active-duty family members who are entitled to Medicare. This includes active-duty family members, retirees and retiree family members. As noted before, active-duty service members are always TRICARE Prime and may not use TRICARE Select. In overseas locations, TRICARE Overseas Program Select is available to the same categories of people.

Unlike TRICARE Prime, TRICARE Select is a self-managed care option similar to a preferred provider organization or PPO. Under TRICARE Select, you are not required to have a PCM. You can choose your own providers, whether for primary care or specialty care needs and without a referral in most cases. You will have lower out-of-pocket cost if you use the TRICARE authorized network provider versus the TRICARE authorized non-network provider. To find the TRICARE network provider, you can go to the link at [tricare.mil/finddoctor](https://www.tricare.mil/finddoctor) or call your regional contractor. If you choose to see a TRICARE non-authorized and non-network provider, you will not be able to be reimbursed by TRICARE. And as mentioned, you don't need a referral or pre-authorization in most situations.

Out-of-pocket cost for TRICARE Select. In general, TRICARE Select has slightly higher out-of-pocket costs than TRICARE Prime. Active-duty family members have no yearly enrollment fees. For retirees, their families and others, you may have enrollment fees based on when you or your sponsor initially joined the military. This is generally Group A and Group B. The dividing line is generally whether you joined before or after January 1, 2018. You do pay a yearly deductible and per-visit copayments or cost-shares when following rules of your plan. Out-of-pocket costs similar to TRICARE Prime are limited to the yearly catastrophic cap. Non-participating non-network providers may charge up to 15% above the TRICARE allowable amount and you would be responsible for this additional amount along with deductible and copayments or cost-shares. And again, we have the cost comparisons available at [tricare.mil/comparecosts](https://www.tricare.mil/comparecosts).

The differences between TRICARE Prime and TRICARE Select we just kind of charted out and given a basic overview. TRICARE Prime is an HMO, managed care gatekeeper-style plan where you see your primary care manager and everything runs through them. And

when you need specialty care, your PCM will refer you out to the appropriate specialist. TRICARE Select, whether you're seeking primary care or specialty care you're not required to go through a PCM to obtain a referral, you can see any provider of choice in most cases. Pre-authorization for some services does exist in both Prime and Select.

TRICARE Prime is very much focused on the established network providers, whereas TRICARE Select you can choose non-network providers. However, you will pay higher out-of-pocket cost when you go outside of the TRICARE network. And TRICARE Prime, finally, does not have a deductible but does have copayments for beneficiaries except for active-duty service members and family members. TRICARE Select has deductibles, copayments and cost-shares.

How do you change, enroll in or change your enrollment? We've got some links here. Basically, we've got the milconnect site at milconnect.dmdc.osd.mil and Manage health benefits. You can also do it by phone by calling your regional TRICARE contractor, and you can find contact information that we include in a later slide at tricare.mil/partners. You can also mail an enrollment form in, tricare.mil/forms, or in person overseas at a TRICARE Service Center. You can learn more about your enrollment at tricare.mil/enroll.

One of the most key points in TRICARE is ensuring that your DEERS information remains up to date. If you move, you change your email, you change your phone number, you should always make sure that you keep your DEERS information up to date. And you have here the links to go through milConnect or by phone by fax, visiting your local ID card office. This is critical because when TRICARE sends notifications to you, they are going to rely on the data that's in the system. If you have an out-of-date address, you may not receive notifications affecting your health care coverage and your health plan. If you have enrollment concerns, you can call your regional TRICARE contractor, and you can also learn more about DEERS at tricare.mil/deers.

Federal Benefits Open Season is a chance to enroll in or make changes to your existing Federal Employee Dental and Vision Insurance Program plan, also known as FEDVIP. FEDVIP is not administered by the Defense Health Agency. It's administered by the U.S. Office of Personal Management, also known as OPM. The 2021 Federal Benefits Open Season is the same as TRICARE Open Season running from November 8 to December 13. Similar to TRICARE, enrollment changes made during Federal Benefits Open Season take effect on January 1, 2022. This is a separate enrollment from TRICARE Open Season and you would have to enroll by going to benefeds.com.

If you're already enrolled in FEDVIP and you don't need to make any changes, you'll automatically be rolled over into 2022 plans. We also have here at the bottom of the slide, a link to FEDVIP webinars covering all of the information regarding the various FEDVIP plans and options at benefeds.com/education-support/dental-vision-webinars.

Here, we just have a chart of whether you can purchase FEDVIP coverage and whether that applies to dental or vision. Active-duty service members do not qualify for either of those and they are fully covered under TRICARE.

Active-duty family members can enroll in vision but not dental. They can go through TDP, the TRICARE Dental Program, as well as reserve component members and their family members that are enrolled in TRICARE Reserve Select, or TRICARE Retired Reserve, they can also enroll in TDP. Retirees and family members enrolled in TRICARE Prime or Select qualified for dental envision as well as TRICARE For Life members or dental and I cvision.

In order to use FEDVIP vision programs, you must be enrolled in a TRICARE health plan or in the case of TRICARE For Life, you're automatically covered anytime that you have both Medicare Part A and Medicare Part B.

Here, we just have some resources that are available to you online at tricare.mil/publications. Here, you can find out more about your TRICARE choices either here in the U.S., or overseas. You can get information on the different plans as well as the cost of each of the programs for different cost-shares and copayments as applicable.

As noted previously, this is currently, we are still pending publication of the final 2022 dates and those will be available online as soon as those are approved. Here, we just have some links to the regional contractors, US Family Health Plan, TRICARE Overseas Program and TRICARE For Life. Here's just some links, some helpful links for various things about TRICARE. You've got the TRICARE Newsroom, changes in TRICARE, important information about COVID-19 and as well as the TRICARE Podcast, and Facebook and Twitter links as well. And with that I'm prepared to take any questions that you have.

- **[Moderator]** Thank you so much. So, Mr. Schneider we do have a few in the box already. I have been enrolled in TRICARE Select for some time. I have not used it because I had other health insurance. My other health insurance expires in December. I am not eligible for Medicare. Do I need anything to make TRICARE Select my primary insurance as it will be my only insurance in January?

- **[Jeremy Schneider]** If this person is currently enrolled in TRICARE Select and just like not used it, the only thing that we could think of is if they had not used it, then they would just need to start using their TRICARE Select Benefit. There would be a question of whether their other health insurance is registered in DEERS and they could visit their local ID card office or call the regional contractor to ensure that we are not maintaining the other health insurance information in the system once that expires, given that it's

still through December, this would probably be a later call, but that would be the only hiccup in the system would be if we have a record of that is listed as primary.

- **[Moderator]** Is TRICARE For Life open to spouses that have Medicare A and B and are not yet aged 65? I'll turn 65 on January 28, 2022. My husband is already 69 and has Medicare as well.

- **[Jeremy Schneider]** TRICARE For Life's eligibility is based on the individual. So, once the individual is Medicare eligible, and that's either through age or certain conditions or disabilities prior to age 65, once they're entitled to premium pre-Medicare Part A, they must have Medicare Part B in order to maintain TRICARE coverage. TRICARE coverage or folks with Medicare Part A and Medicare Part B is automatic, and there's no enrollment required. The only exception to this are active-duty family members who can remain in TRICARE Prime or TRICARE Select without having Medicare Part B.

- **[Moderator]** This one is more of a scenario, a Marine deploys and spouse moves back home to Tennessee. Can the spouse enroll in Prime Remote since Prime is not an option in the area or does the sponsor need to live with them?

- **[Jeremy Schneider]** Normally, this would be based on where the sponsor is stationed. In this scenario, it sounds like the person is moving back to a place that is not tied to orders for the sponsor. So, in this case, the person should not be in Prime Remote and would have to go with TRICARE Select.

- **[Moderator]** If you have a pre-existing HSA account, can you use this account to pay for out-of-pocket costs under TRICARE Select?

- **[Jeremy Schneider]** I think for this one, we need to take that one back for research and then a more thorough answer.

- **[Moderator]** And where can I get information about how TRICARE Select would work as a secondary insurance?

- **[Jeremy Schneider]** I'm not sure I fully follow the question there. If you have other health insurance such as primary through a — such as you're a retiree, and you have through your employer, sponsored coverage, TRICARE pays secondary. So, it would be processed by your primary payer and then processed again as a secondary and that can either go through your provider's billing directly to TRICARE or when you receive a claim from your — and a payout from your other health insurance, then you can also submit that to your regional contractor for TRICARE to pay secondary.

- **[Francine]** This is Francine from customer service. If you go to [tricare.mil/ohi](https://www.tricare.mil/ohi), it has a basic explanation of the process. The one thing I would like to emphasize is you always

have to follow the rules of your primary plan. You can't assume that if you got denied by your primary plan because you didn't use the right kind of provider that TRICARE will pick it up. You have to follow the rules of your primary plan.

- **[Moderator]** Can a retiree have TRICARE Prime and his spouse has TRICARE Select, or do they have to be on the same plan?

- **[Jeremy Schneider]** Yes, they can be on separate plans, and then they would just pay the individual rate in each one of those plans that they're enrolled in.

- **[Moderator]** I'm enrolled in TRICARE Select. I also have Blue Cross Blue Shield. I plan to drop the BCBS this year and TRICARE will be my primary insurance. Do I need to notify TRICARE?

- **[Jeremy Schneider]** This, again, yes, you should contact your regional contractor. If we have recorded that you have current OHI in there and we are expecting to pay secondary and that's no longer valid, you should call your regional contractor to ensure that that coverage is no longer reflected in our systems.

- **[Moderator]** I will be eligible for TRICARE Select on December 29, age 60, after open season ends, how should I enroll?

- **[Jeremy Schneider]** When you become eligible, that is considered a qualifying life event, so in those cases you have 90 days from that point in order to enroll with an effective start date of your first eligibility point. So in this case if it's December 29, you've got until March 28 I believe, then you've got 90 days to enroll after that point with an effective date back to December 29. Otherwise, you would have to wait for another qualifying life event or next year's open season for coverage to begin in January 2023.

- **[Francine]** In order to enroll, you can either do it online, you can call the contractor or you can fill out an enrollment form. And again, if you go to tricare.mil/enrollment it will outline those processes for you, so you can do that. But I'd also like to add information on that previous question about health savings accounts. TRICARE doesn't qualify as a high-deductible health plan, so we cannot — it doesn't work with TRICARE. You can't use your health savings account with TRICARE.

- **[Moderator]** Thank you. For dental, are active duty families only able to enroll in United Concordia Dental Plan?

- **[Calvin]** This is Calvin with DHA customer service, and exactly, active-duty family members are limited at this time to enroll in the TRICARE Dental Program which is administered by United Concordia.

- **[Moderator]** What is the difference in coverage if you need medical attention during an overseas trip?

- **[Jeremy Schneider]** When you're traveling overseas, everything, you would contact the International SOS. In some cases you may have to pay upfront to overseas providers who don't necessarily recognize our systems. International SOS can help direct you to some of the network providers who will bill them directly, but especially if you're in more remote areas, you can generally expect to possibly pay upfront and be reimbursed. The coverage rules remain the same, the out-of-pocket expenses and all of that just as a non-network provider.

- **[Francine]** This is Francine. I want to also add that if you are a Prime enrollee, when you are overseas, you file claims with the overseas contractor, and even if you're Select or Medicare TRICARE For Life, claims are always filed with the overseas contractor, not with the contractor, not with the plan that you're enrolled in stateside.

- **[Moderator]** Please explain how USFHP differs from TRICARE Select?

- **[Jeremy Schneider]** USFHP is similar to, if you may be somewhat more familiar on the civilian side, think of things like Kaiser. It's a relatively closed HMO-type network. So each of the USFHP locations, they've got their own network and providers. One key difference from USFHP is a form of TRICARE Prime coverage with a key difference being that USFHP members, except for very specific instances such as emergency care, are not eligible to use military treatment facilities. Otherwise, generally all care goes through and it's managed by the regional USFHP designated provider and their primary care providers and their specialty network that they have.

- **[Moderator]** My daughter's sponsor is active duty; how would she get signed up for dental?

- **[Calvin]** This is Calvin again from customer service. The sponsor would need to enroll her into the TRICARE Dental Program sponsored through United Concordia. You can go to tricare.mil under the Dental section and you will find the information on how to enroll.

- **[Moderator]** FEDVIP is just to cover dental and vision, where TRICARE is general health care, correct?

- **[Jeremy Schneider]** That's correct.

- **[Moderator]** I am enrolled in Prime, do I have to use the MTF or a PCM or can I use a network provider in the area?

- **[Jeremy Schneider]** You'll be enrolled either to a primary care manager at the MTF or a network provider based on the rules in your Prime service area.

- **[Moderator]** How do you select or change a PCM? Does that have to be during open season?

- **[Jeremy Schneider]** No, PCM changes can happen at any time, either as directed by the MTF or contractor as needed or requested by the individual.

- **[Moderator]** I have TRICARE Select as a secondary insurance. Will health costs that apply to my primary insurance deductible also apply to the TRICARE deductible?

- **[Jeremy Schneider]** No, any deductibles are unique to the plans that you have.

- **[Moderator]** Retired reserve just turned 60. How do I set up a payment for premium?

- **[Jeremy Schneider]** You can either do that through BWE and I don't know, Calvin, if you've got the link available for that, or by contacting your regional TRICARE contractor.

- **[Calvin]** Correct Jeremy, and that's the Beneficiary Web Enrollment portal is accessed through milConnect and there is not, it's not a premium you pay, it's an enrollment fee that you will pay when you turn 60 and you enroll in TRICARE Prime or TRICARE select.

- **[Francine]** And then to answer how do you pay, we are really encouraging our retirees to pay by allotment and each of the contractors has a process by which you can set up that allotment. Otherwise you have to set up — you may have to make an initial enrollment fee payment for like the first three months and then after that you can use the allotment. You can use an ongoing recurring credit card or debit card or a recurring electronic fund transfer from a financial institution.

- **[Moderator]** If I have an employee health care, can I use TRICARE Prime for a secondary health plan?

- **[Jeremy Schneider]** Yes.

- **[Moderator]** I was previously enrolled in TRICARE Select but failed to contribute towards the plan in time. What action on my part to receive the coverage for 2022?

- **[Jeremy Schneider]** This sounds like someone who lost their TRICARE Select coverage. Then this is open season, this is your chance to reenroll. So you need to use one of the options that we've shown you there, either contact online, contacting your regional contractor and then your new enrollment would be effective on January 1, 2022.

- **[Moderator]** When you use your TRICARE Select for the first time, I think I read you only need to declare that and show your military ID at your doctor's office, assuming this is an in-network provider, is that correct?

- **[Jeremy Schneider]** Normally that should be correct.

- **[Moderator]** Will current allotment remain in place with any change in plan coverage?

- **[Francine]** This is Francine. You need to designate if your allotment is going towards Prime or going towards Select. For instance, even on that previous question about can the sponsor be Prime and the spouse be Select, yes, they can, but they actually have to set up two different allotments. Because the allotment amount itself is different and you have to be reflected as showing which plan you are covered under. So again, contact your regional contractor for assistance.

- **[Moderator]** I am moving soon. My husband will be in one location and my son and I will be in a different location. Can we be covered in two different locations?

- **[Jeremy Schneider]** Yes, and as with so many of these, contact your regional contractor if you need assistance.

- **[Moderator]** Is there a significant cost difference between Prime and Select if a person needs surgery, or can a Select member still get care at a military hospital?

- **[Jeremy Schneider]** A Select member can still get treatment at a military treatment facility on a space-available basis. When you're talking about things like, high-cost things like surgeries, it is important to, there's a relatively small difference, it is a few hundred dollars. I think currently in 2021 we have for retirees in Prime versus Select, I think the catastrophic cap ranges from \$3,000 in Prime to \$3,700 or so in Select, and you can view those, the actual costs on tricare.mil. So looking at your out-of-pocket expenses for high-cost things, I would definitely look at your catastrophic cap as being the worst case scenario and normally you're backing up from there, for those.

- **[Moderator]** If I live in an MTF area, am I required to use military doctors or can I use civilian doctors?

- **[Jeremy Schneider]** That's going to depend on your plan or whether you're TRICARE Prime and Select, and the local, if you're in Prime and involved with the MTF, you're normally going to be directed to the MTF first and the MTF specialist. If you want full ability to see whomever you want, but it is going to be focused on the civilian side of care, that would be the TRICARE Select option where you do not need referrals for most treatment.

- **[Moderator]** I am currently enrolled in TRICARE Prime and will be losing my other health insurance the middle of this month, what do I need to do, I am not yet eligible for Medicare?

- **[Jeremy Schneider]** I think this is one, another scenario that we've already covered, contacting the regional contractor to make sure that they are tracking that you've lost your other health insurance so we don't have that in our system and aren't reflecting a secondary. If you're already enrolled, then you should be good to go. If you're not enrolled and you wish to enroll or you wish to change your plans, this open season is your opportunity to do so.

- **[Francine]** This is Francine. I want to add a cautionary tale as well. Besides checking to make sure that your other insurance no longer reflects in the Defense Enrollment Eligibility Reporting System, we also make sure that you notify any of the providers that you're currently seeing to let them know that you've dropped your OHI and that TRICARE is now going to be your primary payer, because otherwise they will continue to bill your OHI unless you tell them otherwise.

- **[Moderator]** We are currently TRICARE Prime; however, my retired spouse is served by the VA, 100% of your costs are covered through them. I would like to switch to TRICARE Select. Is there an option for the spouse only to be covered by TRICARE Select or do we both need to be covered through there?

- **[Jeremy Schneider]** Both spouses can be on separate plans.

- **[Moderator]** I have TRICARE Prime and my doctor has scheduled me for a colonoscopy in December, do I need a referral or approval?

- **[Jeremy Schneider]** Yes, you do need a referral for that, or you should need a referral for that colonoscopy.

- **[Moderator]** How do I get urgent care?

- **[Jeremy Schneider]** For Prime or Select, unless you're active-duty service member, you do not need a referral to visit an urgent care center.

- **[Moderator]** Does the active duty service member have to be the one who enrolls or makes plan changes for their family members or can the spouse of the member do that?

- **[Francine]** This is Francine. If the spouse is showing in DEERS, they should be able to make changes for the family member. Again, as Jeremy pointed out at the beginning, the sponsor can't change plans, but as long as this is an intact family unit. If there is a

divorce then the children are covered under the sponsor, but the ex-spouse isn't, then at that point the sponsor has to be the one to manage the child's health care services.

Oh, and I want to add one more thing, I apologize. While Jeremy was talking I looked up coverage for colonoscopy, and basically it is considered a preventive service and beneficiaries can get one. A typical colonoscopy or a flexible sigmoidoscopy, you can get a typical colonoscopy once every 10 years starting at age 45 without a referral as long as you're considered at average risk. However, if there is a history, then typically you would need the referral to justify more than that frequency.

- **[Valerie Palmer]** And this is Valerie Palmer. I just want to clarify, too, that if you're TRICARE Prime, you could receive any clinical preventive services from any network provider within your region of enrollment without a referral or authorization. So that goes for Pap smears, mammograms, colonoscopies and anything preventive. But if you want to see a non-network provider, that's where you do need a referral from your primary care manager, because if you don't get that referral, then payment is going to be made under the point-of-service option and that's a high cost that you don't want to incur. So please be aware whether you're going through a network or non-network provider first.

- **[Moderator]** If I retire in 2022, can I then make TRICARE Prime my primary health care; I will not be 65 yet?

- **[Jeremy Schneider]** Yes.

- **[Moderator]** I have Humana now and I want to switch to TRICARE, but I noticed it says Humana TRICARE, do I need to contact Humana?

- **[Jeremy Schneider]** So I am not clear on the question there, they have been with Humana as their TRICARE regional contractor or are they with civilian sector Humana? They may wish to clarify this one offline. If it's just that they're currently with Humana as the regional TRICARE contractor, then yes, that is the regional contractor to contact for any changes.

- **[Moderator]** Can you still receive treatment from a Military Treatment Facility if you are enrolled in TRICARE Select?

- **[Jeremy Schneider]** You can. However, it is on a space-available basis.

- **[Moderator]** Do I need to sign up in a plan for 2022 in order to carry over in TRICARE For Life at 65? I am the spouse of a military retiree and have not yet signed up for a plan in 2021. I have direct care for military hospitals at the moment on a space available basis.

- **[Jeremy Schneider]** If a person is not yet Medicare eligible, if they want anything other than direct care prior to becoming Medicare eligible, this would be the time to sign up for coverage beginning January 1, 2022 until whatever time that they turn 65 and Medicare becomes primary. And just as a reminder on the TRICARE For Life, in order to be eligible for coverage by TRICARE For Life, you do need to have Medicare Part A and Part B.

- **[Moderator]** If I use the VA, does it bill TRICARE for services?

- **[Jeremy Schneider]** That's a rather complicated question and I don't think we have enough information there to be able to give an answer on that one.

- **[Francine]** This is Francine. And basically what we tell a beneficiary is that the VA and TRICARE aren't overlapping. The only time it does, TRICARE will pay for care to VA if you were referred and authorized to see them as the TRICARE Prime enrollee. If you access care at an MTF and have to pay a cost-share, TRICARE cannot cover that cost-share at the VA. These are two separate funded entitlements and they do not cross over.

- **[Calvin]** This is Calvin. And please let me also add that if you are TRICARE For Life and if you opt to see the VA, since the VA, since Medicare does not pay the VA, TRICARE will only pay 20% of the bill charges. You would be required for the other 80%. So if you are a veteran that gets care at the VA, you should look at utilizing your TRICARE For Life benefit as much as possible to avoid paying that 80% out-of-pocket cost to the VA.

- **[Moderator]** If your child's TRICARE Prime coverage will be ending and he is turning 23 years old with a disability but still in college, will he be able to continue under TRICARE Prime or TRICARE Young Adult?

- **[Jeremy Schneider]** Normally they should be able to continue under TRICARE Young Adult. I did note that you mentioned the word disabled in there. If the child still qualifies as an adult disabled dependent, it's possible that they could remain under TRICARE Prime with the family, but that is a program that's managed by the sponsor's service. So you should go through your sponsor's service if there is a question with disability and whether this person may qualify as an adult disabled dependent.

- **[Moderator]** What is our yearly enrollment fee as Medicare A and B recipient?

- **[Jeremy Schneider]** If you are TRICARE For Life, there is no enrollment fee from TRICARE. The payment that you have is the Medicare Part B monthly premium.

- **[Moderator]** What is the best way to get information about what is the best option, Select or Prime, for my family? I've gone through the links but still have questions. Is there anyone I can talk to to get clarification?

- **[Francine]** This is Francine and what I would suggest first is going to tricare.mil and there is a plan comparison tool so you can kind of see, and really that is based mostly on cost, and so depending upon what you anticipate your family's health care needs would maybe be part of the rationale for your decision. But if following that, if you have additional questions, then call your regional contractor, but try to be as specific as possible when you ask those questions because there are oftentimes circumstances that may affect the answer.

- **[Moderator]** I am 61, retired from the National Guard and I am waiting for it be finalized. Can I enroll in TRICARE Prime now?

- **[Jeremy Schneider]** You can enroll in TRICARE Prime once you are eligible. Generally for retirees and the situations for the Guard and reserves and the turning age 60, it is contingent on being in receipt of full retirement benefits, including retiree. So we do have the ability to backdate a certain amount of time once you do become eligible. But TRICARE and DEERS eligibility is what's going to define that and that will not be updated until your retirement paperwork is completed by your service.

- **[Moderator]** Her husband moved to TRICARE For Life from TRICARE Select, she is on TRICARE Select and she is just wondering is there anything she needs to do to stay on TRICARE Select?

- **[Jeremy Schneider]** If she is currently on TRICARE Select, then she does not need to take any action during this Open Season and she would remain on TRICARE Select until such time of course as she becomes TRICARE For Life eligible.

- **[Moderator]** What is a contractor as it relates to TRICARE?

- **[Jeremy Schneider]** So we have regional contractors here, currently east and west and an overseas contractor covering everywhere strictly outside of the U.S. These regional contractors basically manage TRICARE out in the network, they manage their networks, they bring providers into the network, they do claims processing, customer service, a whole list of things.

- **[Moderator]** I have one last question, does my enrollment in either TRICARE Prime or TRICARE Select affect my prescription coverage?

- **[Francine]** This is Francine, and enrollment — your health care plan enrollment does not affect your prescription coverage. Again, prescription coverage is basically based on

the medication that you are on, whether you use the MTF, home delivery or retail and that really is about it.

- **[Moderator]** Mr. Schneider, before we end today's webinar, do you have any final thoughts?

- **[Jeremy Schneider]** I'd just like to thank everybody for all of those very good and sometimes tough questions. I'd like to also thank Mel, Francine and Calvin for jumping in and saving me on more than one occasion, and just <inaudible> for everybody, if you need to take action and you want to enroll in or change your plan, November 8 to December 13, this is your shot.

- **[Moderator]** I want to thank Mr. Schneider, Ms. Palmer and Ms. Zim for sharing their invaluable experience and expertise. I would also like to thank our attendees for participating in today's webinar. If we didn't answer your question today, please refer to the contact information in your copy of the webinar slide deck. Also, you can find many of the answers to questions about TRICARE on the TRICARE website at tricare.mil.

This concludes today's webinar on Making the Most of the TRICARE Open Season. Thank you!