

TRICARE Reserve Select



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This flyer is **not** intended to be all-inclusive. For additional information, please contact your regional contractor, local military treatment facility, or TRICARE Area Office.

TRICARE Reserve Select (TRS) is a premium-based, worldwide health plan that qualified National Guard and Reserve members may purchase. This flyer summarizes health care benefits and costs, and explains how to qualify for and purchase TRS coverage.

The benefits of purchasing TRS include:

- Comprehensive health coverage similar to TRICARE Standard and TRICARE Extra (*in the U.S.*) or TRICARE Overseas Program (TOP) Standard (*overseas*)
- Two types of coverage available: TRS member-only and TRS member-and-family
- Freedom to access covered services from any TRICARE-authorized provider or hospital
- Access to military treatment facility (MTF) care on a space-available basis

Qualifying for TRICARE Reserve Select

National Guard and Reserve members may qualify to purchase TRS coverage if they are:

- A member of the Selected Reserve of the Ready Reserve
- Not eligible for or enrolled in the Federal Employees Health Benefits (FEHB) program

Note: If you are eligible for or enrolled in the FEHB program, you are not eligible for TRS. Contact your employer's personnel office for coverage under the FEHB program.

Purchasing TRICARE Reserve Select

If you qualify, you may purchase TRS coverage to begin in any month throughout the year. To purchase TRS:

- Log on to the Guard-Reserve TRICARE Reserve Select (TRS) Program Web site at <https://www.dmdc.osd.mil/appj/trs/index.jsp>
- Select "Purchase Coverage" and you will be asked to confirm whether you are eligible for the FEHB program.
- If your FEHB status qualifies you for TRS, you will then be guided through the process of selecting a start date and electing which family members you wish to enroll.
- Print and sign the completed *TRS Request* form (DD Form 2896-1), then mail the form along with the first month's premium payment to your regional contractor (*See the For Information and Assistance section*) by the applicable deadline.

Coverage begins on the first day of the first or second month (*whichever you select on the TRS Request form*) depending on the postmark date of your *TRS Request* form.

If you lose coverage under a non-premium TRICARE health care plan and qualify for TRS, you may purchase TRS with no break in coverage. Submit your completed *TRS Request* form* with an enclosed premium payment postmarked **no later than 60 days** after the loss of the non-premium TRICARE coverage. TRS coverage begins on the day after the loss of your prior TRICARE coverage.

* *If you are not able to complete or print the form, there may be a problem with your information in the Defense Enrollment Eligibility Reporting System (DEERS) or a problem with your eligibility. Contact your National Guard or Reserve personnel office for assistance. Visit www.defenselink.mil/ra/html/tricare.html for a list of TRS points of contact. If you experience a technical problem, contact the Defense Manpower Data Center Support Office at 1-800-538-9552.*





Covered Services

TRS coverage is similar to TRICARE Standard and TRICARE Extra or TOP Standard. Covered services include, but are not limited to:

- Annual eye exams
- Behavioral health care
- Emergency and urgent care
- Immunizations and health screenings
- Maternity care
- Prescription drug coverage

After you purchase TRS, you will receive a *TRICARE Reserve Select Handbook* with details about covered services, how to get care, and who to contact when you need assistance. For additional information, visit www.tricare.mil/trs.

Costs and Fees

Monthly Premiums

Your monthly premium rate is determined by the type of coverage you purchase: TRS member-only or TRS member-and-family. TRS premiums are adjusted annually effective January 1.

Type of Coverage	2009 Monthly Premium
TRS Member-Only	\$47.51
TRS Member-and-Family	\$180.17

After the initial premium payment, your regional contractor will bill you by the 10th of each month. Payments are due no later than the last day of each month, and payments are applied to the following month of coverage. **Do not miss payments—failure to pay overdue amounts by the deadline will result in termination of coverage and debt collection.**

Annual Outpatient Deductible

The deductible is the amount you must meet each federal fiscal year (*October 1–September 30*) before TRICARE cost-sharing begins.

TRS Member Paygrade	Member-Only Coverage	Member-and-Family Coverage
E-4 and below	\$50	\$100
E-5 and above	\$150	\$300

Outpatient Costs

The table lists the amounts you will pay for outpatient services after your annual deductible is met.

Type of Provider	Outpatient Cost-Share
TRICARE Network	15% of the negotiated rate
TRICARE-Authorized, Non-Network	20% of the TRICARE-allowable charge, plus fees up to 15% above the TRICARE-allowable charge

Note: Overseas providers and beneficiaries are reimbursed based on billed charges minus the applicable deductibles and cost-shares, except in Panama, the Philippines, and Puerto Rico. In Panama, the Philippines, and Puerto Rico, reimbursement is based on TRICARE-allowable charges. These providers may bill above the TRICARE-allowable charge, and you may be responsible for any difference between the TRICARE-allowable charge and the billed amount, unless you see a participating provider. Participating providers agree to accept the TRICARE-allowable charge, and any cost-share or deductible amounts for which you are responsible, as payment in full.

Catastrophic Cap

The catastrophic cap is the maximum amount you will pay for health care out of pocket each federal fiscal year (*October 1–September 30*). The cap applies to all TRICARE-covered services—annual deductibles, outpatient and inpatient cost-shares, and pharmacy copayments based on TRICARE-allowable charges. Monthly premiums and payments for non-covered services are not credited toward the TRS catastrophic cap.

The TRS catastrophic cap is **\$1,000**.

Changes in Coverage

Changes in Family Composition

When you experience a change in your family composition (e.g., marriage, birth, adoption, death), you may request changes to your TRS coverage.

- You must report all family changes to your National Guard or Reserve personnel office so your information can be updated in DEERS.
- To add or remove a family member from coverage, you must log on to the Guard-Reserve TRICARE Reserve Select (TRS) Program Web site at <https://www.dmdc.osd.mil/appj/trs/index.jsp> and complete the *TRS Request* form.
- Your *TRS Request* form must be received or postmarked **no later than 60 days** from the date of the change. The effective date of coverage is the date the event occurred.

Voluntary Disenrollment

You may choose to disenroll from TRS coverage at any time.

If you want to disenroll, do not just stop making payments.

You must take the following action to end your coverage:

- Log on to the Guard-Reserve TRICARE Reserve Select (TRS) Program Web site at <https://www.dmdc.osd.mil/appj/trs/index.jsp>.
- Complete the *TRS Request* form.
- Print and mail your completed *TRS Request* form to your TRICARE regional contractor.

A one-year TRS purchase lockout will apply to members who voluntarily disenroll from coverage. A purchase lockout means you will not be able to purchase TRS coverage for up to one year.

If you do not take action to disenroll and you simply stop making premium payments, your coverage terminates. However, you are still responsible for any premium amounts that were due prior to the date you were officially terminated from TRS.

Termination Due to Nonpayment

Your payment is **due no later than the last day of each month**. Your payment will apply to the following month of coverage. Failure to pay monthly premiums on time will result in **termination of coverage, but you must still pay any overdue amounts.** (This may result in up to two months or more of overdue premium payments.) The government pursues collection action for overdue and delinquent premiums, and may notify your commander and collect these amounts from your National Guard or Reserve pay.

Termination of coverage due to nonpayment will result in a TRS purchase lockout for one year or until overdue premiums are paid, whichever is longer.

Disenrollment Due to Change in Status

When you are called to active duty service for more than 30 days, you and your family become eligible for non-premium TRICARE plans (e.g., *TRICARE Prime*). At this time, your TRS coverage is automatically terminated.

Once your active duty service ends, your eligibility for non-premium plans ends as well. You must qualify for and purchase TRS within 60 days to continue uninterrupted health care coverage (see page 1).

Your TRS coverage will also be automatically terminated if you leave the Selected Reserve. You may purchase TRS coverage again if you requalify.

A TRS purchase lockout will **not** apply.

TRS Survivor Coverage

If a National Guard or Reserve member is covered by TRS on the day of his or her death, eligible surviving family members may purchase or continue TRS coverage for an **additional six months** from the date of the member's death.

- If TRS member-and-family coverage is in effect at the time of death, DEERS will automatically convert your TRS member-and-family coverage to TRS survivor coverage.
- If TRS member-only coverage is in effect at the time of death, the coverage will terminate and survivors may purchase TRS survivor coverage within 60 days.
- Survivors are responsible for paying appropriate monthly premiums.



For Information and Assistance

<p>TRICARE North Region Health Net Federal Services, LLC TRS Enrollment P.O. Box 870162 Surfside Beach, SC 29587-9762 1-800-555-2605 www.healthnetfederalservices.com</p>	<p>TRICARE South Region Humana Military Healthcare Services, Inc. Attn: PNC Bank P.O. Box 105389 Atlanta, GA 30348-5389 1-877-298-3408 www.humana-military.com</p>	<p>TRICARE West Region TriWest Healthcare Alliance Corp. P.O. Box 42048 Phoenix, AZ 85080-2048 1-888-TRIWEST (1-888-874-9378) www.triwest.com</p>
<p>TRICARE Area Office (TAO)—Europe¹ Toll-Free (<i>from the U.S.</i>): 1-888-777-8343, option 1 Comm.: 011-49-6302-67-7433/7434 DSN: 496-7433/7434 www.tricare.mil/europe</p> <p>Send overseas claims to: Wisconsin Physicians Service (WPS)—Overseas Claims P.O. Box 8976 Madison, WI 53708-8976 www.TRICARE4u.com</p>	<p>TAO—Latin America and Canada¹ Toll-Free (<i>from the U.S.</i>): 1-888-777-8343, option 3 Comm.: 1-706-787-2424 DSN: 773-2424 www.tricare.mil/tlac</p> <p>Send overseas claims to: WPS—Overseas Claims P.O. Box 7985 Madison, WI 53707-7985 www.TRICARE4u.com</p>	<p>TAO—Pacific¹ Toll-Free (<i>from the U.S.</i>): 1-888-777-8343, option 4 Comm.: 011-81-6117-43-2036 DSN: 643-2036 Remote sites: 011-65-6-338-9277 www.tricare.mil/pacific</p> <p>Send overseas claims to: WPS—Overseas Claims P.O. Box 7985 Madison, WI 53707-7985 www.TRICARE4u.com</p>
<p>Reserve Affairs Web Site www.defenselink.mil/ra</p>	<p>TRICARE TRS Web Site (For additional TRS details) www.tricare.mil/trs</p>	<p>Guard-Reserve TRICARE Reserve Select (TRS) Program Web Site https://www.dmdc.osd.mil/appj/trs/index.jsp</p>

1. Beneficiaries residing overseas who purchase TRS should send their TRS Request form to the TRICARE South Region contractor address listed above. For assistance with TRS enrollment or premiums, contact Humana Military Healthcare Services, Inc. For assistance with claims, contact the overseas claims processor, WPS.

An Important Note about TRICARE Program Information

At the time of printing, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulation. Changes to TRICARE programs are continually made as public law and/or federal regulation are amended. **Military treatment facility guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact your TRICARE regional contractor, TRICARE Service Center, or local military treatment facility.

Please provide feedback on this flyer at www.tricare.mil/evaluations/feedback.

