

TRICARE Fundamentals Course

TRICARE Overseas Program

11

Participant Guide

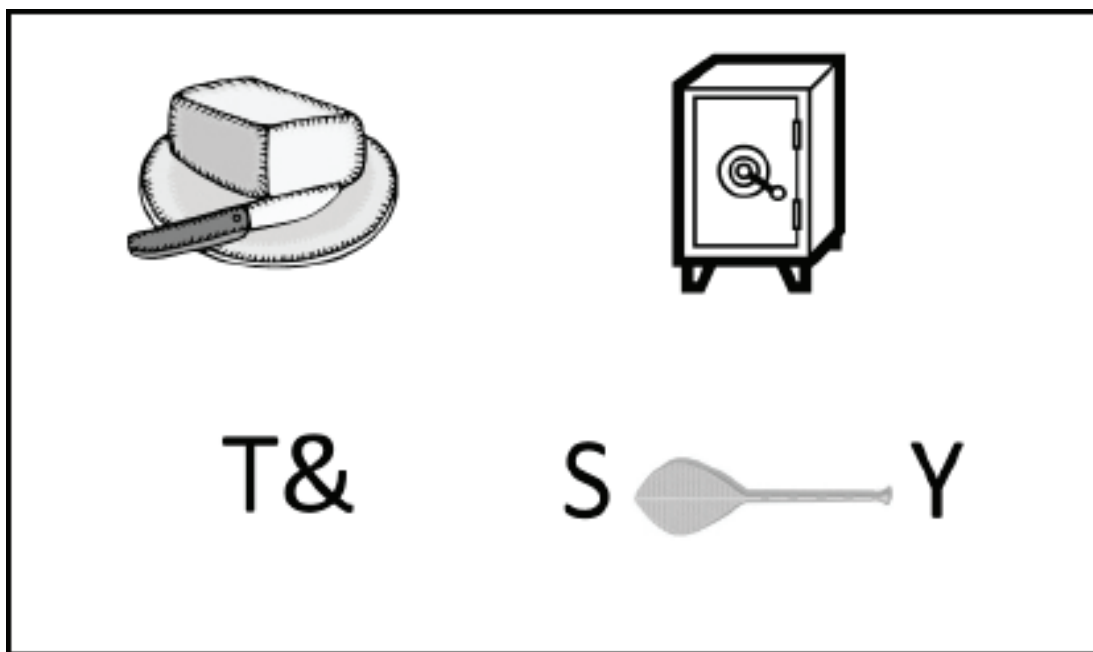
References

10 USC
32 CFR § 199
TRICARE Policy Manual, Chapter 12
TRICARE Operations Manual, Chapter 24



Brainteaser

What phrase is represented below?



Riddle

Which building has the most stories?

Module Objectives



- Describe the TRICARE Overseas Program (TOP)
- Explain TOP health care coverage options
- State the relationship between command sponsorship and TOP
- Explain TRICARE rules regarding host nation insurance

1.0 TRICARE Overseas Program (TOP)

The TRICARE Overseas Program (TOP) is the Department of Defense (DoD) overseas health care program. TOP is available in all geographic areas and territorial waters outside of the 50 United States and the District of Columbia.

TOP offers Prime, Standard and Standard-like options, and TRICARE for Life coverage while allowing for significant cultural differences unique to foreign countries and their health practices.

Cultural differences may apply to things like: location of care (e.g., provider comes to a patient's home), or the way in which the care is provided (e.g., services commonly rendered by a specific provider class in CONUS may be performed by a physician assistant or a general physician overseas, depending on the country).

2.0 TOP Region

There is one overseas region, encompassing three overseas areas:

- TRICARE Eurasia-Africa
- TRICARE Latin America and Canada (TLAC)
- TRICARE Pacific

3.0 TOP Management

3.1 Assistant Secretary of Defense for Health Affairs (ASD/HA)

Serves as Director, TRICARE Management Activity (TMA) and is responsible for the TRICARE Overseas Program.

3.2 Deputy Director, TRICARE Management Activity

Serves as principal advisor to the Assistant Secretary of Defense for Health Affairs on DoD health plan policy and oversight of health plan performance.

3.3 TRICARE Area Office (TAO)

Responsible for planning and coordinating services to meet beneficiary health care needs in their area of responsibility.

3.4 Overseas Military Treatment Facility (MTF) Commander

Responsible for managing health care delivery for active duty service members (ADSMs) and TOP Prime enrollees, and providing care to other military health system (MHS) beneficiaries who are eligible for care on a space-available basis.

3.5 TOP Contractor Responsibilities

- TOP enrollment and TOP authorization management
- Claims processing
- TOP beneficiary support and education
- TOP purchased care/host nation provider support and education
- TOP purchased care/host nation provider certification and recertification
- Development of TOP Preferred Provider Networks

3.6 Purchased Care/Host Nation Provider

A health care provider certified by their host nation or native country to practice medicine in that country.

4.0 TOP Health Care Coverage Options

TOP options include

- TOP Prime
- TOP Prime Remote
- TOP Standard
- TRICARE Young Adult
- TRICARE Retired Reserve (TRR)
- TRICARE Reserve Select (TRS)
- TRICARE for Life (TFL)
- TRICARE Plus (MTF-based with limited availability)
- Continued Health Care Benefit (CHCBP)

There is no TOP Extra Program.

5.0 TRICARE Overseas Program Prime (TOP Prime)

TOP Prime offers the benefits of TRICARE Prime to ADSMs permanently assigned to overseas MTF locations and their eligible family members. There are no health care copayments or cost shares, deductibles or enrollment fees. (For exceptions, see *Pharmacy*.)

5.1 Eligibility

- ADSMs permanently assigned overseas
- Command-sponsored active duty family members (ADFM) on permanent change of station orders to accompany the sponsor to the overseas location
- ADFMs on service-funded orders to relocate overseas without the sponsor

Retirees and their family members who live overseas are not eligible for TOP Prime; they are only eligible for TOP Prime Standard or TRICARE for Life.

5.2 Command Sponsorship

“Command sponsored” is defined as entitled to travel to overseas commands at the government’s expense and endorsed by the appropriate military commander to be present in a family member status.

Only ADFMs who meet the Joint Federal Travel Regulation definition of command sponsored are eligible for TOP enrollment, except for the following:

- Transitional survivors
- Certain National Guard and Reserve members and their family members

5.3 Eligibility Exceptions for ADFMs

- When the ADSM and their command-sponsored ADFMs are enrolled in TOP Prime and the sponsor is reassigned on unaccompanied orders to a location that does not permit command sponsored family members, the family member(s) may remain enrolled at their current TOP Prime location, as long as they remain command sponsored.
- When the command-sponsored family member(s) do not relocate elsewhere during the sponsor’s permanent change of station move, the family TOP Prime enrollment is based on the length of the sponsor’s unaccompanied orders, but not to exceed two years. The normal unaccompanied tour is 24 months or less.

- ADFMs who choose to reside overseas, but are not command sponsored and do not meet any of the exceptions listed above remain eligible for TOP Standard, TRICARE Plus (limited availability), or space-available MTF care.

5.4 National Guard and Reserve Members

- National Guard and Reserve members on written federal orders to an overseas location written for more than 30 consecutive days are eligible to enroll in TOP Prime.
- National Guard and Reserve family members are eligible for TOP Prime if:
 - They're command-sponsored and live in a TOP Prime service area; or
 - They're on service-funded orders to relocate to a TOP Prime service area without the sponsor.

5.5 Enrollment

- ADSMs who are permanently assigned overseas must enroll.
- ADFMs may choose to enroll on an individual or family basis.
- TOP Prime coverage begins on the date the enrollment form is received and for family members on the same date as long as appropriate command sponsorship orders are received by the TOP contractor. There is no 20th-of-the-month rule overseas.
- Enrollment is automatically renewed each year until the sponsor's overseas tour ends.

5.6 Disenrollment

- ADFMs may disenroll at any time.
- Regional contractors may deny re-enrollment (lockout) for a 12-month period from the effective date of disenrollment to ADFMs of sponsors who are E-5 and above who change their enrollment status (i.e., from enrolled to disenrolled or vice versa) more than twice in an enrollment year for any reason.
- The 12-month lockout provision doesn't apply to ADFMs whose sponsor's pay grade is E-1 through E-4.

5.7 Portability

TOP Prime enrollees, other than active duty, must either transfer enrollment or disenroll when returning stateside or transferring to a different overseas area. Enrollees may transfer their Prime enrollment by contacting the losing contractor before they move or the gaining contractor upon arrival at the new stateside location. If they transfer enrollment, they won't have a break in Prime coverage.

The TOP enrollee's overseas region provides continuing coverage until:

- The enrollment is transferred to the gaining region.
- The enrollee submits a disenrollment form.
- The 61st day after the overseas tour ends. If the non-active duty TOP Prime enrollee has not transferred their enrollment or disenrolled by day 61 their coverage reverts to TRICARE Standard, for other than the active duty service member.

5.8 Receiving Routine Care

TOP Prime enrollees receive care from the MTF and their assigned primary care managers (PCMs) who provide primary care and refer enrollees for specialty care when indicated.

PCMs are professional providers or institutions who provide or coordinate care within the overseas MTF. They may be internists, family practitioners, pediatricians, general practitioners, obstetrician/gynecologists, physician assistants, nurse practitioners, or certified nurse midwives, as determined by the MTF commander.

5.9 Referrals and Authorizations

- TOP Prime enrollees must have a referral and authorization to receive care from a purchased care/host

nation provider or facility:

- Inpatient care, to include inpatient mental health
- Most specialty care (ADSMs must have all speciality care authorized)
- Referrals aren't required for the following services:
 - Emergency care
 - Routine preventive services
 - The first eight outpatient mental health sessions in a fiscal year (ADFMs only); ADSMs must have a referral and authorization before seeking mental health services
 - Ancillary services (example: x-rays or laboratory)
 - Prescription drugs

When the MTF writes a specialty referral, it's routed to the TOP contractor. The TOP contractor reviews the referral to make a benefit determination then authorizes or denies the care.

- If approved, the TOP contractor notifies the TOP Prime enrollee and faxes an authorization to the purchased care/host nation provider or medical facility. Enrollees following this process shouldn't have to pay up front for TRICARE-covered services.
- The TOP contractor may assist the TOP Prime enrollee in setting up an appointment. If care isn't available within the country, the overseas regional contractor notifies the TRICARE Area Office (TAO) to begin coordination of medical travel to the nearest MTF or the nearest certified facility.
- Each time specialty care or diagnostic services are needed (e.g., follow-up appointments, MRI, CT scan, x-rays), the TOP contractor must be contacted to facilitate referral and authorization. Multiple visits to one provider may be authorized based on the proposed treatment plan (TOP Prime enrolled service members cannot use this option).

5.10 Point of Service Option (POS)

The POS option allows TOP-Prime enrolled ADFMs to receive non-emergency care from any TRICARE-certified, purchased care/host nation provider without requesting a referral from their PCM.

POS has deductibles for outpatient care. POS deductibles and cost shares are not counted towards the catastrophic cap and are not limited by the cap.

POS Charges	Individual	Family
Deductible	\$300	\$600
Cost shares for outpatient claims	50% of billed/allowed charge after POS deductible is met	
Cost shares for inpatient claims	50% of billed/allowed charge	
50% cost share applies even after catastrophic cap for the enrollment/fiscal year is met		

5.11 Claims

The overseas claims processor handles claims for TOP Prime enrollees whether overseas or travelling stateside.

5.12 Care When Traveling Stateside

- When traveling in the United States, TOP Prime enrollees have the same patient priority at MTFs as other TRICARE Prime enrollees. TOP Prime enrollees should contact their TOP Regional Call Center for authorization before receiving other than emergency care.
- TOP Prime enrollees should be encouraged to schedule their routine care appointments before traveling stateside to avoid possible issues regarding referral, authorization, and claims payment.

- Claims for care received by TOP Prime enrollees while traveling stateside should be submitted to the overseas claims processor.

Note: *Stateside Prime enrollees who receive health care while vacationing overseas should submit claims to the overseas claims processor.*

6.0 TRICARE Overseas Program Prime Remote (TOP Prime Remote)

- TOP Prime Remote offers the benefits of TRICARE Prime to ADSMs permanently assigned to designated remote overseas locations, and to their eligible family members.
- TRICARE partners with the TOP contractor to identify the best local providers and facilities and develop a network of licensed, purchased care/host nation providers in designated remote overseas locations.
- The TOP Prime Remote provider network is updated daily. Visit tricare-overseas.com for more information about program and providers .

6.1 Eligibility

- ADSMs permanently assigned to a remote overseas location.
- Command-sponsored ADFMs on permanent change of station orders to accompany the sponsor to the remote overseas location.
- ADFMs on service-funded orders to relocate overseas without the sponsor.

Retirees and their family members who live overseas are ineligible for TOP Prime enrollment. They are only eligible for TOP Standard or TRICARE for Life.

6.2 Eligibility Exceptions for ADFMs

- If the ADSM and their command-sponsored ADFMs are enrolled in TOP Prime Remote and the sponsor is reassigned on unaccompanied orders to a location that does not permit command-sponsored family members, the family member(s) may remain enrolled at their current TOP Prime Remote location, as long as they remain command sponsored.
- If the command-sponsored family member(s) do not relocate elsewhere during the sponsor's permanent change of station move, the family may remain enrolled in TOP Prime Remote for a period based on the length of the sponsor's unaccompanied orders, but not to exceed two years. The normal unaccompanied tour is 24 months or less.
- ADFMs who choose to reside overseas, but are not command sponsored and do not meet any of the exceptions listed above, remain eligible for TOP Standard, TOP Plus (limited availability), or space-available MTF care.

6.3 National Guard and Reserve Members

National Guard and Reserve family members are eligible for TOP Prime Remote if:

- Their overseas address is the same as their sponsor's address at the time of mobilization (as reflected in DEERS); or
- They're on service-funded orders to relocate to a TOP Prime Remote area without the sponsor.

6.4 Enrollment

- ADSMs who are permanently assigned to a TOP Prime Remote location must enroll.
- ADFM enrollment may be on an individual or family basis.
- TOP Prime Remote coverage begins the date the signed enrollment form along with the command-sponsorship paperwork is received by the TOP contractor. There is no 20th-of-the-month rule overseas.
- Enrollment is automatically renewed each year until the sponsor's overseas tour ends.

6.5 Portability

TOP Prime Remote enrollees must either transfer enrollment or disenroll within 60 days of the end of the overseas tour.

If they transfer enrollment, they do not lose Prime coverage.

The ADFM's TOP region provides continuing coverage until:

- The enrollment is transferred to the new region.
- The enrollee submits a disenrollment form.
- If the (non-active duty) TOP Prime Remote enrollee has not transferred their enrollment or disenrolled, by day 61 after the overseas tour ends, their coverage reverts to TRICARE Standard.

6.6 Receiving Care

- Only licensed, purchased care or host nation providers participate in the overseas provider network and deliver health care to TOP Prime Remote enrollees. TOP Prime Remote enrollees are assigned host nation or civilian PCMs.
- **Routine, Specialty, and Non-Emergency Care:** TOP Prime Remote enrollees coordinate care through the TOP contractor when care is not available at the U.S. Embassy clinic. After review and approval, the TOP contractor schedules the appointment with a network purchased care/host nation provider and forwards an authorization to that provider.
- **Urgent Care:** TOP Prime Remote enrollees must coordinate care through their TOP contractor. Enrollees should receive an urgent care appointment within 24 hours of contacting the overseas contractor, even if traveling.
- **Specialty Care:** Enrollees must coordinate specialty care and diagnostic tests through the overseas regional contractor. Appointments should only be scheduled after the care is authorized (see 6.7, Referral and Authorization):
 - Enrollees can set up the appointment once the care is authorized or ask the TOP contractor to set up the appointment.
 - Enrollees should expect to receive a specialty care appointment within 28 days.
 - For non-urgent specialty care appointments, enrollees should allow the TOP contractor at least 48 hours advance notice to prepare the authorization letter.
- **Emergency Care:** Enrollees should seek emergency care at the nearest purchased care or host nation medical facility. They should contact the TOP contractor within 24 hours to facilitate care coordination, authorization, and payment to the treating facility.

6.7 Referrals and Authorizations

TOP Prime Remote enrollees must have a referral and authorization for purchased/host nation:

- Inpatient care, to include inpatient mental health
- Most specialty care (ADSMs must have all speciality care authorized)

Referrals aren't required for the following services:

- Emergency care
- Routine preventive services
- The first eight outpatient mental health sessions in a fiscal year (ADFM's only); ADSMs must have a referral and authorization before seeking mental health services
- Ancillary services (example: x-rays or laboratory)
- Prescription drugs

When the U.S. Embassy clinic or purchased care/host nation provider writes a referral, it's routed to the TOP contractor. The TOP contractor reviews the referral to make a benefit determination then authorizes or denies the care.

- If approved, the TOP contractor notifies the TOP Prime Remote enrollee and faxes an authorization to the purchased care/host nation provider or medical facility. Enrollees following this process shouldn't have to pay up front for TRICARE-covered services.
- The TOP contractor may assist the TOP Prime Remote enrollee in setting up an appointment. If care isn't available within the country, the TOP contractor notifies the TRICARE Area Office (TAO) to begin coordination of medical travel to the nearest MTF or the nearest certified facility.
- Each time specialty care or diagnostic services are needed (e.g., follow-up appointments, MRI, CT scan, x-rays), the TOP contractor must be contacted to facilitate a referral and authorization. Multiple visits may be authorized based on the proposed treatment plan.

6.8 Claims

When TOP Prime Remote enrollees are authorized to seek care from purchased care/host nation providers, but are required by the purchased care/host nation provider to pay up front for the TRICARE-covered service, they must file a claim with the overseas claims processor. Claims should be filed within 60 days of the date of service, but must be filed or processed within one year from the date of service or inpatient discharge or else they will be denied.

In most cases, the overseas claims processor reimburses at the billed rate.

6.9 Care When Traveling Stateside

When traveling stateside, TOP Prime Remote enrollees have the same patient priority at MTFs as other TRICARE Prime enrollees.

All TOP Prime Remote enrollees who require non-emergency care should contact the TOP contractor at their Regional Call Center stateside number for guidance, referrals, and authorizations.

7.0 Other TOP Options

7.1 TOP Standard

- TOP Standard benefits mirror most stateside TRICARE Standard benefits with some variations based on the specific country (see *TRICARE Options*). There is no TRICARE Extra option overseas. TRICARE pays billed charges overseas (except in the Philippines and Panama).
- Applicable deductibles and cost shares apply.

7.2 TRICARE Plus

TRICARE Plus, subject to availability, offers MTF primary care access and services and an assigned PCM to TOP Standard and TRICARE for Life beneficiaries and other select DoD beneficiaries. Speciality services may be provided by purchased care/host nation providers. Standard and TFL coverage rules apply. (See *Other TRICARE Programs*).

7.3 TRICARE for Life (TFL)

TRICARE for Life (TFL) is TRICARE's Medicare wraparound coverage, and is available to all Medicare-eligible TRICARE beneficiaries regardless of age or place of residence, provided the beneficiary has Medicare Parts A and B (exception: ADFMs don't have to purchase Part B) to maintain TRICARE eligibility (see *TRICARE and Medicare*).

7.3.1 Medicare-TRICARE Benefit Overseas

- Locations where Medicare is not available:
 - Since Medicare does not provide benefits for medical care received in most overseas locations, TRICARE is the first payer for health care coverage unless the beneficiary has other health insurance (OHI), such as host nation insurance.
 - Beneficiaries are responsible for the same cost shares and annual deductibles as other TRICARE Standard beneficiaries.
 - Claims are processed by the overseas claims processor.
- **Locations where Medicare is available:**
 - U.S. Territories: Puerto Rico, Guam, U.S. Virgin Islands, American Samoa, and the Northern Mariana Islands.
 - In these locations, beneficiaries are covered by the stateside TFL program. Medicare is the first payer and TFL is the second payer for covered services; TRICARE is the last payer if there is other health insurance.
 - In these locations, dual-eligible beneficiary claims (Medicare-TRICARE), are processed by the stateside TFL contractor.

8.0 Pharmacy

- The TRICARE Pharmacy program is available overseas, however the home delivery (mail order) and retail network pharmacy options are limited.
- TRICARE network pharmacies are located in U.S. territories but are not available in other overseas locations.
- Beneficiaries may get prescriptions filled at host nation pharmacies, where they must pay the total amount up front and file a claim for reimbursement to the overseas claims processor.
- To use the home delivery option, beneficiaries must be in official status and must have a prescription from a U.S. licensed provider and have an Army Post Office address, Fleet Post Office address, or Diplomatic Post Office address.

9.0 Other Health Insurance (OHI)

- Claims must be filed with the OHI before filing with TRICARE.
- After the OHI pays a claim must be filed with TRICARE along with a copy of the other health plan's explanation of benefits (EOB) and the itemized bill. If beneficiaries do not inform TRICARE about their OHI, the claim settlement could be delayed or payment denied.
- When OHI does not cover a certain benefit and it is a TRICARE-covered benefit, the beneficiary submits a claim to the overseas contractor along with the other health plan's EOB stating the reason for non-payment. The claim is then considered for TRICARE payment.

10.0 Host Nation Insurance

- Family members who are native to the host country may have host nation insurance. It is important to know the rules that govern the local insurance and TRICARE.
- Host nation insurance is considered OHI and cannot be waived. This means that the host nation insurance is primary payer and TRICARE is the secondary payer.

11.0 Application Exercise (Y/N)

Q1: If an ADSM and their command-sponsored ADFMs are enrolled in TOP Prime or TOP Prime Remote, and the sponsor is reassigned on unaccompanied orders to a location that doesn't allow command-sponsored family members, can the family members remain enrolled at their current TOP Prime or TOP Prime Remote site?

Q2: If a TOP-enrolled ADSM marries a citizen from the country where he or she is stationed, what must they do to enroll the new spouse in TOP Prime?

Q3: When traveling to the U. S., what must TOP Prime/TOP Prime Remote enrollees do before seeking non-emergency care?

12.0 Resources

TOP Contractor

- Online: tricare-overseas.com
- Telephone (direct dial):
 - TRICARE Eurasia-Africa: 877-678-1207
 - TRICARE Latin America and Canada: 877-451-8659
 - TRICARE Pacific: 877-678-1208

TOP Regional Call Center Contact Information

	Overseas	Stateside
TRICARE Eurasia-Africa	+44-20-8762-8384	1-877-678-1207
TRICARE Latin America and Canada	+ 1-215-942-8393	1-877-451-8659
TRICARE Pacific	Singapore: +65-6339-2676 Sydney: +61-9273-2710	Singapore: 1-877-678-1208 Sydney: 1-877-678-1209

Overseas Claims Processor

- Online: tricare4u.com
- Active Duty Service Members Health Care Claims (all overseas areas)

TRICARE Active Duty Claims
P.O. Box 7968
Madison, WI 53707-7968
USA

- Non-Active Duty Service Members Health Care Claims

TRICARE Eurasia-Africa	TRICARE Latin America and Canada / TRICARE Pacific
TRICARE Overseas Program P.O. Box 8976 Madison, WI 53708-8976 USA	TRICARE Overseas Program P.O. Box 7985 Madison, WI 53707-7985 USA

- TRICARE For Life Overseas Claims:

WPS TRICARE For Life
P.O. Box 7890
Madison, WI 53707-7890
www.tricare4u.com
CONUS: 1-866-773-0404; TDD 1-866-773-0405

Module Objectives



Summary

- Describe the TRICARE Overseas Program (TOP)
- Explain TOP health care coverage options
- State the relationship between command sponsorship and TOP
- Explain TRICARE rules regarding host nation insurance