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A PUBLICATION FOR TRICARE® BENEFICIARIES

New Process Simplifies Transfer of TRICARE Prime Enrollment During Moves

recent TRICARE policy change simplifies the process of transferring TRICARE Prime enrollment for active duty service members (ADSMs) and active duty family members (ADFMs) who are relocating. If you are an ADSM or ADFM who is moving to a new location, you can now call your current regional contractor to begin the process. If you are moving to a new region, your information will be sent to your new regional contractor, who will follow up with you to complete the enrollment transfer after you arrive at the new duty station.

If you prefer to contact your new regional contractor upon arrival at the new duty station, then your new regional contractor can also transfer your TRICARE Prime enrollment via telephone at that time.

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TRICARE Coverage for Young Adults

The signing of the National Defense Authorization Act (NDAA) of 2011 into law allows TRICARE to extend coverage to eligible dependent children until reaching age 26. Details of the program, including premiums, will be in place later this year.

Under the TRICARE Young Adult (TYA) program, qualified dependents will be able to purchase TRICARE coverage on a month-to-month basis until reaching age 26—as long as they are not married or eligible for their own employer-sponsored health coverage. Dependent eligibility for TRICARE previously ended at age 21 (age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided at least 50 percent of the financial support). Eligibility will also depend on the status of the sponsor. Premium rates will cover the full cost of the program.

Initially, only TRICARE Standard coverage will be available. Once the program is in place this spring, eligible beneficiaries will have the option to purchase retroactive coverage. Premiums will have to be paid back to Jan. 1, 2011, in order to obtain

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This TRICARE enrollment portability change adds another way for you to transfer your TRICARE Prime enrollment. You also have the option to transfer enrollment online through Beneficiary Web Enrollment at www.dmdc.osd.mil/appj/bwe/ or by completing the TRICARE Prime Enrollment Application and PCM Change Form (DD Form 2876), which can be

mailed to your new regional contractor or dropped off at a TRICARE Service Center.

If you would like to notify Humana Military Healthcare Services, Inc. of an upcoming relocation, you can call 1-800-444-5445 to get started. ■

Social Security Numbers Will Be Removed from Beneficiary ID Cards

The Department of Defense (DoD) is in the process of removing Social Security numbers (SSNs) from uniformed services identification (ID) cards as part of the continued effort to protect the privacy and security of TRICARE's 9.6 million beneficiaries. Before June 2011, SSNs will begin to be replaced with a DoD Benefits Number. This process is expected to last several years, until all current uniformed services ID cards are replaced as they come up for renewal.

Note: You do **not** need to make a special trip to have your ID card updated until it expires. Your health care providers and pharmacists will be able to access your benefits using either your SSN or your DoD Benefits Number.

The new 11-digit DoD Benefits Number can be found above the bar code on the back of your ID card. This number is a unique number, like your SSN, and it will ensure that your records are clearly aligned with you and your treatments.

If you have questions, please visit www.tricare.mil/ssn.

Beneficiary Advisory Panel Gives You a Voice in Your TRICARE Pharmacy Benefit

The Department of Defense (DoD) Beneficiary Advisory Panel (BAP) is designed to enhance transparency and provide an opportunity for you to comment on the DoD Pharmacy and Therapeutics (P&T) Committee's formulary recommendations before they are submitted to the director of TRICARE Management Activity for approval. The BAP meets in a public forum about six weeks after each DoD P&T Committee meeting.

BAP members are appointed on an annual basis by the secretary of defense to represent the interests of TRICARE beneficiaries. BAP members come from nongovernment organizations and associations that represent the views of a large number of eligible beneficiaries. These members include contractors responsible for the retail pharmacy network, TRICARE Pharmacy Home Delivery and TRICARE network providers. Members also come from beneficiary organizations such as the Fleet Reserve Association, the Military Coalition, the National Military Family Association, the Military Officers Association of America, the Military Alliance and the National Military and Veterans Alliance.

Information discussed at BAP meetings does not include specific drug pricing or financial information. The meetings focus on the uniform formulary recommendations and prior authorization criteria recommended by the DoD P&T Committee. The BAP does not review Military Treatment Facility Basic Core Formulary/Extended Core Formulary recommendations or quantity limits.

A major focus of the BAP is the process of implementing uniform formulary decisions, especially communications with beneficiaries. The BAP has been instrumental in DoD's decision to send letters that target affected beneficiaries during the implementation period before drugs are designated non-formulary (Tier 3).

BAP Meeting Information

The Federal Register announces all BAP meetings at least two weeks in advance and provides necessary supplementary information. Meeting information and supporting materials can also be obtained by visiting the BAP Web page on the TRICARE website at www.tricare.mil/pharmacy/BAP.

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reimbursement. Beneficiaries who may want to purchase retroactive coverage should retain receipts for care received to get reimbursed for covered services. The opportunity to purchase retroactive coverage will end on Sept. 1, 2011.

Go to www.tricare.mil/TYA for more information about the TYA program, and sign up for news and benefit e-alerts at www.tricare.mil/subscriptions.

Access Your TRICARE Information from Your Mobile Device

Humana Military Healthcare Services, Inc. (Humana Military) now offers even faster and more convenient tools to access health care information through your mobile device or the interactive voice response (IVR) system.

Humana Military Mobile Site

You can now access your health care information via your smartphone or other mobile device by visiting Humana Military's mobile version of its website, called Humana Military Mobile, at https://m.humana-military.com. You can view the site on any smartphone or other Web-enabled handheld device. Humana Military Mobile provides you with links to several South Region services including:

- Provider locator
- Urgent care center finder
- My Eligibility & Plan Information (secure)
- Family Eligibility & Plan Information (secure)

Interactive Voice Response System

Another feature Humana Military offers beneficiaries is its IVR system, an automated phone-response system that provides real-time information about your health care. Rather than waiting on hold for a live customer service representative, Humana Military's automated IVR system



allows you to quickly get information about TRICARE coverage and referral status for you and your family. The IVR system now offers enhanced features for callers using mobile phones, including the ability to make payments using your mobile phone and receive a payment confirmation receipt via text message. The IVR system is available 24 hours a day, seven days a week at 1-800-444-5445.

For more information about Humana Military's IVR system, please visit www.humana-military.com.

1. While Humana Military does not charge for this service, standard message and data rates may apply.

Did You Know? Federal Drug and Product Recalls Are Listed Online

The U.S. Food and Drug Administration (FDA) is responsible for protecting public health by assuring the safety and security of drugs, food, medical devices and other consumer products. One way the FDA fulfills its mission is by recalling unsafe products from the marketplace. You can identify the drugs and other products the FDA finds unsafe

by going to www.fda.gov/recalls. The website includes a list of recalls, market withdrawals, safety alerts and other important information for you and your family.

You can also visit www.recalls.gov for information on additional federal recalls of household electronics, motor vehicles and other consumer products.

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TRICARE

An Excellent Value

- **■** Generous coverage
- Superior health care
- Decisions are health driven, not insurance driven
- High satisfaction with care
- Low out-of-pocket costs
- Easy access



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Behavioral Health Self-Referral Benefit

nder the behavioral health care benefit, TRICARE beneficiaries, **except active duty service members** (**ADSMs**), do not need referrals or prior authorizations for the first eight behavioral health outpatient visits per fiscal year (Oct. 1-Sept. 30) to a network provider for a medically diagnosed and covered condition.

TRICARE also provides self-referred behavioral health options through the following services:

• The TRICARE Assistance Program (TRIAP) provides online access to counseling services 24 hours a day, seven days a week. Through the use of your home computer and a webcam, licensed counselors can provide short-term, non-medical counseling. TRIAP is available in the United States to ADSMs, their spouses (any age) and family members (age 18 or older), as well as beneficiaries age 18 or older enrolled in the Transitional Assistance Management Program and TRICARE Reserve Select. TRIAP sessions are generally confidential and not documented on your military health record. However, if the TRIAP counselor believes you are at risk of harming yourself or others, the counselor will ask for personal contact information,

including your command information, your location and a call-back number. This information will be used to ensure you receive appropriate counseling and/or care.

• The **Telemental Health program** uses interactive audiovisual conferencing technology to provide behavioral health services to a beneficiary at an originating site (certain TRICARE authorized facilities) and a TRICARE authorized behavioral health provider at a distant site location. This program provides clinical consultation, individual psychotherapy, psychiatric examination and medication management when appropriate and medically necessary for all eligible beneficiaries.

Note: ADSMs do not require referrals for military treatment facility care but must have referrals and prior authorizations for outpatient behavioral health civilian care, including Telemental Health. However, ADSMs may self-refer to TRIAP, because no referrals or authorizations are required for this program.

To learn more about these services and your behavioral health benefit, visit www.humana-military.com or call ValueOptions at 1-800-700-8646. ■