

Separating from Active Duty

Health care coverage options for separating service members

If you are separating from active duty or from the uniformed services, you might be able to continue health care coverage, depending on the circumstances of your separation. The Military Health System offers transitional health care options—the Transitional Assistance Management Program (TAMP) and the Continued Health Care Benefit Program (CHCBP)—that provide temporary coverage.

There are also health care plans that National Guard and Reserve members and retirees may qualify to purchase. Contact your TRICARE® regional contractor, TRICARE Overseas Program (TOP) Regional Call Center (*if overseas*), or a Beneficiary Counseling and Assistance Coordinator (BCAC) to discuss your family's eligibility for these programs. For more information, visit www.tricare.mil. For information on premium rates and other costs, visit www.tricare.mil/costs.

TRANSITIONAL ASSISTANCE MANAGEMENT PROGRAM

TAMP provides 180 days of transitional health care benefits to help certain members of the uniformed services and their families transition to civilian life. The sponsor and eligible family members may be covered for health benefits under TAMP if the sponsor:

- Is involuntarily separated from active duty
- Is a member of a Reserve component who is separated from active duty service in support of a contingency operation (if the active duty is for a period of more than 30 days)
- Is separated from active duty for which the member is involuntarily retained (*stop-loss*) in support of a contingency operation
- Is separated from active duty served under a voluntary agreement to stay on active duty for less than one year in support of a contingency operation

- Is separated from active duty with an agreement to immediately become a member of the Selected Reserve of the Ready Reserve
- Receives a sole survivorship discharge

You are not eligible for TAMP while on terminal leave, permissive temporary duty (PTDY), or authorized excess leave. During leave and PTDY, you continue to receive active duty service member (ADSM) coverage from your last duty station, even if you relocate. If living in the same location during leave and PTDY, eligible family members remain covered under TRICARE Prime or TRICARE Prime Remote for Active Duty Family Members (TPRADFM) if previously enrolled. Please note that an ADSM may not change his or her primary care manager while on terminal leave or PTDY. If you have an injury, illness, or disease that was incurred while on active duty, contact your unit or service branch for eligibility determination or authorizations for follow-up medical or dental care specifically related to that condition.

If you qualify, the 180-day TAMP period begins the day after your date of separation from active duty. When you become eligible for TAMP, you and your family members are covered under TRICARE Standard and TRICARE Extra, or TOP Standard if you are based overseas. If you live in a Prime Service Area (a location where TRICARE Prime benefits are offered), you and your family members may choose to enroll or reenroll in TRICARE Prime. TRICARE Prime Remote (TPR), TPRADFM, and TOP Prime Remote are not available during TAMP. If you were enrolled in one of these programs, you will be disenrolled and covered by TRICARE Standard and TRICARE Extra. You may also enroll or reenroll in TRICARE Prime under the following conditions:

• If you or your family members were enrolled in TRICARE Prime immediately prior to your change in status, you may continue your enrollment with no break in coverage as long as you complete a new TRICARE Prime Enrollment,

Disenrollment, and Primary Care Manager (PCM) Change Form (DD Form 2876) and submit it to your regional contractor before the TAMP period ends. The effective date will be the day after the date the sponsor separated from active duty.

• If your family members were not enrolled in TRICARE Prime when you separated from active duty and would like to enroll, you must complete a DD Form 2876 and submit it to your regional contractor. If you are located in the United States, your enrollment is subject to the 20th-of-the-month rule. Applications received by your regional contractor by the 20th of the month will become effective at the beginning of the following month (e.g., an enrollment received by December 20 would become effective January 1). If your application is received after the 20th of the month, your coverage will become effective on the first day of the month following the next month (e.g., an enrollment received on December 27 would become effective on February 1). **Note:** The 20th of the month rule applies only to stateside enrollment. TOP Prime enrollment is effective when the enrollment application is received.

Contact your regional contractor or a BCAC to discuss your family's eligibility for this program. You can also visit www.tricare.mil/tamp for more information.

TRANSITIONAL CARE FOR SERVICE-RELATED CONDITIONS

If you are eligible under TAMP and have a newly diagnosed medical condition that is related to your active duty service, you may qualify for the Transitional Care for Service-Related Conditions (TCSRC) program, which provides up to 180 days of care for your condition with no out-of-pocket costs. If you believe you have a service-related condition that may qualify you for TCSRC, visit www.tricare.mil/tcsrc for instructions on how to apply.

CONTINUED HEALTH CARE BENEFIT PROGRAM

CHCBP is a premium-based health care benefit administered by Humana Military. CHCBP offers transitional coverage after TRICARE eligibility ends for up to 18 months for former service members and their family members and up to 36 months for unremarried former spouses and adult dependents. If you qualify, you can purchase CHCBP coverage within 60 days after loss of eligibility for either TRICARE or TAMP coverage. CHCBP acts as a bridge between military health care benefits and your new civilian health care plan. CHCBP benefits are comparable to TRICARE Standard with the same benefits, providers, and program rules. The main difference is that you pay premiums to participate. Also, CHCBP enrollees are not legally entitled to space-available care at military treatment facilities. For information about CHCBP, visit Humana Military's Web site at Humana-Military.com or call 1-800-444-5445. You also can visit www.tricare.mil/chcbp. Contact your regional contractor or a BCAC to discuss your family's eligibility for this program.

TRICARE RESERVE SELECT®

TRICARE Reserve Select (TRS) is a premium-based health care plan available for purchase by qualified members of the Selected Reserve of the Ready Reserve. TRS provides comprehensive health care and pharmacy coverage with cost-shares and deductibles similar to TRICARE Standard and TRICARE Extra, but TRS beneficiaries must pay monthly premiums. Annual deductibles and cost-shares apply. Visit www.tricare.mil/trs for more information about TRS coverage.

TRICARE RETIRED RESERVE®

TRICARE Retired Reserve (TRR) is a premium-based health plan available for purchase by qualified members of the Retired Reserve. TRR provides comprehensive health care and pharmacy coverage with cost-shares and deductibles similar to TRICARE Standard and TRICARE Extra, but TRR beneficiaries must pay monthly premiums. Annual deductibles and cost-shares apply. Visit www.tricare.mil/trr for more information about TRR coverage.

TRICARE YOUNG ADULT

The TRICARE Young Adult (TYA) program is a premium-based health care plan available for purchase by qualified dependents until reaching age 26. Adult dependents may purchase TYA coverage based on the eligibility established by their uniformed service sponsor and where they live. TYA includes medical and pharmacy benefits, but excludes dental coverage. For more information, visit www.tricare.mil/tya.

FOR INFORMATION AND ASSISTANCE

TRICARE North Region Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) www.hnfs.com	TRICARE South Region Humana Military, a division of Humana Government Business 1-800-444-5445 Humana-Military.com	TRICARE West Region UnitedHealthcare Military & Veterans 1-877-988-WEST (1-877-988-9378) www.uhcmilitarywest.com
TRICARE Overseas Program (TOP) Regional Call Center—Eurasia-Africa ¹ +44-20-8762-8384 (overseas) 1-877-678-1207 (stateside) tricarelon@internationalsos.com	TOP Regional Call Center—Latin America and Canada¹ +1-215-942-8393 (overseas) 1-877-451-8659 (stateside) tricarephl@internationalsos.com	TOP Regional Call Centers—Pacific¹ Singapore: +65-6339-2676 (overseas)
TRICARE Reserve Select www.tricare.mil/trs TRICARE Retired Reserve www.tricare.mil/trr	TRICARE Young Adult www.tricare.mil/tya	Transitional Assistance Management Program www.tricare.mil/tamp
Continued Health Care Benefit Program Humana Military 1-800-444-5445 www.tricare.mil/chcbp	milConnect Web Site—Update DEERS Information http://milconnect.dmdc.mil	TRICARE Web Site www.tricare.mil

^{1.} For toll-free contact information, visit <u>www.tricare-overseas.com</u>.

An Important Note About TRICARE Program Information

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. Military hospital and clinic guidelines and policies may be different than those outlined in this publication. For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.