

Will HCR Affect Your TRICARE?

Week of March 29, 2010

With the passage of the Health Care Reform Act, many servicemembers, retirees, and veterans are concerned that they may lose their VA and TRICARE health benefits. This fear has been fueled by reports from several sources including members of Congressional Committees. This week Military.com's latest feature editorial, "The Tank," veteran and military experts offer their their insights on how the Health Care Reform Act will impact military and veteran benefits.

[Check out "The Tank"](#) to learn what the experts have to say about this heated issue.

Military.com surveys have found that most servicemembers and their families are confused by TRICARE. [Get the facts and latest news on TRICARE.](#)

Will HCR Affect Veteran Health Care?

The Tank asks the experts: "Will Health Care Reform negatively impact veteran health care?"

Paul Rieckhoff (Director, [Iraq and Afghanistan Veterans of America](#))

IAVA is pleased to see that military and veterans health care will not be negatively impacted by the new health care reform bill. Under this new plan, the administration of health care for service members, veterans and their families, will remain protected under the Department of Defense (DoD) and Department of Veterans Affairs (VA).

Throughout the health care conversations over the past several months, IAVA has worked hard to ensure that the best interests of our membership are protected and that new legislation does not infringe on veterans' hard earned right to health care. As the process continues, in the Senate and through its implementation, IAVA will continue to do the same.

It is unfortunate that throughout this debate, some have used servicemembers and veterans as political props instead of focusing on the issues. With the health care vote now complete, we hope the Administration and Congress will work with the VA to improve quality of and access to health care for America's veterans.

Matt Flavin ([White House](#) Director of Veterans and Wounded Warrior Policy, vet who completed deployments to Bosnia, Afghanistan and Iraq)

As a proud veteran, I want to underscore that the health reform legislation will not adversely impact our nation's veterans. While the bill was inherently clear in its protection of VA health care, after Chairman Skelton's fix, it was also imminently clear that those who depend on TriCARE could also rest assured. President Obama stands firm in his commitment to veterans, and that is why he has provided an historic increase in benefits for our veterans and has upheld every pledge to protect the benefits our veterans have earned in service to our nation.

Jim Strickland (Vietnam era Army veteran, Veterans Advocate writer)

The legislation redesigning the administration of health care in America is done. The Fat Lady sings. Unfortunately, rumors, propaganda and hype persist. Tokyo Rose couldn't do a better job of spreading lies about what's happened and how it will affect you.

The most militant nattering nabobs of negativity now accept that there aren't any death panels and that the feds won't tell your doctor how to treat you. But...what about those who receive veterans benefits?

I'm being asked, "Jim, is it true veterans with Tricare will have to purchase additional insurance because Tricare is not recognized as health coverage under this legislation?"

No.

Don't listen to Rumor Control Headquarters. The current administration has supported veterans causes in ways not seen before. In the pipeline are new AO and Gulf War presumptive benefits, the largest VA budget increase in over 30 years and innovations not dreamed of in decades.

These aren't the people who will weaken your benefits. These are the people who may make your health care system more of a model for others to follow than it is already.

And that's a good thing.

Your TRICARE Benefits Explained

TIP:

Saving your receipts can save you both money and headaches. Some health care expenses can be deducted from your taxes, and you never know when you may be incorrectly double billed.

Do you understand your TRICARE benefits? Do you know if you are enrolled in the TRICARE coverage plan that best suits your family's needs? Are you completely confused by all the TRICARE coverage options, co-pays, deductibles, and acronyms?

If so you are not alone, our surveys have found that most servicemembers and their families are confused by TRICARE. The fact is, TRICARE is a enormous and very complex health care system.

We can help clarify many of your questions and concerns. You owe it to yourself and your family to find out as much as you can about TRICARE before making any decisions! The following provides a summary of this complex program:

TRICARE Facts

TRICARE is a regionally managed health care program for Active Duty, Activated Guard and Reserves, Retired members of the uniformed services, their families, and survivors. TRICARE brings together the health care resources of the Army, Navy and Air Force and supplements them with networks of civilian health care professionals to provide better access and high quality service while maintaining the capability to support military operations.

Active Duty and Guard and Reserve servicemembers are automatically enrolled TRICARE Prime. However military dependents and retirees must choose the TRICARE option that best suits their needs.

TRICARE has three main coverage choices for health care:

- [TRICARE Prime](#) - where Military Treatment Facilities (MTFs) are the principal source of health care.
- [TRICARE Extra](#) - a preferred provider option that saves money; and
- [TRICARE Standard](#) - a fee-for-service option (the original CHAMPUS program);

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Making the Choice

Your main challenge will probably be deciding which TRICARE option, Prime, Extra or Standard, is best for you. The following tables provide examples of cost-shares or copayments for families who use civilian providers and facilities under each of the three TRICARE options. The listed fees are subject to change.

Eligible Active Duty, Guard and Reserve Family Members:

	TRICARE Prime	TRICARE Extra	TRICARE Standard
Annual Deductible	None	\$150/individual or \$300/family for E-5 & above; \$50/\$100 for E-4 & below	\$150/individual or \$300/family for E-5 & above; \$50/100 E-4 below
Annual Enrollment Fee	None	None	None

Civilian Outpatient Visit	No Cost	15% of negotiated fee	20% of allowed charges for covered service
Civilian Inpatient Admission	No Cost	Greater of \$25 or \$14.35/day	Greater of \$25 or \$14.35/day
Civilian Inpatient Behavioral Health	No Cost	Greater of \$20 per day or \$25 per admission	Greater of \$20 per day or \$25 per admission
Civilian Inpatient Skilled Nursing Facility Care	\$0 per diem charge per admission	\$11/day (\$25 minimum) Charge per admission	\$11/day (\$25 minimum) Charge per admission
	No separate co-payment/cost-share for separately billed professional charges		

Retirees(under 65), Their Family Members, and Others

	TRICARE Prime	TRICARE Extra	TRICARE Standard
Annual Deductible	None	\$150/individual or \$300/family	\$150/individual or \$300/family
Annual Enrollment	\$230/individual \$460/family	None	None

Fee			
Civilian Cost Shares		20% of negotiated fee	25% of allowed charges for covered service
Outpatient Emergency Care Mental Health Visit	\$12 \$30 \$25 \$17 (group visit)		
Civilian Inpatient Cost Share	Greater of \$11 per day or \$25 per admission; no separate copayment for separately billed professional charges	Lesser of \$250/day or 25% of negotiated charges plus 20% of negotiated professional fees	Lesser of \$535/day or 25% of billed charges plus 25% of allowed professional fees<
Civilian Inpatient Skilled Nursing Facility Care	\$11/day (\$25 minimum) charge per admission	\$250 per diem cost share or 20% cost share of total charges, whichever is less, institutional services, plus 20% cost share of separately billed professional charges	25% cost-share of allowed charges for institutional services, plus 25% cost-share of allowable for separately billed professional charges.
Civilian Inpatient Behavioral Health	\$40 per day; no charge for separately billed	20% of total charge. Plus, 20% of the allowable	High Volume Hospitals - 25% hospital specific per diem, plus

	professional charges	charge for separately billed professional services	25% of the allowable charge for separately billed professional services; Low Volume Hospitals - \$175 per day or 25% of the billed charges, whichever is lower, plus 25% of the allowable charge for separately billed services
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