

# UNDERSTANDING TRICARE AND YOUR TRICARE SUPPLEMENT PLAN



Welcome to the AMRA TRICARE Supplement Program. Combined with your TRICARE coverage, the TRICARE Supplement is a valuable asset. Association & Society Insurance Corporation (ASI) is the plan administrator. American Military Retirees Association (AMRA) is the plan sponsor, and Monumental Life Insurance Company and Transamerica Financial Life Insurance Company (NY residents only) are the plan underwriter. TRICARE is the Department Defense's medical program for active duty military families and eligible retirees and their family members and survivors.

## Eligible Employees must be under age 65 and are: —————

- Military retirees with 20 years of creditable military service and entitled to retired pay and their spouses/surviving spouses who are not eligible for Medicare.
- Retired Reservists and National Guardsmen between the ages of 60 and 65 with 20 years of creditable service and their spouses/surviving spouses who are not eligible for Medicare.
- Retired Reservists and National Guardsmen under age 60 and enrolled in TRICARE Retired Reserves (TRR) and their spouses/surviving spouses who are not eligible for Medicare.
- Military retirees and their spouses/surviving spouses, even if they are Medicare eligible, who reside outside the U.S. or its territories (all who are eligible for Medicare must be enrolled in Medicare).
- Military retirees and their spouses/surviving spouses age 65 or older but ineligible for Medicare (all must have received a Statement of Disallowance from Social Security Administration).

## Coverage is extended to: —————

- Active and retired employees over age 65 who are ineligible for Medicare or reside outside the U.S. or its territories.
- Eligible dependent children up to age 21 (23 if a full-time student). Coverage extended to age 26, if enrolled in TRICARE Young Adult (TYA) program.
- Incapacitated children may continue past policy age limits as long as TRICARE eligibility continues.

To be eligible for the TRICARE health benefit program, you and your eligible family members must be registered in the Defense Enrollment Eligibility Reporting System (DEERS). To register, verify or update your families' in DEERS, visit the DEERS Website. Information on TRICARE can be found on the TRICARE web site:

[www.tricare.mil](http://www.tricare.mil)

The TRICARE Supplement Plan has different eligibility requirements from your employer sponsored plans. Your eligibility for the supplement is based on TRICARE's eligibility guidelines and your employer's eligibility requirements.

Please contact ASI, plan administrator, at 1-866-637-9911 to verify your eligibility.

Get the facts you need about your TRICARE and TRICARE Supplement Plan so you can make the best choice for you!

**TRICARE has three BENEFIT OPTIONS for getting health care**

- TRICARE Standard
- TRICARE Extra
- TRICARE Prime

TRICARE offers beneficiaries three choices for their healthcare coverage: **TRICARE Standard, TRICARE Extra and TRICARE Prime**. TRICARE Standard and Extra work together to provide flexibility and freedom of choice when seeking care from civilian TRICARE authorized or TRICARE network providers.

Employees who are eligible for TRICARE may voluntarily enroll in the TRICARE Supplement Plan through their employer. TRICARE is their primary health coverage and the TRICARE Supplement secondary. The TRICARE Supplement works with TRICARE to pay the balance of covered services that you are responsible for paying. Your AMRA TRICARE Supplement Plan helps to pay 100% of your TRICARE Outpatient Deductible, cost share, copayments plus 100% of Covered Excess Charges.

## THE THREE OPTIONS OF TRICARE

### TRICARE Standard features:

- Indemnity plan- fee for service
- Freedom of choice in selecting your civilian TRICARE or Medicare authorized providers
- Requires no enrollment or enrollment fee
- No referral required for specialists
- Access to Military Treatment Facility (MTF) on a space available basis
- TRICARE pays 75% of the allowed amount after the TRICARE Standard Outpatient Deductible is met
- TRICARE Standard Outpatient Deductible of \$150 for individual/\$300 for family
- Works interchangeably with TRICARE Extra
- Available worldwide

### TRICARE Extra features:

- Similar to a preferred provider option
- Choice of civilian network providers (no network restrictions)
- Requires no enrollment or enrollment fee
- No referral required for specialists
- Access to Military Treatment Facility (MTF) on a space available basis
- TRICARE pays 80% of the contracted amount after the TRICARE Standard Outpatient deductible is met
- TRICARE Standard Outpatient Deductible of \$150 for individual/\$300 for family
- Works interchangeably with TRICARE Standard
- Available in the United States

### TRICARE Prime features:

- Similar to an HMO plan with a Point of Service (POS) option
- Requires a yearly enrollment and enrollment fee (\$230 per individual/\$460 per family)
- Must use a primary care manager (PCM) for in-network benefits
- Referral required for specialists
- Access to Military Treatment Facility (MTF)
- Point of Service is used if Prime beneficiary's do not obtain a referral
- POS Deductible of \$300 for individual/\$600 for family
- TRICARE pays 50% of the allowed amount after the POS Deductible is met
- Not available everywhere

## How the TRICARE Supplement Plan Helps to Pay for Covered Expenses after

### TRICARE Pays

#### Under TRICARE Standard/ Extra – The Supplement Plan pays:

- 100% of your fiscal year TRICARE Standard Outpatient deductible of \$150 per individual or \$300 per family.
- Your 25% cost share under TRICARE Standard and 20% cost share under TRICARE Extra.
- 100% of Covered Excess Charges.

#### Under TRICARE Prime/POS – The Supplement Plan pays:

- All covered TRICARE Prime copayments.
- \$150 Individual/\$300 family maximum of the POS fiscal year deductible.
- Your 50% cost share after TRICARE pays 50% of the POS allowed amount.
- 100% of Covered Excess Charges.

### For Prescription Drug Charges

#### Military Treatment Facility (MTF) –

- TRICARE pays 100% of coverage.

#### Civilian Network Pharmacy – 30 day supply

- TRICARE pays all but the copayments of \$3 generic, \$9 brand name or \$22 for non-formulary drugs.

#### Mail Order Pharmacy– 90 day supply

- TRICARE pays all but the copayment of \$3 generic, \$9 brand name, \$22 non formulary.

#### Civilian Non-Network Pharmacy- 30 day supply

- TRICARE Standard pays all but the TRICARE Outpatient deductible and \$9 brand-name/20% of the total cost or \$22 non-formulary or 20% of the cost, whichever is greater.
- Under the Prime POS, TRICARE pays all but the deductible (\$300 individual/ \$600 family) and the 50% cost share.

### What the Supplement Plan pays on Prescription Drug Charges:

#### Civilian Network Pharmacy – 30 day supply

- Your \$3 generic, \$9 brand-name or \$22 non-formulary copayment.

#### Mail Order Pharmacy– 90 day supply

- Your \$3 generic, \$9 brand-name or \$22 non-formulary copayment.

#### Civilian Non-Network Pharmacy- 30 day supply

- Your fiscal year TRICARE Standard Outpatient Deductible of \$150 individual/\$300 family maximum plus \$9/20% of total cost for brand-name or \$22/20% of total cost for non-formulary copayment, whichever is greater.
- 50% of the POS Deductible of \$300 individual/\$600 family maximum plus your 50% POS cost share.

**How does the TRICARE Supplement Plan work with TRICARE?**

The TRICARE Supplement Plan helps to pay virtually 100% of covered health care cost after TRICARE Pays

**When you use TRICARE and the TRICARE Supplement Plan you will receive 100% of your prescription copay reimbursement**

**See the TRICARE Supplement Plan brochure, member handbook or Certificate of Insurance for exclusions and limitations.**

## Questions?

ASI's Call Center Representatives are available to answer your questions.

Call toll-free 1-866-637-9911 or email [custsvc@asicorporation.com](mailto:custsvc@asicorporation.com)

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