THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, D. C. 20301-1200

HEALTH AFFAIRS

MAR 29 2001

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)
ASSISTANT SECRETARY OF THE NAVY (M&RA)
ASSISTANT SECRETARY OF THE AIR FORCE (MRAI&E)

SUBJECT: Policy on New TRICARE Pharmacy Copayments and Elimination of Active Duty Family Member (ADFM) TRICARE Prime Copayments

The purpose of this memorandum is to introduce the new TRICARE Pharmacy copayments and to announce the elimination of copayments for care provided to family members of active duty personnel enrolled in TRICARE Prime. These changes are effective on April 1, 2001. A summary of the copayment changes is attached. I request your assistance in communicating this information to our Active Duty Family Members (ADFMs). My points of contact are Colonel Bill Davies, (703) 681-0039, ext 3617 regarding the new pharmacy program and Lt Col M. Loretta Bailey, (703) 681-0039, ext. 3672 on the elimination of ADFM Prime copayments.

John F. Magnuson

for J. Jarrett Clinton, MD, MPH
Acting Assistant Secretary

Attachment:
As stated

cc:
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force
TRICARE Management Activity
Regional Lead Agents

Summary of TRICARE Prime Cost Sharing

HMO Benefit	Active Duty Family Members	
	Before 1 Apr 01	Effective 1 Apr 01
Outpatient Cost Sharing		
Outpatient Visits, primary and specialty care. Includes most physician office visits and other routine services.	$6 / $12 E1-4 ADFMs/ E-5+ ADFMs	$0
Outpatient Mental Health Visits: a. Individual b. Group	a. $10 / $20 b. $6 / $12	a. $0 b. $0
Durable Medical Equipment, Prosthetic Devices, and other authorized supplies	10% / 15%	$0
Emergency Room Services	$10 / $30	$0
Ambulatory Surgery Services – Primary Surgeon Services	$25 / $25	$0
Prescription Medications	National Mail Order Pharmacy (NMOP): $4 *(up to a 90-day supply)* Networks: $5 *(up to a 30-day supply)* Non-Network: See POS	NMOP: $3 / $9* *(up to a 90-day supply)* Network: $3 / $9* *(up to a 30-day supply)* Non-Network: See POS * Generic / Brand Name
Ambulance Services	$10 / $15	$0
Preventive Services (e.g., Pap smears, periodic health promotion/disease prevention exams, hearing exams)	$0	$0
Inpatient Cost Sharing		
Acute Care Admissions -- Civilian	$11 / $11	$0
Acute Care Admissions -- Military Treatment Facility (Family Member Rate)	$11.45 / $11.45	$0
Mental Health/Substance Use Treatment Admissions and for Partial Hospitalization Services	$20 / $20	$0
Point of Service (POS) Charges	$300 / $600 Deductible* plus 50% of allowables ** Individual/Family Deductible*	$300 / $600 Deductible* plus 50% of allowables ** Individual/Family Deductible*
Program for Persons with Disabilities (PFPWD). This program is not affected by this change.	$25--$250 depending on AD Sponsor's rank *TRICARE Policy Manual Chapter 8, Section 1.16*	$25--$250 depending on AD Sponsor's rank *These are not Prime copays*