



Health Insurance

Quick Guide to Military Insurance

In this Quick Guide to Military insurance, you'll learn about the different types of health insurance coverage for individuals who are, or have, served in the U.S. Military and their dependents. Coverage for individuals who are or have served in the Reserve or National Guard and their dependents are also included.

An Overview of Military Insurance:

- TRICARE plans depend primarily on the sponsor's military status, and secondarily on the additional beneficiary's relation to the sponsor.
 - Active duty military are automatically in **TRICARE Prime**, unless stationed overseas, in which case their coverage will depend on how "remote" their duty station is. TRICARE Prime can also cover the dependents of active duty service members.
 - **TRICARE Select** is similar to TRICARE Prime, but provides greater choice of providers for dependents.
 - **TRICARE Reserve Select** is an optional program for members of the Reserve or National Guard and their dependents. It is similar to TRICARE Select in its flexibility of provider choice and co-pay structure.
 - Finally, VA Health and TRICARE for Life are legacy programs that provide coverage to former service members depending on income, Medicare eligibility and coverage status, and VA Disability Group.
 - **VA Health** is for individuals who served in the active military, naval, or air services and didn't receive a dishonorable discharge. If you enlisted after 9/7/80, or entered active duty after 10/16/81, you must have served 24 continuous months or the full period for which you were called to active duty, unless, you:
 - Were discharged for a disability that was caused/or made worse by your active-duty service, or
 - Were discharged for a hardship or "early out," or
 - Served prior to 9/7/80
 - For details on who is eligible and to apply, visit [VA.gov](https://www.va.gov).
 - **TRICARE for Life** is Medicare-wraparound coverage (sometimes called Medigap coverage, filling the gaps in Medicare Part A and/or Part B coverage) for TRICARE beneficiaries who have Medicare Part A and B. This program is applied regardless of your age or where you live. It provides comprehensive health care coverage. With TRICARE for Life, you get prescription coverage under TRICARE's Pharmacy Program.

Visit [tricare.mil/Plans/Eligibility](https://www.tricare.mil/Plans/Eligibility) to determine the programs for which you are eligible.

It is important to note that what someone might pay for out-of-pocket costs for these plans, may depend on a variety of factors, including priority groups and rank in the military, such as E1 through E5, which refer to the first five ranks of the enlisted pay structure for the respective military branch.

For a breakdown of the various military ranks: [defense.gov/Resources/Insignia](https://www.defense.gov/Resources/Insignia). For information about priority groups: [va.gov/health-care/eligibility/priority-groups](https://www.va.gov/health-care/eligibility/priority-groups).

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The information below is for the 2021 coverage year and is subject to change.

1. Coverage for an Active-Duty Service Member: TRICARE Prime

- Cost: No out-of-pocket costs, with a few exceptions for prescriptions (home delivery, retail, brand-name, etc.)
- Primary Care Manager: an assigned primary care manager (“PCM”) provides most of your care. Your PCM is a military or network provider, who refers you to specialists for care he or she can't provide. Your PCM works with your regional contractor for referrals/authorization



2. Coverage for a Separated Veteran:

- **VA Benefits**
 - Cost: Out-of-pocket costs depend on priority groups. View a comprehensive list of co-payments: va.gov/health-care/copay-rates
- **TRICARE for Life**
 - Cost: Out-of-pocket costs vary based on duty status and date of appointment to armed service. For example: an active-duty service member who joined prior to 1/1/2018, would pay:
 - Monthly Premiums & Enrollment: \$0
 - Deductible
 - E1-E4: \$50/individual and \$100/family; E5 & above: \$150/individual and \$300/family
 - Co-pays for an Outpatient Visit (Primary Care): \$0 if covered by both Medicare and TRICARE; otherwise 15% Network, 20% Non-network, 25% Overseas
 - Catastrophic Cap: \$1,000 per calendar
 - For TRICARE for Life details including for coverage of active duty service members who joined the armed forces after 1/1/18, visit : tricare.mil/~media/files/tricare/publications/handbooks/tfl_hbk.pdf

3. Coverage for a Spouse or Minor Child of an Active-Duty Service Member

- **TRICARE Prime** – Costs: see above
- **TRICARE Select**
 - Cost: No out-of-pocket costs for services at a military facility, except a small fee for in-patient care.
 - Monthly Premiums & Enrollment: \$0
 - Deductible
 - E1-E4: \$52/individual and \$105/family; E5 & above: \$158/individual and \$317/family
 - Co-pays
 - Outpatient Visit (Primary Care): \$15 Network and 20% Non-network
 - Prescriptions: Depends on “Tier” and mode of disbursement [\$0-\$60 or 20%]
 - Catastrophic Cap: \$1,058 per calendar year
- **TRICARE for Life** – Costs: see above

4. Coverage for a Surviving Spouse or Minor Child of a Deceased Active-Duty Service Member

- **TRICARE Prime** – Costs: see above; **TRICARE Select** – Costs: see above

5. Coverage for Selected Reserve or National Guard (and Dependents if Desired)

- **TRICARE Reserve Select**
 - Cost: you have to pay a monthly or quarterly premium depending on your plan.
 - Monthly Premiums: Member only, \$47.20/month or Member + Family, \$238.99/month
 - Deductible
 - E1-E4: \$52/individual and \$105/family; E5 & above: \$158/individual and \$317/family
 - Co-pays
 - Outpatient Visit (Primary Care): \$15 Network and 20% Non-network
 - Prescriptions: Depends on “Tier” and mode of disbursement [\$0-\$60 or 20%]
 - Catastrophic Cap \$1,058 per calendar year

For more health insurance information, visit our free materials and resources at: TriageHealth.org/health-insurance

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