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# *TRICARE<sup>®</sup> Pharmacy Program Handbook*

*A guide to understanding your  
pharmacy benefit*



# Pharmacy

<b>TRICARE Pharmacy Home Delivery</b> <i>(United States)</i>	1-877-363-1303
<b>TRICARE Pharmacy Home Delivery</b> <i>(Overseas)</i>	See Figure 7.1 on page 32 for international toll-free access numbers.
<b>TRICARE Retail Network Pharmacies</b> <i>(United States, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands)</i>	1-877-363-1303
<b>TRICARE Web Site</b>	<a href="http://www.tricare.mil">www.tricare.mil</a>
<b>Express Scripts, Inc. Web Site</b>	<a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a>
<b>TRICARE Formulary Web Site</b>	<a href="http://www.tricare.mil/pharmacyformulary">www.tricare.mil/pharmacyformulary</a>

**Local Military Treatment Facility Pharmacy:** \_\_\_\_\_

**Local Retail Pharmacy:** \_\_\_\_\_

**Medical Provider:** \_\_\_\_\_

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### ***An Important Note About TRICARE Program Changes***

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. For the most recent information, contact your pharmacy contractor or local TRICARE Service Center. More information regarding TRICARE, including the Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices, can be found online at [www.tricare.mil](http://www.tricare.mil).

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# Welcome to the TRICARE Pharmacy Program!

TRICARE's pharmacy benefit is available to all eligible uniformed service members, retirees, and family members, including beneficiaries age 65 and older. The TRICARE Pharmacy Program provides outpatient prescription drugs to more than 9.6 million individuals.

Express Scripts, Inc. (Express Scripts), who administers the TRICARE pharmacy benefit, provides your home delivery, retail, and specialty pharmacy services. Express Scripts handles millions of prescriptions each year through home delivery and retail network pharmacies.

The TRICARE Pharmacy Program is designed to provide the medications you need, when you need them, in a safe, convenient, and cost-effective manner. The program's three objectives are to:

- 1. Provide a uniform, effective, and efficient benefit:** TRICARE provides you with several pharmacy options. The *TRICARE Pharmacy Program Handbook* contains more information on:
  - Military treatment facility pharmacies
  - TRICARE Pharmacy Home Delivery
  - TRICARE retail network pharmacies
  - Non-network retail pharmacies
- 2. Encourage TRICARE Pharmacy Home Delivery use:** TRICARE Pharmacy Home Delivery is your least expensive option when not using a military treatment facility pharmacy. You can receive up to a 90-day supply of maintenance medications delivered directly to your home. The Member Choice Center is available at **1-877-363-1433** to help you switch prescriptions to the convenient, cost-effective home delivery option.

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**3. Promote patient safety:** All prescriptions dispensed through military treatment facilities, TRICARE Pharmacy Home Delivery, and retail network pharmacies are rigorously checked for accuracy and against your TRICARE prescription history for potential drug interactions.

The TRICARE retail pharmacy network includes most of the major national chains, over 100 regional chains, and more than 20,000 independent community pharmacies. If you are unsure if your current pharmacy is a TRICARE retail network pharmacy, please ask your pharmacist.

For more information, refer to this *TRICARE Pharmacy Program Handbook*. You can also visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy) or [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE), or call **1-877-363-1303**.

In good health,

A handwritten signature in black ink that reads "Thomas J. McGinnis". The signature is written in a cursive, flowing style.

RADM Thomas J. McGinnis, RPh, USPHS  
Chief, Pharmaceutical Operations Directorate

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# TRICARE Pharmacy Program

Welcome to the TRICARE Pharmacy Program. As a TRICARE beneficiary, you have access to comprehensive prescription drug coverage and several options for filling your prescriptions. TRICARE chose Express Scripts, Inc. (Express Scripts) to provide your home delivery, retail, and specialty pharmacy services. Express Scripts handles millions of prescriptions each year through its home delivery service and retail pharmacies.

This handbook will help you make the most of your pharmacy benefit. You'll find information about your pharmacy options, cost-shares, and contact information if you need assistance. If you have questions about your pharmacy benefit or your prescription medications after reading this handbook, resources are available to help you. See the *For Information and Assistance* section of this handbook for contact information.

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# Getting Started

## Eligibility

The TRICARE Pharmacy Program is available to all TRICARE-eligible beneficiaries registered in the Defense Enrollment Eligibility Reporting System (DEERS).<sup>\*</sup> It is essential that you keep information in DEERS up to date for you and your family members to ensure TRICARE eligibility including your pharmacy benefit. You may update DEERS information using any of the options listed in Figure 1.1.

*\* If you are enrolled in the US Family Health Plan (USFHP), you are not eligible for the TRICARE Pharmacy Program. You must use USFHP pharmacy providers. For details about USFHP, visit [www.usfhp.com](http://www.usfhp.com) or call 1-800-748-7347.*

### Maintaining Your DEERS Information

Figure 1.1

<b>In Person<sup>1</sup></b> <i>(add or delete a family member or update contact information)</i>	<ul style="list-style-type: none"><li>• Visit a local identification card-issuing facility.</li><li>• Find a facility near you at <a href="http://www.dmdc.osd.mil/rsl">www.dmdc.osd.mil/rsl</a>.</li><li>• Call to verify location and business hours.</li></ul>
<b>Online<sup>2</sup></b>	<ul style="list-style-type: none"><li>• <b>milConnect Web site:</b> <a href="http://milconnect.dmdc.mil">http://milconnect.dmdc.mil</a></li></ul>
<b>Phone<sup>2</sup></b>	<ul style="list-style-type: none"><li>• 1-800-538-9552</li><li>• 1-866-363-2883 (TDD/TTY)</li></ul>
<b>Fax<sup>2</sup></b>	<ul style="list-style-type: none"><li>• 1-831-655-8317</li></ul>
<b>Mail<sup>2</sup></b>	<ul style="list-style-type: none"><li>• Defense Manpower Data Center Support Office 400 Gigling Road Seaside, CA 93955-6771</li></ul>

1. Only sponsors (or those appointed power of attorney) can add or delete a family member. Family members age 18 and older may update their own contact information.

2. Use these methods to change contact information only.

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## **Medicare-Eligible Beneficiaries**

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Medicare-eligible beneficiaries are able to use the TRICARE Pharmacy Program benefit. However, TRICARE beneficiaries who turned 65 on or after April 1, 2001, are required to have Medicare Part B. If you do not have Medicare Part B, your pharmacy benefit is limited to the medications available at military treatment facility pharmacies. Medicare-eligible beneficiaries are also eligible for Medicare Part D prescription drug plans. However, you do not need to enroll in a Medicare Part D prescription drug plan to keep your TRICARE benefit. You may visit [www.tricare.mil/medicarepartd](http://www.tricare.mil/medicarepartd) for additional details. For the most current information about Medicare Part D, call Medicare at **1-800-MEDICARE (1-800-633-4227)** or visit the Medicare Web site at [www.medicare.gov](http://www.medicare.gov).

## **National Guard and Reserve Members with Line-of-Duty Conditions**

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Medications associated with line-of-duty (LOD) conditions are coordinated through the Military Medical Support Office. National Guard and Reserve members may be eligible to receive reimbursement for medications in connection with their LOD conditions. For more information, go to [www.tricare.mil/tma/MMSO/how.aspx](http://www.tricare.mil/tma/MMSO/how.aspx) and click “How to submit pharmacy reimbursement for Guard and Reservist with line of duty (LOD) injuries or illness.”

## **Your Privacy Rights**

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### **Health Insurance Portability and Accountability Act of 1996 Compliance**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) includes provisions to ensure individual privacy regarding your personal health information. TRICARE and Express Scripts, Inc. (Express Scripts) are committed to meeting the HIPAA and Department of Defense (DoD) guidelines related to your privacy. For more information on HIPAA and TRICARE, visit [www.tricare.mil/hipaa](http://www.tricare.mil/hipaa).

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## **Your Personal Health Information**

To provide you with pharmacy services, administer your prescription benefits, coordinate or manage pharmacy-related services, and support health care operations, Express Scripts may require personal health and prescription drug information from you, your provider, or your retail pharmacy. Express Scripts uses this information to:

- Verify your identity and program pricing
- Identify adverse drug interactions
- Accurately process your prescription orders
- Keep you informed about the status of your TRICARE Pharmacy Home Delivery prescriptions, proper use of your medications, available treatment options, and benefit options

Express Scripts is contractually required to provide individual pharmacy claims data for payment processing and record keeping. Express Scripts is also obligated to report to TRICARE any unusual activity that may constitute fraud or abuse of benefits.

The DoD and Express Scripts may also use information and prescription data from submitted claims for reporting and analysis purposes pertaining to health oversight, health care operations, public health and safety, and research, and to support U.S. Food and Drug Administration activities.

In response to a court order, subpoena, search warrant, law, or regulation, Express Scripts may be legally required to release your personal information. If that happens, Express Scripts will notify you unless doing so violates the law or court order.

Other than the circumstances previously listed, Express Scripts will not use or disclose your personal information to a third party without your permission.

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# TRICARE Pharmacy Options

The TRICARE Pharmacy Program provides outpatient prescription drugs through four outpatient service options:

- Military treatment facility (MTF) pharmacies
- TRICARE Pharmacy Home Delivery
- TRICARE retail network pharmacies
- Non-network retail pharmacies

Prescriptions filled through the MTF, TRICARE Pharmacy Home Delivery, and retail network pharmacies are checked for accuracy and are checked against your TRICARE prescription history for potential drug interactions.

## **Military Treatment Facility Pharmacy**

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An MTF pharmacy is your least expensive option for filling prescriptions. At an MTF pharmacy, you may receive up to a 90-day supply of most medications at no cost. Most MTF pharmacies accept prescriptions written by both civilian and military providers, regardless of whether or not you are enrolled at the MTF.

Non-formulary medications are generally not available at MTF pharmacies. Contact the nearest MTF pharmacy to check the availability of a particular drug. See “Formulary and Non-Formulary Drugs” in the *Covered Services, Limitations, and Exclusions* section of this handbook.

Visit [www.tricare.mil/militarypharmacy](http://www.tricare.mil/militarypharmacy) for more information on MTF pharmacies.

## **TRICARE Pharmacy Home Delivery**

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TRICARE Pharmacy Home Delivery is your least expensive option when not using an MTF pharmacy. There is no cost for TRICARE Pharmacy Home Delivery for active duty service members. For all other beneficiaries, there is no cost to receive up to a 90-day supply of generic medications. Copayments apply for brand-name and non-

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formulary medications (*up to a 90-day supply*). Home delivery is best suited for medications you take on a regular basis. Prescriptions are delivered to you with free standard shipping, and refills can be ordered easily online, by phone, or by mail. Home delivery also provides you with convenient notifications about your order status, refill reminders, and assistance in renewing expired prescriptions. If you have questions about your prescriptions, pharmacists are available 24 hours a day, 7 days a week to talk confidentially with you.

For more information about TRICARE Pharmacy Home Delivery, visit [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) or call **1-877-363-1303**.

For your safety and privacy, your order will be shipped in tamper-resistant, weather-resistant, unmarked packaging. Your order should arrive at your U.S. postal address within 14 days. To ensure you receive a refill before your current supply runs out, re-order at least two weeks before you need your refill. You should allow extra time for APO/FPO delivery. Be sure to check the refill date on your prescription to determine when your next refill is available. Orders placed before the next available refill date will be held until your prescription can be refilled. Once the next available refill date arrives, your prescription automatically will ship to you.

Prescriptions may be mailed to any address in the United States and U.S. territories (*American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands*). Outside of the United States and U.S. territories, you can only use TRICARE Pharmacy Home Delivery if you have an APO/FPO address or are assigned to a U.S. Embassy or State Department. You must have a prescription written by a U.S.-licensed provider. Refrigerated medications cannot be shipped to APO/FPO addresses.

Beneficiaries residing in Germany cannot use the home delivery option due to country-specific legal restrictions. If you live in Germany, you should fill prescriptions at MTF pharmacies or host nation pharmacies.

**Note:** If you have other health insurance with a pharmacy benefit, you may not be eligible to use TRICARE Pharmacy Home Delivery. See “Coordinating Pharmacy Benefits with Other Health Insurance” in the *Claims* section of this handbook.

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## How To Register for TRICARE Pharmacy Home Delivery

You may register for TRICARE Pharmacy Home Delivery by using any of the options listed in Figure 2.1.

*TRICARE Pharmacy Home Delivery Registration Methods*      *Figure 2.1*

<b>Online</b>	<ul style="list-style-type: none"><li>• Visit <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li></ul>
<b>Phone</b>	<ul style="list-style-type: none"><li>• 1-877-363-1303</li><li>• 1-877-540-6261 (TDD/TTY)</li></ul>
<b>Mail</b>	<ul style="list-style-type: none"><li>• Download the registration form from <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a> and mail it to: Express Scripts, Inc. P.O. Box 52150 Phoenix, AZ 85072-9954</li></ul>

### Member Choice Center

The Member Choice Center makes it easy to reduce your out-of-pocket costs by transferring your current maintenance medication prescriptions to TRICARE Pharmacy Home Delivery. For the convenience of home delivery, contact the Member Choice Center to convert your current retail or MTF prescriptions. TRICARE Pharmacy Home Delivery copayments apply.

To get started, visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy) or [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) or call **1-877-363-1433**.

**Note:** To use the Member Choice Center, you must have a maintenance prescription dispensed at a retail pharmacy or MTF. The Member Choice Center will contact your provider to obtain a new written prescription for home delivery.

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## How To Use TRICARE Pharmacy Home Delivery

### *Filling a New Prescription by Mail*

- Ask your provider to write a new prescription for the maximum days' supply allowed (*up to a 90-day supply for most medications*).\*
- Complete the *New Patient Mail Order Form*, available at [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE).
- Mail the completed form, your written prescription, and payment to:  
Express Scripts, Inc.  
P.O. Box 52150  
Phoenix, AZ 85072-9954
- Payment may be made by credit card, check, or money order.  
**Note:** To ensure proper prescription fulfillment, follow all instructions on the form.
- Include the following information **on the back of each prescription**: patient's full name, date of birth, address, and sponsor's identification (ID) number.

\* *The Department of Defense Pharmacy and Therapeutics Committee may set quantity limits on some medications. For more information, visit [www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary).*

### *Filling a New Prescription by Fax*

- In the United States, ask your provider to fax your new prescription (*with a fax cover sheet*) directly to Express Scripts, Inc. (Express Scripts) at **1-877-895-1900**.
- If you are in an overseas location, have your U.S.-licensed provider fax your prescription to **1-602-586-3911**.
- Faxed prescriptions must contain the following information to be processed: patient's full name, date of birth, address, and sponsor's ID number.
- According to state law, only prescriptions faxed directly from your provider's office will be accepted.
- Prescriptions for Schedule II controlled substances cannot be faxed; by law, they must be mailed.

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## ***Filling a New Prescription Electronically***

- Your provider will need to pull your information from their internal Practice Management System or input it directly into their e-prescribing software.
- Ask your provider to select the TRICARE formulary in their e-prescribing system.
- Have your provider choose the default location of “Express Scripts Mail Pharmacy” to submit your prescription to TRICARE Pharmacy Home Delivery.
- If you are not already registered for home delivery, Express Scripts will use the information submitted with your prescription to complete your registration and contact you if they have any problems filling your prescription.

**Note:** Prescriptions for controlled substances cannot be accepted by TRICARE Pharmacy Home Delivery at this time through e-prescribing technology.

## ***Ordering Refills Online***

- Visit **[www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE)**.
- During your first visit to the Web site, complete the brief online account activation. This will make future visits fast and easy.
- The Web site lets you check your order status, offers easy-to-use tools to help you make cost-effective choices about your prescription drugs, request refills, look up general information about prescription drugs and health conditions, and more.

## ***Ordering Refills by Phone***

- Call **1-877-363-1303**.
- Have your sponsor’s ID number, your prescription number, and credit card information ready when you call.

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## **TRICARE Retail Network Pharmacy**

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Another option for filling your prescriptions is through a TRICARE retail network pharmacy. You may fill prescriptions (*one copayment for each 30-day supply*) when you present your written prescription along with your uniformed services ID card to the pharmacist. All TRICARE-eligible beneficiaries who are registered in the Defense Enrollment Eligibility Reporting System (DEERS) are automatically eligible for the retail network pharmacy option. This option allows you to fill your prescriptions at TRICARE retail network pharmacies throughout the country without having to submit a claim. You have access to a network of approximately 56,000 retail pharmacies in the United States and the U.S. territories of Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands. Currently, there are no TRICARE retail network pharmacies in American Samoa. Registration is **not** required. To find the nearest TRICARE retail network pharmacy, visit [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) or call **1-877-363-1303**.

## **Non-Network Retail Pharmacy**

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At non-network retail pharmacies, you will pay the full price of your medication up front and file a claim for reimbursement. Reimbursements are subject to deductibles, out-of-network cost-shares, and TRICARE-required copayments. All deductibles must be met before any reimbursement can be made. For details about filing claims, see the *Claims* section of this handbook.

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# Covered Services, Limitations, and Exclusions

The TRICARE Pharmacy Program provides outpatient coverage to beneficiaries for medications that are approved for marketing by the U.S. Food and Drug Administration (FDA) and that generally require prescriptions. All prescriptions must be written by health care providers who are licensed in the United States or U.S. territories (*American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands*).

For a general list of prescription drugs that are covered under TRICARE, and for drugs requiring prior authorization or that have quantity limits, visit [www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary). If you do not have Internet access, call **1-877-363-1303** for information about specific drugs.

## Generic Drug Policy

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Generic drugs are medications approved by the FDA that are clinically the same as brand-name medications. Generic drugs provide the same safe, effective treatment as brand-name drugs and help you save money.

Department of Defense (DoD) policy on generic drugs states the following:

- TRICARE will fill your prescription with a generic-equivalent medication.
- Brand-name drugs that have a generic equivalent may be dispensed **only** after the prescribing provider completes a clinical assessment that indicates the brand-name drug should be used in place of the generic medication and approval is granted by Express Scripts, Inc. (Express Scripts). In those cases, you will pay the brand-name copayment. However, if you fill a prescription with a brand-name drug that is not considered medically necessary and a generic equivalent is available, you will be responsible for paying the entire cost of the prescription.

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- If a generic equivalent does not exist, the brand-name drug is dispensed and you will pay the brand-name copayment. For copayment information, see Figure 5.1 in the *Costs* section of this handbook.

For more information about generic drugs, visit the FDA’s Web site at [www.fda.gov](http://www.fda.gov).

## **Formulary and Non-Formulary Drugs** .....

The DoD has established a uniform formulary, which is a list of covered generic and brand-name drugs. This formulary also contains a third tier of medications that are non-formulary. Prescriptions for non-formulary drugs are dispensed at a higher cost to beneficiaries.

Non-formulary medications include any drug in a therapeutic class determined to be not as clinically effective or as cost-effective as other drugs in the same class. For an additional cost, all third-tier drugs are available through TRICARE Pharmacy Home Delivery and most are available through retail network pharmacies. You may be able to fill non-formulary prescriptions at formulary costs if your provider establishes medical necessity by completing and submitting the appropriate TRICARE pharmacy medical-necessity form. Forms and medical-necessity criteria are available online at [www.pec.ha.osd.mil/forms\\_criteria.php](http://www.pec.ha.osd.mil/forms_criteria.php) or by calling Express Scripts at **1-877-363-1303**.

To learn more about medications and common drug interactions, check for generic equivalents, or determine if a drug is a non-formulary medication, visit the online TRICARE Formulary Search Tool at [www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary).

For information on how to save money and make the most of your pharmacy benefit, visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy) or [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE).

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## **Medical Necessity for Non-Formulary Medications (at Formulary Copayments)**

Medical necessity criteria are established by the DoD Pharmacy & Therapeutics (P&T) Committee for each non-formulary medication. If the medical-necessity criteria are met, the beneficiary may receive the non-formulary medication at a retail network pharmacy or through TRICARE Pharmacy Home Delivery at a lower copayment. Your provider can establish medical necessity by completing and submitting the appropriate TRICARE pharmacy medical-necessity form for the non-formulary medication.

Forms and medical-necessity criteria are available online at **[www.pec.ha.osd.mil/forms\\_criteria.php](http://www.pec.ha.osd.mil/forms_criteria.php)** or by calling Express Scripts at **1-877-363-1303**.

- **Active duty service members (ADSMs):** If medical necessity is approved, ADSMs may receive non-formulary medications through TRICARE Pharmacy Home Delivery or at retail network pharmacies at no cost. ADSMs may not fill prescriptions for non-formulary medications unless medical necessity is established.
- **All other eligible beneficiaries:** If medical necessity is approved, the beneficiary may receive the non-formulary medication at the formulary cost through TRICARE Pharmacy Home Delivery or at retail network pharmacies.

To learn more about specific medications, copayments, and common drug interactions, or to check for generic equivalents or determine if a drug is considered a non-formulary medication, visit the online TRICARE Formulary Search Tool at **[www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary)**.

**Note:** Non-formulary drugs are generally not available at military treatment facilities.

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## Step Therapy

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Step therapy involves prescribing a safe, clinically effective, and cost-effective medication as the first step in treating a medical condition. The preferred medication is often generic and offers the best overall value in terms of safety, effectiveness, and cost. Non-preferred drugs are only prescribed if the preferred medication is ineffective or poorly tolerated.

Drugs subject to step therapy are approved for first-time users only after they have tried one of the preferred medications on the DoD Uniform Formulary (*e.g., currently a beneficiary must try omeprazole or Nexium® before using any other proton pump inhibitor*).

**Note:** Generally, if you filled a prescription for a step-therapy drug within 180 days prior to the start of step therapy, you will not be affected by step-therapy requirements and will not be required to switch medications.

## Quantity Limits

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TRICARE has established quantity limits on certain medications, which means that the DoD will only pay for up to a specified, limited amount of medication each time you fill a prescription. Quantity limits are often applied to ensure medications are safely and appropriately used. Exceptions to established quantity limits may be made if the prescribing provider is able to justify medical necessity.

## Prior Authorization

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Some drugs require prior authorization from Express Scripts. Medications requiring prior authorization may include, but are not limited to, prescription drugs specified by the DoD P&T Committee, brand-name medications with generic equivalents, medications with age limitations, and medications prescribed for quantities exceeding normal limits. For a general list of prescription drugs that are covered under TRICARE, and for drugs that require prior authorization or that have quantity limits, visit [www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary). If you do not have Internet access, call **1-877-363-1303** to ask about a specific drug.

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## **Exclusions**

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Prescription medications used to treat conditions that are not currently covered by TRICARE either by statute or regulation are likewise excluded from the pharmacy benefit. Excluded medications include:

- Drugs prescribed for cosmetic purposes
- Fluoride preparations
- Food supplements
- Homeopathic and herbal preparations
- Multivitamins
- Over-the-counter products (*except insulin and diabetic supplies*)
- Weight reduction products

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# Specialty Medication Care Management

## **What Are Specialty Medications?**

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Specialty medications are usually high-cost; self-administered; injectable, oral, or infused drugs that treat serious chronic conditions (e.g., *multiple sclerosis, rheumatoid arthritis, hepatitis C*). These drugs typically require special storage and handling, and are not readily available at your local pharmacy. Specialty medications may also have side effects that require nurse or pharmacist monitoring.

The Specialty Medication Care Management program offers continuous health evaluation, ongoing monitoring, assessment of educational needs, and management of medication use. This program provides:

- Access to proactive, clinically based services for specific diseases
- Refill reminder calls
- Scheduled deliveries to your specified location
- Specialty consultation with a nurse or pharmacist at any point during your therapy

These services are provided to you at no additional cost when you receive your medications through TRICARE Pharmacy Home Delivery. Participation is voluntary. If you or your provider orders a specialty medication from the TRICARE Pharmacy Home Delivery, you will receive additional information from Express Scripts, Inc. about the Specialty Medication Care Management program and how to get started. Specialty drugs are subject to applicable copayments. See Figure 5.1 in the *Costs* section of this handbook for copayment details.

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## **Expert Assistance Available**

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By using TRICARE Pharmacy Home Delivery for your specialty medications, you have the opportunity to speak to a nurse about your condition and your specific needs. The nurse will discuss your progress, help identify new symptoms, address any side effects or issues, and coordinate with your doctor. All of this is designed to help you achieve the best possible health outcomes from your therapy.

A pharmacist is also available to discuss potential drug interactions or side effects, as well as any questions you may have about your prescription.

Nurses and pharmacists are available to you for as long as you are taking the specialty medication. Nurses are available Monday–Friday, 8:00 a.m.–9:00 p.m. Eastern Time, and pharmacists are available 24 hours a day, 7 days a week.

You also have access to educational materials and Web sites to help manage your condition.

## **Filling Specialty Medication Prescriptions**

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Using TRICARE Pharmacy Home Delivery to fill specialty medication prescriptions provides you with access to the Specialty Medication Care Management program benefits described previously. You may submit a specialty medication prescription by mail or your provider may submit it by fax. If you are currently using another pharmacy to fill your specialty medication prescription, you can contact the Member Choice Center at **1-877-363-1433** to switch to the Specialty Medication Care Management program. Contact information is provided in Figure 4.1.

With specific mailing instructions from you or your provider, TRICARE Pharmacy Home Delivery will ship your specialty medication to your home. For your convenience and safety, TRICARE Pharmacy Home Delivery will contact you to arrange delivery before the medication is shipped.

<p><b>Mail</b></p>	<ul style="list-style-type: none"> <li>• Express Scripts, Inc. P.O. Box 52150 Phoenix, AZ 85072-9954</li> </ul>
<p><b>Fax</b> <i>(providers only)</i></p>	<ul style="list-style-type: none"> <li>• <b>In the United States:</b> 1-877-895-1900</li> <li>• <b>Overseas:</b> 1-602-586-3911</li> </ul>
<p><b>Member Choice Center</b> <i>(to switch your medication to the Specialty Medication Care Management program)</i></p>	<ul style="list-style-type: none"> <li>• 1-877-363-1433</li> </ul>

**Note:** Some specialty medications may not be available through TRICARE Pharmacy Home Delivery because the medication’s manufacturer limits the drug’s distribution to specific pharmacies. If you submit a prescription for a limited-distribution medication, TRICARE Pharmacy Home Delivery will either forward your prescription to a pharmacy of your choice or provide you with instructions about where to send the prescription to have it filled. Visit [www.tricare.mil/pharmacyformulary](http://www.tricare.mil/pharmacyformulary) to determine if your specialty medication is available through home delivery.

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# Costs

Pharmacy costs are based on whether the prescription is considered a formulary generic (*Tier 1*), formulary brand name (*Tier 2*), or non-formulary (*Tier 3*), and where you choose to have your prescription filled.

## Pharmacy Copayments

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Active duty service members have no pharmacy copayments when using military treatment facility pharmacies, TRICARE retail network pharmacies, or TRICARE Pharmacy Home Delivery.

Figure 5.1 lists copayments for prescription drugs for non-active duty beneficiaries.

If you are traveling overseas, be aware that TRICARE retail network pharmacies are only available outside the United States in the U.S. territories of Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands. Currently, there are no TRICARE retail network pharmacies in American Samoa. At a host nation (*overseas*) pharmacy, you will be required to pay in full and file a claim for reimbursement. See the *Claims* section of this handbook for claims-filing details.

**Note:** In the Philippines, you are required to use certified pharmacy providers. Visit [www.tricare-overseas.com/philippines.htm](http://www.tricare-overseas.com/philippines.htm) for more information.

Type of Pharmacy	Formulary Drugs		Non-Formulary Drugs (Tier 3) <sup>1</sup>
	Generic (Tier 1)	Brand Name (Tier 2)	
<b>Military Treatment Facility</b> <i>(up to a 90-day supply)</i>	\$0	\$0	Not Applicable <sup>2</sup>
<b>TRICARE Pharmacy Home Delivery</b> <i>(up to a 90-day supply)</i>	\$0	\$13	\$43 <sup>1</sup>
<b>Retail Network Pharmacy</b> <i>(up to a 30-day supply)</i>	\$5	\$17	\$44 <sup>1</sup>
<b>Non-Network Pharmacy</b> <i>(up to a 30-day supply)</i>	<b>TRICARE Prime options:</b> 50% copayment applies after point-of-service (POS) deductible is met <sup>3</sup>  <b>All other beneficiaries:</b> \$17 or 20% of the total cost, whichever is greater, after annual deductible is met <sup>3</sup>		<b>TRICARE Prime options:</b> 50% copayment applies after POS deductible is met <sup>3</sup>  <b>All other beneficiaries:</b> \$44 or 20% of the total cost, whichever is greater, after annual deductible is met <sup>3</sup>

1. Not available to active duty service members without medical-necessity approval, in which case the copayment is \$0.
2. Not available without medical-necessity approval.
3. See Figure 5.3 for annual outpatient deductible amounts.

## Use TRICARE Pharmacy Home Delivery and Save

You can save money by using TRICARE Pharmacy Home Delivery. Figure 5.2 lists the cost differences when filling a 90-day supply of the same medication through a retail network pharmacy and home delivery.

**Note:** If you have other health insurance with a pharmacy benefit, you may not be eligible to use TRICARE Pharmacy Home Delivery. See “Coordinating Pharmacy Benefits with Other Health Insurance” in the *Claims* section of this handbook.

*Copayment Comparisons for 90-Day Prescription Supply*<sup>1</sup> *Figure 5.2*

Type of Drug	Retail Network Copayment	TRICARE Pharmacy Home Delivery Copayment	Your Savings
Formulary Generic	\$15	\$0	\$15
Formulary Brand Name	\$51	\$13	\$38
Non-Formulary	\$132	\$43	\$89

1. Chart does not include non-network retail pharmacy copayment information.

For information on how to make the most of your pharmacy benefit, visit [www.tricare.mil/pharmacy](http://www.tricare.mil/pharmacy) or call **1-877-363-1303**.

## Annual Outpatient Deductible

Beneficiaries not enrolled in a TRICARE Prime program option are required to meet an annual deductible each fiscal year (FY) (*October 1–September 30*) for outpatient services, including pharmacy services received at a non-network pharmacy, before cost-sharing begins. The annual deductible varies based on your beneficiary category and type of coverage (*individual or family*). Figure 5.3 lists annual deductible amounts. For more information, visit [www.tricare.mil/costs](http://www.tricare.mil/costs).

Annual Outpatient Deductibles

Figure 5.3

Beneficiary Category	Annual Outpatient Deductible	
	Per Individual	Per Family
<b>Active Duty Family Members and TRICARE Reserve Select® Members</b> <i>(sponsor rank E-4 and below)</i>	\$50	\$100
<b>All Others</b> <i>(non-TRICARE Prime)</i>	\$150	\$300
<b>TRICARE Prime® Beneficiaries Using the Point-of-Service (POS) Option<sup>1</sup></b>	\$300	\$600

1. The POS annual outpatient deductible applies to outpatient services received without a primary care manager referral and for prescriptions received at non-network pharmacies.

## Catastrophic Cap

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The catastrophic cap is the maximum out-of-pocket expense you will pay each FY for TRICARE-covered services including pharmacy services. You are not responsible for any amounts above the catastrophic cap in a given FY, except for services that are not covered under your benefit, TRICARE Prime point-of-service (POS) charges, and the additional 15 percent that nonparticipating providers may charge above the amount TRICARE pays (*the TRICARE-allowable charge*).

The catastrophic cap amount is based on your beneficiary category and is not affected by the program option you are using. Figure 5.4 lists catastrophic cap amounts.

**Note:** POS deductible and cost-share amounts do not apply to the enrollment/FY catastrophic cap.

For additional information about the catastrophic cap, visit [www.tricare.mil/catcap](http://www.tricare.mil/catcap).

*Catastrophic Cap Amounts*

*Figure 5.4*

<b>Beneficiary Category</b>	<b>Catastrophic Cap</b>
<b>Active Duty Family Members and TRICARE Reserve Select Members</b>	\$1,000 per family per fiscal year (FY)
<b>Retirees, Their Families, and All Others</b>	\$3,000 per family per FY

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# Claims

## Filing a Pharmacy Claim

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You do not need to file pharmacy claims if you have prescriptions filled at military treatment facility pharmacies, through TRICARE Pharmacy Home Delivery, or at a TRICARE retail network pharmacy. However, if you fill a prescription at a non-network pharmacy in the United States or U.S. territories (*American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands*), you must pay the full price of your prescription and file a claim for reimbursement. To file a claim:

- Download *TRICARE DoD/CHAMPUS Medical Claim—Patient’s Request for Medical Payment* (DD Form 2642) at [www.tricare.mil/claims](http://www.tricare.mil/claims).
- Complete the form and attach the required paperwork as described on the form.
- Mail the form and paperwork to:

Express Scripts, Inc.  
TRICARE Claims  
P.O. Box 52132  
Phoenix, AZ 85082

**Note:** Use this address only for reimbursement for prescriptions filled in the United States and U.S. territories. If filling prescriptions outside the United States and U.S. territories, file your claims with the TRICARE overseas claims processor. You must submit proof of payment with all overseas pharmacy claims. For details, see Figure 7.2 in the *For Information and Assistance* section of this handbook.

## If Your Claim Is Denied

Under certain circumstances, you may have the right to appeal decisions related to your benefits. If your claim is denied, call **1-877-363-1303** for instructions regarding your right to appeal. See “Appeals” later in this section for additional details.

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## Coordinating Pharmacy Benefits with Other Health Insurance

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### Other Health Insurance and TRICARE Pharmacy Home Delivery

You are not eligible to use TRICARE Pharmacy Home Delivery if you have other health insurance (OHI) with a prescription plan, including a Medicare Part D prescription program, unless you meet one of the following requirements:

- Your OHI does not include pharmacy benefits
- The medication you need is not covered by your OHI
- You have met your OHI's benefit cap (*i.e., you have met your benefit's maximum coverage limit*)

Once you have met one of these requirements, you may submit your prescription to TRICARE Pharmacy Home Delivery. Ask your provider to write a prescription for up to a 90-day supply and follow these instructions:

- Complete the *New Patient Mail Order Form*, available at [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE). Mail the form, your written prescription, and payment to:

Express Scripts, Inc.  
P.O. Box 52150  
Phoenix, AZ 85072-9954

- Payment may be made by credit card, check, or money order.  
**Note:** To ensure proper prescription fulfillment, follow all instructions on the form. Make sure to include the following information on the back of **each** prescription: patient's full name, date of birth, address, and sponsor's identification number.

**Note:** Pharmacy reimbursement for National Guard and Reserve members with line-of-duty care should contact the Military Medical Support Office at **1-888-647-6676**.

If your medication is not covered by your OHI (*i.e., declined for payment by your OHI*), or if you have met your benefit maximum, you will need to include proof from your OHI such as a copy of an

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explanation of benefits (EOB). This information **must** accompany your prescription for it to be filled by TRICARE Pharmacy Home Delivery.

If your OHI provides only medical coverage (*not pharmacy coverage*), you still may be eligible to use TRICARE Pharmacy Home Delivery as your prescription benefit. For more information, call Express Scripts, Inc. at **1-877-363-1303**.

## **Other Health Insurance and TRICARE Retail Network Pharmacies**

Having OHI does not prevent you from using TRICARE retail network pharmacies. If you have pharmacy benefits through your OHI, TRICARE becomes the second payer by law.

**Note:** Supplemental and discount prescription drug programs, such as Senior Friends and AARP, do **not** count as OHI pharmacy coverage.

## **Online Coordination of Benefits**

TRICARE beneficiaries who have OHI can take advantage of online coordination of benefits (COB). Tell your pharmacist you have TRICARE coverage in addition to your OHI when you have your prescription filled at your retail network pharmacy. Your pharmacist will submit your prescription online to both plans at the same time.

Advantages of having your COB claims processed online include:

- Minimal out-of-pocket expenses
- Never paying more than the TRICARE copayment
- No need to submit paper claims
- Reduced or eliminated up-front costs

TRICARE becomes the first payer when:

- The drug is not covered by your OHI, but is covered by TRICARE
- Coverage under your OHI is exhausted for the benefit year

If you are using a mail-order program available through your OHI, online COB is **not** an option.

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To be reimbursed for the eligible portion of your out-of-pocket expenses, follow the claims-filing guidelines listed under “Filing a Pharmacy Claim” earlier in this section. Billing statements showing only total charges, canceled checks, or cash register and similar type receipts are not acceptable as itemized statements unless the receipt provides the required detailed information noted previously. When filing a claim, include a copy of your OHI provider’s EOB, if one is available to you, in addition to your prescription receipts. Your claim may be returned for clarification if there is missing or incomplete information.

For more information about how TRICARE works with OHI, visit [www.tricare.mil/pharmacy/claims](http://www.tricare.mil/pharmacy/claims) or call **1-877-363-1303**.

## Appeals

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If you disagree with the determination on your claim (*e.g., if your claim is denied*), you or your appointed representative has the right to request a reconsideration. The request (*or appeal*) for reconsideration must be in writing, signed, and postmarked or received by Express Scripts, Inc. (Express Scripts) within 90 calendar days from the date of the decision, and must include a copy of the claim decision.

Your signed, written request must state the specific matter you disagree with and must be sent to the following address **no later than 90 days** from the date of the notice:

Express Scripts, Inc.  
P.O. Box 60903  
Phoenix, AZ 85082-0903

Additional documentation in support of the appeal may be submitted; however, because the request for reconsideration must be postmarked or received within 90 calendar days from the date of the decision, the request for reconsideration should not be delayed pending the acquisition of additional documentation. If additional documentation will be submitted at a later date, the letter requesting reconsideration must state that additional documentation will be submitted by a specified date. Upon receiving your request, all TRICARE claims related to the entire course of treatment will be reviewed.

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## **Reporting Fraud and Abuse**

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Fraud happens when a person or organization deliberately deceives others to gain an unauthorized benefit or compensation. Health care abuse may occur when providers supply services or products that are not medically necessary or that do not meet professional standards.

You are an important partner in the ongoing fight against fraud and abuse, and your most effective tool is your EOB. Since an EOB is a tangible statement of services and supplies received, it is one of the first lines of defense against health care fraud. You will receive a pharmacy EOB on a monthly basis anytime there has been pharmacy claims activity during the previous month. Alternatively, you may choose to receive your EOBs electronically by logging on to [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) or contacting Express Scripts at **1-877-363-1303** to request an electronic monthly EOB. We strongly encourage you to read your EOBs carefully.

Report pharmacy program fraud or abuse by calling **1-866-759-6139**.

For more information about medical fraud, visit the TRICARE Program Integrity Web site at [www.tricare.mil/fraud](http://www.tricare.mil/fraud).

# For Information and Assistance

## Pharmacy Resources

TRICARE has partnered with Express Scripts, Inc. (Express Scripts) to provide you with a world-class pharmacy benefit. To reach Express Scripts, refer to the contact details listed in Figure 7.1.

*Express Scripts Contact Information*

*Figure 7.1*

<p><b>TRICARE Pharmacy Home Delivery</b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Phone (TDD/TTY):</b> 1-877-540-6261</li> <li>• <b>Online:</b> <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li> <li>• <b>Fax (providers only):</b> 1-877-895-1900</li> <li>• <b>To register for TRICARE Pharmacy Home Delivery, send a completed <i>New Patient Mail Order Form</i> to:</b> Express Scripts, Inc. P.O. Box 52150 Phoenix, AZ 85072-9954</li> </ul>
<p><b>TRICARE Retail Network Pharmacy<sup>1</sup></b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Online:</b> <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li> <li>• <b>Send claims to:</b> Express Scripts, Inc. P.O. Box 52132 Phoenix, AZ 85082</li> </ul>
<p><b>Member Choice Center</b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1433</li> <li>• <b>Online:</b> <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li> </ul>
<p><b>Specialty Medication</b> <i>(to order specialty medications)</i></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Fax (providers only):</b> 1-877-895-1900 <i>(in the United States)</i> 1-602-586-3911 <i>(outside the United States)</i></li> <li>• <b>Mail:</b> Express Scripts, Inc. P.O. Box 52150 Phoenix, AZ 85072-9954</li> </ul>

1. TRICARE retail network pharmacies are available only in the United States and the U.S. territories of Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands. Currently, there are no TRICARE retail network pharmacies in American Samoa.

<p><b>General Correspondence</b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Online:</b> <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li> <li>• <b>Mail:</b> Express Scripts, Inc. P.O. Box 52150 Phoenix, AZ 85072</li> </ul>
<p><b>Filing Claims</b></p>	<ul style="list-style-type: none"> <li>• <b>Send claims to:</b> Express Scripts, Inc. P.O. Box 52132 Phoenix, AZ 85082</li> </ul>
<p><b>International Toll-Free Access</b></p>	<p>Dial the in-country access code listed below<sup>1</sup></p> <ul style="list-style-type: none"> <li>• <b>Italy:</b> 00+800-3631-3030</li> <li>• <b>Japan–IDC:</b> 0061+800-3631-3030</li> <li>• <b>Japan–Japan Telecom:</b> 0041+800-3631-3030</li> <li>• <b>Japan–KDD:</b> 010+800-3631-3030</li> <li>• <b>Japan–Other:</b> 0033+800-3631-3030</li> <li>• <b>South Korea:</b> 002+800-3631-3030</li> <li>• <b>Turkey:</b> 0811-288-0001 <i>(once prompted, input 877-363-1303)</i></li> <li>• <b>United Kingdom:</b> 00+800-3631-3030</li> </ul>
<p><b>Pharmacy Operations Center</b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-866-ASK-4PEC (1-866-275-4732) <i>(for specific in-country toll-free service, where established)</i></li> <li>• <b>Online:</b> <a href="http://www.pec.ha.osd.mil">www.pec.ha.osd.mil</a></li> </ul>
<p><b>Pharmacy Claim Filing Information</b></p>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Online:</b> <a href="http://www.tricare.mil/pharmacy/claims">www.tricare.mil/pharmacy/claims</a></li> </ul>

1. Beneficiaries residing overseas who are located in areas outside of these countries should call their point-of-contact number, which will provide access to the Express Scripts Contact Center.

Figure 7.2 lists additional pharmacy-related resources, so you can easily find the information you need. If you still have questions, contact Express Scripts (*see contact information in Figure 7.1*).

*Other Pharmacy Resources*

*Figure 7.2*

<b>U.S. Food and Drug Administration</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.fda.gov">www.fda.gov</a></li> </ul>
<b>Injectable and Over-the-Counter Medication Information</b>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303</li> <li>• <b>Online:</b> <a href="http://www.tricare.mil/pharmacy">www.tricare.mil/pharmacy</a></li> </ul>
<b>Medicare Part D</b> <i>(Medicare prescription coverage details)</i>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-800-MEDICARE (1-800-633-4227)</li> <li>• <b>Online:</b> <a href="http://www.medicare.gov">www.medicare.gov</a></li> </ul>
<b>TRICARE Pharmacy Home Delivery Registered Pharmacist Access</b>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-877-363-1303 <i>(24 hours a day, 7 days a week)</i></li> </ul>
<b>Pharmacy Locator</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></li> </ul>
<b>TRICARE Catastrophic Cap Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/catcap">www.tricare.mil/catcap</a></li> </ul>
<b>TRICARE Claims Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/claims">www.tricare.mil/claims</a></li> </ul>
<b>TRICARE Costs Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/costs">www.tricare.mil/costs</a></li> </ul>
<b>TRICARE Formulary Search Tool</b> <i>(online listing of covered drugs, quantity limits, and prior authorization details)</i>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/pharmacyformulary">www.tricare.mil/pharmacyformulary</a></li> </ul>

<p><b>TRICARE Pharmacy Web Site</b>  <i>(medication, prior authorization, quantity limits, and general benefit information)</i></p>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/pharmacy">www.tricare.mil/pharmacy</a></li> </ul>
<p><b>TRICARE Program Integrity</b>  <i>(report fraud and abuse)</i></p>	<ul style="list-style-type: none"> <li>• <b>Phone</b> <i>(in the United States)</i>: 1-866-759-6139</li> <li>• <b>Online</b>: <a href="http://www.tricare.mil/fraud">www.tricare.mil/fraud</a></li> <li>• <b>E-mail</b>: <a href="mailto:fraudline@tma.osd.mil">fraudline@tma.osd.mil</a></li> </ul>
<p><b>Overseas (all) Active Duty Claims Processing</b></p>	<p><b>TRICARE Overseas Program</b></p> <ul style="list-style-type: none"> <li>• <b>Mail:</b>  TRICARE Active Duty Claims  P.O. Box 7968  Madison, WI 53707-7968  USA</li> <li>• <b>Online</b>: <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a></li> </ul>
<p><b>Overseas Non-Active Duty Claims Processing</b></p>	<p><b>Eurasia-Africa (<i>non-active duty</i>)</b></p> <ul style="list-style-type: none"> <li>• <b>Mail:</b>  TRICARE Overseas Program  P.O. Box 8976  Madison, WI 53708-8976  USA</li> <li>• <b>Online</b>: <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a></li> </ul> <p><b>Latin America &amp; Canada (<i>non-active duty</i>)</b></p> <ul style="list-style-type: none"> <li>• <b>Mail:</b>  TRICARE Overseas Program  P.O. Box 7985  Madison, WI 53707-7985  USA</li> <li>• <b>Online</b>: <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a></li> </ul> <p><b>Pacific (<i>non-active duty</i>)</b></p> <ul style="list-style-type: none"> <li>• <b>Mail:</b>  TRICARE Overseas Program  P.O. Box 7985  Madison, WI 53707-7985  USA</li> <li>• <b>Online</b>: <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a></li> </ul>

## Additional Resources

Figure 7.3 lists resources that will provide you with TRICARE benefit details and help you maintain your eligibility.

*Benefit and Eligibility Resources*

*Figure 7.3*

<b>Defense Enrollment Eligibility Reporting System (DEERS)</b> <i>(update contact information)</i>	<ul style="list-style-type: none"> <li>• <b>Phone:</b> 1-800-538-9552, Monday–Friday, 6:00 a.m.–3:30 p.m. Pacific Time <i>(except holidays)</i></li> <li>• <b>Phone (TDD/TTY):</b> 1-866-363-2883</li> <li>• <b>milConnect Web site:</b>  <a href="http://milconnect.dmdc.mil">http://milconnect.dmdc.mil</a></li> </ul>
<b>Military Medical Support Office Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/mmso">www.tricare.mil/mmso</a></li> </ul>
<b>Identification Card-Issuing Facility Locator</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.dmdc.osd.mil/rsl">www.dmdc.osd.mil/rsl</a></li> </ul>
<b>TRICARE Service Center Locator</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil/contactus">www.tricare.mil/contactus</a></li> </ul>
<b>TRICARE Overseas Program Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a></li> </ul>
<b>TRICARE Web Site</b>	<ul style="list-style-type: none"> <li>• <a href="http://www.tricare.mil">www.tricare.mil</a></li> </ul>

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# Acronyms

ADFM	Active duty family member
ADSM	Active duty service member
COB	Coordination of benefits
DEERS	Defense Enrollment Eligibility Reporting System
DoD	Department of Defense
EOB	Explanation of benefits
FDA	U.S. Food and Drug Administration
HIPAA	Health Insurance Portability and Accountability Act of 1996
LOD	Line of duty
MTF	Military treatment facility
OHI	Other health insurance
POC	Point of contact
POS	Point of service
USFHP	US Family Health Plan

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# Glossary

## ***Catastrophic Cap***

The maximum out-of-pocket expenses TRICARE beneficiaries are responsible for in a given fiscal year (*October 1–September 30*). Point-of-service (POS) cost-shares and the POS deductible are not applied to the catastrophic cap.

## ***Deductible***

The annual amount a TRICARE Standard, TRICARE Extra, TRICARE Overseas Program Standard, or TRICARE Reserve Select beneficiary must pay for covered outpatient benefits, including pharmacy services received at non-network pharmacies, before TRICARE begins to share costs. TRICARE Prime beneficiaries do not have annual deductibles, unless they use the point-of-service option.

## ***Defense Enrollment Eligibility Reporting System (DEERS)***

A database of uniformed service members (*sponsors*), family members, and others worldwide who are entitled under law to military benefits including TRICARE. Beneficiaries are required to keep DEERS updated.

## ***Explanation of Benefits***

A statement sent to beneficiaries showing that claims were processed and the amount paid to providers. If denied, an explanation of denial is provided.

## ***Formulary***

Also known as a uniform formulary, this is a list of the covered generic and brand-name drugs. The formulary also contains a third tier of medications that are designated as non-formulary. Medications in the third, non-formulary tier, include any drug in a therapeutic class determined not as clinically effective or as cost-effective as other drugs in the same class.

## ***Fraud***

An instance when deliberate deceit is used by a provider to obtain payment for services not actually delivered or received, or by a beneficiary to claim program eligibility.

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### ***Military Treatment Facility***

A medical facility (*e.g., hospital, clinic*) owned and operated by the uniformed services and usually located on or near a military base.

### ***Other Health Insurance (OHI)***

Any non-TRICARE health insurance that is not considered a supplement. This insurance is acquired through an employer, entitlement program, or other source. TRICARE pays second after all other health plans except for Medicaid, TRICARE supplements, the Indian Health Service, or other programs or plans as identified by the TRICARE Management Activity.

### ***Point of Service (POS)***

The TRICARE Prime POS option allows TRICARE Prime enrollees, except active duty service members, to get nonemergency, TRICARE-covered services from any TRICARE-authorized provider without a primary care manager's referral or a regional contractor authorization. You will pay more when using the POS option. POS charges do not apply if you receive care under TRICARE Standard or TRICARE Extra.

### ***Prior Authorization***

A prior authorization is a process of reviewing certain medical, pharmacy, surgical, and behavioral health care services to ensure medical necessity and appropriateness of care before services are rendered or within 24 hours of an emergency admission.

### ***Protected Health Information (PHI)***

PHI is all individually identifiable health information that relates to a beneficiary's past, present, or future physical or mental health and related health care services. PHI may include demographics, documentation of symptoms, examination and test results, diagnoses, and treatments.

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For information about Patient Rights and Responsibilities, visit [www.tricare.mil/patientrights](http://www.tricare.mil/patientrights).

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TRICARE Pharmacy Home Delivery  
1-877-363-1303

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TRICARE Retail Network Pharmacies  
*(United States, Guam, the Northern Mariana  
Islands, Puerto Rico, and the U.S. Virgin Islands)*  
1-877-363-1303

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Express Scripts, Inc. Customer Service  
1-877-363-1303

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[www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE)

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