



TRICARE RESERVE SELECT 2020



HELPFUL TERMS

Premium

The amount you pay for a health care plan you purchased.

Premiums apply to those using TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult, and the Continued Health Care Benefit Program.

Yearly Deductible

A fixed amount you pay for covered services each calendar year before TRICARE pays anything.

Cost-Share

A percentage of the total cost of a covered health care service that you pay.

Copayment

The fixed amount those with TRICARE Prime (who aren't active ADSMs and ADFMs) or TRICARE Select pay for a covered health care service or drug.

Prior Authorization

A review of a requested health care service done by your regional contractor to see if the care will be covered by TRICARE. Check for services that need prior authorization by going to www.tricare.mil or your regional contractor's website.

Calendar Year

The TRICARE calendar year is Jan. 1–Dec. 31.

TRS may be purchased by qualified members of the Selected Reserve who are not in an activated status. This status includes qualified service members on inactive duty for training, yearly training, or on active duty for 30 days or less. Selected Reserve who are eligible for or enrolled in the Federal Employees Health Benefits (FEHB) Program do not qualify to purchase TRS. National Guard and Reserve members called or ordered to active duty for more than 30 days are covered as active duty and have different options.



TRICARE RESERVE SELECT®

Description	<ul style="list-style-type: none"> Premium-based health plan Coverage and costs for care similar to TRICARE Select for active duty family members (ADFMs)
Enrolling	<ul style="list-style-type: none"> Enroll at: 844-866-9378 Enrollment required Offers member-only and member-and-family coverage *Initial two-month premium payment due with enrollment request
Costs	<ul style="list-style-type: none"> Monthly premiums: <ul style="list-style-type: none"> ~ Sponsor Only: \$44.17 / *\$88.34 ~ Sponsor + Family: \$228.27 / \$456.54 Yearly Deductible: <ul style="list-style-type: none"> ~ E-4 and below: Individual \$52 Family \$104 ~ E-5 and above: Individual \$156 Family \$313 Co-payments and cost shares depending on your treatment choices. Catastrophic cap protection (limits your out-of-pocket expenses for covered services each year): \$1044/family
Getting Care	<ul style="list-style-type: none"> Get care from any TRICARE-authorized provider (network or non-network) Get care at a military hospital or clinic if space is available No referrals required Some services require prior authorization
Out of Pocket Costs	<p>Preventative Care: \$0</p> <p>Primary Care Outpatient Visit: Network \$15 Out-of-Network 20%</p> <p>Specialty Care Outpatient Visit: Network \$26 Out-of-Network 20%</p> <p>Urgent Care Center Visit: Network \$20 Out-of-Network 20%</p> <p>Emergency Room Visit: Network \$41 Out-of-Network 20%</p> <p>Inpatient Hospital Admission: Network \$62 per admission, Out-of-Network 20%</p>

KEEP YOUR DEERS INFORMATION UP TO DATE

Eligibility for TRICARE is determined by the services and shown in the Defense Enrollment Eligibility Reporting System (DEERS). DEERS is a database of service members and dependents worldwide who are eligible for military benefits.

To use **TRICARE**, first make sure your **DEERS** record is up to date at www.dmdc.osd.mil/milconnect.

DISCLAIMER: Information provided has been compiled from TRICARE Website. For most accurate information, Please contact TRICARE Directly (844-866-9378)

HEALTH BENEFITS CONTACT LIST

UTAH NATIONAL GUARD	Health Benefits Advisor Contractor SPS	801-432-4922	
	Mobilization Coordinator	801-432-4055	TAMP/Early Eligibility
		801-432-4317	
	DEERS	801-432-4566	
		801-432-4569	
	Line of Duty Assistance	801-432-4196	
	Family Assistance Center	801-432-4522	
	Military One Source	800-342-9647	
	http://www.militaryonesource.mil		
TRICARE MEDICAL PLANS	HEALTH NET	844-866-9378	
		https://tricare.mil/ www.tricare-west.com	
TRICARE DENTAL PROGRAM	United Concordia	844-653-4061	MDAY / Active Duty Family
		www.uccitdp.com	Active Duty Service Member
		https://tricare.mil/	
FEDVIP VISION COVERAGE	BENEFEDS	877-888-3337	
		www.tricare For questions regarding your enrollment or account	
TRICARE EXPRESS SCRIPTS	Pharmacy Home Delivery	877-363-1303	
		www.express-scripts.com	
		DOD.customer.relations@express-scripts.com	
		https://tricare.mil/	
HILL AIR FORCE BASE	Medical	800-453-2388	
	Dental	801-777-7011	
	Pharmacy	801-777-5463	
	Optometry Clinic	801-728-2600	
		www.hill.af.mil/75thmedicalgroup/	