

Exploring Tricare coverage, figuring out available resources, and navigating costs/fees can be overwhelming. Here is some general information to get you started. The information below is meant to provide a brief overview with many resources designed to point you in the right direction. A local POC is Eleonore.m.henley2.In@health.mil . She can be reached at 06371.9464.4840

Tricare Select Overseas

TRICARE Select Overseas is a self-managed, Preferred Provider Organization (PPO) style program that provides access to both network and non-network TRICARE authorized providers for medically necessary TRICARE covered services. You must enroll in TRICARE Select Overseas to receive coverage under this benefit option.

With TRICARE Select Overseas, beneficiaries manage their own health care and may generally seek care from any provider without a referral.

TRICARE Select Overseas is an option for eligible non-ADSMs living overseas. TRICARE Select Overseas Choose “Beneficiary Web Enrollment (BWE)” from the menu.

- Pick the plan that you’re eligible for.

Please note that while BWE supports new TRICARE plan enrollments, including enrolling in TRICARE Select, it doesn’t support changing your TRICARE plan’s recurring payment arrangements. For more information on TRICARE Select enrollment and its fees,

What is the TRICARE works like the stateside TRICARE Select program with similar benefits, requirements and costs.

Other plans that work like TRICARE Select Overseas are also available: TRICARE Reserve Select (TRS) and TRICARE Retired Reserve (TRR).

[LEARN MORE \(TRICARE Select Overseas for ADFMs\)](#)

[LEARN MORE \(TRICARE Select Overseas for Retirees\)](#)

How do I enroll in a TOP plan online through Beneficiary Web Enrollment (BWE)?

To enroll in a TRICARE Overseas Program (TOP) plan online through [Beneficiary Web Enrollment \(BWE\)](#), follow the steps below:

- Log in to milConnect here: <https://milconnect.dmdc.osd.mil/>.
- Click on the “Benefits” tab.

Open Season? Can I make enrollment changes outside of the TRICARE Open Season?

The TRICARE Open Season is an annual period when you can enroll in, change, or disenroll from a TRICARE health plan.

Each year, the TRICARE Open Season runs from the Monday of the second full week in November through the Monday of the second full week in December. Any changes you make during the Open Season go into effect January 1st of the following year. If you're happy with your current TRICARE health care plan, you don't need to take any action during the TRICARE Open Season. You'll be automatically re-enrolled each year.

If you didn't enroll or make changes to your TRICARE health plan during Open Season, you must wait until the next Open Season unless you have a TRICARE [Qualifying Life Event](#) (QLE). A QLE is a certain change in your life, such as a [move](#), [marriage](#), [birth of a child](#), or [retirement from active duty](#). This means TRICARE health plan options for you and your family may change. A QLE for one family member creates a chance for all eligible family members to change their TRICARE health plan. If you want to enroll in or change your plan, you must do so within 90 calendar days of the date of the QLE. Your coverage starts the date of the QLE and continues until you lose eligibility or disenroll.

For additional information on QLEs, visit tricare.mil/lifeevents. For additional information on TRICARE Open Season, visit tricare.mil/openseason.

**Note: The TRICARE Open Season isn't the same as the [FEDVIP Open Season](#). The TRICARE Open Season is for TRICARE health plans. The FEDVIP Open Season is for FEDVIP dental and vision plans.*

How can I find an International SOS network provider overseas?

The [Provider Search tool](#) on tricare-overseas.com does more than just help you find health care providers in your area. When you search for a provider by location, the tool gives you a list of TRICARE-authorized providers plus other information, such as:

- Provider gender
- Specialties
- Contact information, including websites for individual and institutional providers
- Languages spoken
- Service limitations, if any
- Driving directions to provider locations (through Google Maps)

Search results also include country-specific medical risk ratings (low, medium, high or very high). These ratings assign a level of health risk based on your location. Ratings include availability of care, diseases present in the area and infrastructure. The risk rating callout box

also has a button for viewing detailed information. Knowing your location's medical risk rating can help you prepare in advance to make sure you stay healthy overseas.

Go to tricare-overseas.com and click on "Beneficiaries", then "Resources" and "Find a Provider" to find all the provider information you need. International SOS is available to assist 24/7/365. [Contact](#) your TOP Regional Call Center and listen carefully to the prompts for the best option to serve you.

Can I submit my claims online?

Yes! Please visit tricare-overseas.com and click on the "Beneficiaries" section, then "Claims" and finally the "Portal Tutorials" page to download useful instructional guides and video tutorials on how to register, log in and submit claims using the secure claims portal for beneficiaries.

You can register for the secure claims portal using your DoD Self-Service Logon (DS Logon). This is the recommended method. Or, you can register directly with the TOP Claims Processor, who will issue a unique user name and password to enter the system. For more information, visit: <http://www.tricare-overseas.com/beneficiaries/claims/claims-portal-register> or contact your TOP Regional Call Center and listen carefully to the prompts for the best option to serve you.

What are my Pharmacy options for filling prescriptions?

TRICARE offers you comprehensive prescription drug coverage and several options for filling prescriptions. You may fill prescriptions at military pharmacies, through TRICARE Pharmacy Home Delivery, at local, retail network pharmacies or at overseas pharmacies.

Overseas pharmacies are non-network; therefore, you will pay the full cost up front and file a claim for reimbursement with International SOS. For more information on filing claims, visit www.tricare-overseas.com/beneficiaries/claims.

You need a prescription and a valid uniformed services identification card or Common Access Card to fill prescriptions in all overseas locations, including the U.S. territories. For information about the TRICARE pharmacy benefit, visit www.tricare.mil/pharmacy. You can use the formulary search tool at www.esrx.com/tform to find cost and coverage details for medications filled in the U.S. Visit www.tricare.mil/costs for other cost information.

For more information on your Pharmacy options for filling prescriptions, [click here](#).

Where can I find the latest TRICARE Briefings?

For the latest TRICARE Briefings, visit health.mil/TRICAREbriefings

On this page, you will find useful briefing slides on topics such as the TRICARE Overseas Program (TOP), TRICARE Health Plans, TRICARE Costs, and more.

TRICARE FOR LIFE

Download the [TOP Enrollment Welcome Letter](#), which includes TRICARE Health Plan-specific information about how to obtain local medical care, Other Health Insurance (OHI), referrals and authorizations, enrollment fees (if applicable), and more.

TRICARE For Life (TFL) is Medicare wraparound coverage available worldwide to TRICARE beneficiaries who have Medicare Part A and Part B, regardless of age or place of residence.

Who Qualifies for TRICARE For Life?

If the sponsor is retired and you are entitled to premium-free Medicare Part A on your record or your spouse's record, you must have Medicare Part B to remain TRICARE-eligible.

This rule applies to all TRICARE beneficiaries even though Medicare generally does not cover health care obtained outside the United States and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands).

Note: Medicare may pay for services you receive aboard a ship in the territorial waters adjoining the land areas of the United States and U.S. territories. In these locations, TFL works exactly as it does in the United States.

How Does TRICARE For Life Work Overseas?

Medicare provides coverage in the U.S. and U.S. Territories. Medicare doesn't provide coverage in any other overseas locations.

When using TRICARE For Life in all other overseas locations, whether you live overseas or are traveling overseas, TRICARE is the primary payer and you're responsible for paying TRICARE's annual deductible and cost shares. For more information, visit tricare.mil/costs.

If you live overseas, you must have Medicare Part B to remain eligible for TRICARE even though Medicare does not provide coverage overseas.

With TRICARE For Life, you manage your own health care and may generally seek care from any [overseas civilian provider](#) without a referral. However, certain services, including nonemergency inpatient admissions for substance use disorders and mental health care, require prior authorization. [Click here](#) for more information.

You are responsible for paying an annual deductible and copayments each calendar year. You should expect to pay up front for care and submit a claim to the TOP Claims processor for reimbursement.

Note: Outside the U.S. and U.S. territories, nonparticipating non-network providers can charge any amount for care. You're responsible for paying any amount that is above the TRICARE-allowable charge in addition to your deductible and cost-shares.

[What Do You Have to Pay For TRICARE For Life?](#)

With TRICARE For Life, you may seek care from any TRICARE-authorized provider in the United States and U.S. territories, though your provider's Medicare status will affect your out-of-pocket costs. Overseas, you may seek care from any Purchased Care Sector Provider unless local restrictions apply (*such as in the Philippines*). You may need prior authorization for certain services. [Click here](#) or contact your [TOP Regional Call Center](#) for more information.

[How Do You Enroll?](#)

There is no enrollment form and no annual fee for TFL. You are automatically covered if you are entitled to Medicare Part A, have Medicare Part B, and your contact information is up to date in DEERS.

- Medicare is your primary payer and TRICARE is the last payer—minimizing your out-of-pocket expenses when you use TFL in the United States or U.S. territories.
- Outside the United States and U.S. territories and for TRICARE-covered services not covered by Medicare, TRICARE becomes the primary payer and the TRICARE deductible, cost-shares, and prior authorization rules apply.

[TRICARE For Life Handbook](#)

The [TRICARE For Life Handbook](#) provides an overview of the TFL program—Medicare-wraparound coverage for beneficiaries who are eligible for both TRICARE and Medicare. The handbook describes how TFL works, getting care, TFL coverage, pharmacy coverage, dental coverage, claims and keeping DEERS information up to date during life changes. Contact information is also included.

For more information about TRICARE For Life, visit <https://tricare.mil/Plans/HealthPlans/TFL>.

