



Other Health Insurance under TAMP

If you have or resume other health insurance upon separation, TRICARE will always be second payer to your other health insurance. For health care expenses, submit a TRICARE claim form, a copy of your itemized bill, and an explanation of benefits from your other insurance carrier to TRICARE to receive possible payment for TRICARE covered services.

You can obtain TRICARE claim forms by calling or visiting a local TRICARE Service Center or the regional contractor, or you may download a claim form from the TRICARE Web site at <http://www.tricare.osd.mil/claims/default.htm>.

Dental Coverage during TAMP Period

Selected Reserve and Individual Ready Reserve members and/or their family member(s) may be eligible for dental coverage under the TRICARE Dental Plan (TDP), which is a voluntary dental insurance program. To determine eligibility for yourself and your family, you may contact the TDP Administrator, United Concordia Companies, Inc. (UCCI), at 1-800-866-8499. The TDP requires a **minimum 12-month enrollment period**; however, that commitment is waived for families of reservists called to active duty for certain contingency operations when the family member(s) enrolled within 30 days of the sponsor's activation date. If your family qualifies for the 12-month contingency enrollment waiver, you must submit the TDP Enrollment/Change form to UCCI by the 20th of the month following deactivation so you will not be charged a much higher premium rate. If you did not enroll your family in time to qualify for the waiver, or you and your family have never been enrolled in the TDP, you will be required to stay enrolled for 12 months, and you will be charged the higher premium rate (100 percent) for the 12 months. Information on the TDP and premium rates can be found at www.ucci.com.

Continued Health Care Benefit Program after TAMP

Once you lose TRICARE eligibility under TAMP, you may apply for temporary, transitional medical coverage under the Continued Health Care Benefit Program (CHCBP). CHCBP is a premium-based health care program and is similar to, but not part of, TRICARE. You and eligible family members must enroll in CHCBP within 60 days after loss of TAMP eligibility. Premiums for this coverage are \$933 per quarter for individuals and \$1,996 per quarter for families. Contact CHCBP at 1-800-444-5445 or www.tricare.osd.mil/chcbp/default.cfm.

What if I'm Still in Terminal Leave Status?

Service members are not eligible for TAMP while on terminal leave. While on terminal leave, your family remains covered under TRICARE Standard, TRICARE Extra, or TRICARE Prime, TPR/TPRADFM. If you need care during leave, contact a regional Health Care Finder from the TRICARE region where you are enrolled or mobilized to obtain an authorization for care.



Transitional Health Care Benefits



Defense Enrollment Eligibility Reporting System	
	800-538-9552• www.tricare.osd.mil/deers
Region 1	Sierra Military Health Services, Inc. 888-999-5195• www.sierramilitary.com
Region 2	Humana Military Healthcare Services 800-931-9501• www.humanamilitary.com
Region 3/4	Humana Military Healthcare Services 800-444-5445• www.humanamilitary.com
Region 5	Humana Military Healthcare Services 800-941-4501• www.humanamilitary.com
Region 6	Health Net Federal Services 800-406-2832• www.hnfs.net
Region 7/8 (Central)	TriWest Healthcare Alliance 888-874-9378• www.triwest.com
Region 9/10	Health Net Federal Services 800-242-6788• www.hnfs.net
Region 11	Health Net Federal Services 800-404-2042• www.hnfs.net
Region 12	Health Net Federal Services 800-242-6788• www.hnfs.net
TRICARE Information Center (TIC) 888-DOD-LIFE (363-5433)• www.tricare.osd.mil	
United Concordia, Inc. (Dental Plan) 800-866-8499• www.ucci.com	
Continued Health Care Benefit Program (CHCBP) 800-444-5445• www.tricare.osd.mil/chcbp/default.cfm	

Transitional Health Care Benefits

If you are a service member who is eligible under one of the four categories below, you and your family may be covered for health care benefits under the Transitional Assistance Management Program (TAMP). Please refer to the list on the back of this brochure for information and assistance with TAMP. Call the TRICARE Information Center if you do not know what region you are in.

Eligibility

You and your eligible family members are covered under TAMP if you as the sponsor are

- (1) involuntarily separated from active duty
- (2) a Reserve Component member separating from an active duty period of more than 30 days in support of a contingency operation
- (3) separating from active duty following involuntary retention (Stop-Loss) in support of a contingency operation
- (4) separating from active duty following voluntary agreement to stay on active duty for a period of less than one year in support of a contingency mission

Those eligible for benefits under other existing Demonstration Projects retain those benefits during their TAMP eligibility as long as the Demonstration is active. For Demonstration Project eligibility information, contact the Defense Enrollment Eligibility Reporting System (DEERS); for benefit information, contact your region's toll-free number.

What Does TAMP Coverage Provide?

TAMP provides health care coverage as you transition back to civilian life. Your **accrued total active Federal military service** time determines how long you and your eligible family members are covered by TAMP health care benefits:

- Fewer than 6 years of service — eligible for 60 days of TAMP benefits
- Six years or more — eligible for 120 days of TAMP benefits

TAMP coverage begins on your separation date. Check block **12.d** of your **DD Form 214** to calculate your accrued total active Federal military service time.

Under TAMP, you and your eligible family members may use

- TRICARE Standard: the fee-for-service type option, with an annual deductible and cost shares
- TRICARE Extra: a preferred provider network type option that uses TRICARE Prime contracted providers and has an annual deductible and cost shares
- TRICARE Prime: a managed care type option that **requires enrollment** with minimal out-of-pocket expenses (does **not** include TRICARE Prime Remote (TPR))

Contact the regional contractor's toll-free number to determine what programs and providers are in your area or if you want additional information about any TRICARE Program.

What Do I Need to Do?

To use TAMP, you must first ensure that your and your family's DEERS eligibility statuses are correct. Contact or visit your Reserve center, unit personnel office, or a base/installation ID card center. To locate the nearest facility, check the DEERS Web site at www.dmdc.osd.mil/rs1, or call DEERS.

Some ID card issuing facilities, particularly those in Reserve centers, require an appointment in advance, so be sure to call ahead.

If your DEERS information is correct, you and your family members may immediately enjoy health care coverage under TRICARE Standard and TRICARE Extra. If you wish to enroll yourself or your family members in TRICARE Prime or continue TRICARE Prime coverage from your active duty status, read the next section for details.

TRICARE Prime/TRICARE Prime Remote under TAMP

If you live near a military treatment facility (MTF) or in a TRICARE Prime network area, you and your family

may enroll in TRICARE Prime. Check with the MTF for TRICARE Prime enrollment details.

If you or your family is currently enrolled in TRICARE Prime or TRICARE Prime Remote/TRICARE Prime Remote for Active Duty Family Members (TPR/TPRADFM), that enrollment becomes invalid upon your separation from active duty.

For TRICARE Prime

-**To keep TRICARE Prime**, all TRICARE Prime enrollees (you and your family members) must complete a new enrollment form and send it to the regional contractor, preferably before you separate.

-**To enroll in TRICARE Prime** during TAMP, complete an enrollment form and send it to the regional contractor. Enrollment will be retroactive to your service separation date.

If you do not reenroll in TRICARE Prime, all claims will process as TRICARE Standard or TRICARE Extra, as appropriate.

For TPR/TPRADFM

You and your family are not eligible for TPR/TPRADFM health care under TAMP and must select one of the other TRICARE options during this transitional period.

You should contact your unit or Service for eligibility determinations/authorizations for any follow-up medical and dental care for injuries, illnesses, or diseases incurred while on active duty. For eligibility information on Department of Veterans Affairs (VA) benefits following separation from active duty, Reserve Component members may contact the nearest VA hospital or visit the VA's Web site at www.va.gov.

TAMP Claims

Normal TRICARE claims processing procedures apply. Claims denied for loss of eligibility will be denied until you update your eligibility information in DEERS. If you submit a claim that is denied due to eligibility, contact your regional contractor.