

Transitional Assistance Management Program

Transitional health care for certain active duty service members and their families

The Transitional Assistance Management Program (TAMP) provides 180 days of transitional health care benefits to help certain service members and their families transition to civilian life. You and your eligible family members may be covered for health care benefits under TAMP if you are:

- Involuntarily separating from active duty under honorable conditions
- A National Guard or Reserve member separating from a period of active duty that was more than 30 consecutive days in support of a contingency operation
- Separating from active duty following involuntary retention (*stop-loss*) in support of a contingency operation
- Separating from active duty following a voluntary agreement to stay on active duty for less than one year in support of a contingency operation
- Separating from active duty with an agreement to become a member of the Selected Reserve of the Ready Reserve
- Separating from active duty due to a sole survivorship discharge

You are not eligible for TAMP while on terminal leave, permissive temporary duty (PTDY), or authorized excess leave. During leave and PTDY, you continue to receive active duty service member coverage from your last duty station, even if you relocate. If you and your eligible family members stay in the same location during leave and PTDY, your family members may remain covered under TRICARE Prime or TRICARE Prime Remote for Active Duty Family Members (TPRADFM).

COVERAGE

If you qualify, the 180-day TAMP period begins the day after your date of separation from active duty (*service members on leave continue to receive active duty benefits for themselves and their families until their leave ends*). When you become eligible for TAMP, you and your family members will be automatically covered under TRICARE Standard and TRICARE Extra or TRICARE Overseas Program (TOP) Standard (*if overseas*). You may choose to enroll in a TRICARE Prime option (*where available*), including the US Family Health Plan (USFHP), offered in six designated service areas of the United States. For more information on USFHP, including eligibility, visit www.tricare.mil/usfhp.

During TAMP, you and your family members are covered under the medical benefit as active duty family members, and all rules for that beneficiary category apply including any deductibles, cost-shares, and copayments. For program cost information, visit <u>www.tricare.mil/costs</u>.

Note: To ensure continuity of coverage during the TAMP period, it is essential that you keep information in the Defense Enrollment Eligibility Reporting System (DEERS) current for you and your family members. See the *For Information and Assistance* section of this fact sheet for DEERS contact information.

ENROLLMENT IN A TRICARE® PRIME OPTION

During TAMP, you may enroll or reenroll in a TRICARE Prime option (*where available*), including USFHP, or TOP Prime (*where available overseas*). The following conditions apply:

• If you or your family members were enrolled in TRICARE Prime or TOP Prime immediately prior to your separation from active duty, you may continue your enrollment with no break in coverage as long as you complete a new *TRICARE Prime Enrollment, Disenrollment, and Primary Care Manager (PCM) Change Form* (DD Form 2876) and submit it to your regional contractor or TOP Regional Call Center before the TAMP period ends. The effective date will be the date you separated from active duty.

- If your family members were not enrolled in TRICARE Prime or TOP Prime when you separated from active duty and would like to enroll, you must complete *DD Form 2876* and submit it to your regional contractor or TOP Regional Call Center.
- For new enrollments in TRICARE Prime, stateside enrollment is subject to the 20th-of-the-month rule. Applications received by your regional contractor by the 20th of the month will become effective at the beginning of the following month (*e.g., an enrollment received by December 20 would become effective January 1*). If your application is received after the 20th of the month, your coverage will become effective on the first day of the month following the next month (*e.g., an enrollment received on December 27 would become effective on February 1*). TOP Prime enrollment is effective when the enrollment application is received.
- There is no TRICARE Prime enrollment fee under TAMP.
- TRICARE Prime Remote, TPRADFM, and TOP Prime Remote are not available during TAMP. If you were enrolled in one of these programs, you will be disenrolled and covered by TRICARE Standard and TRICARE Extra (*in the United States*) or TOP Standard (*overseas*). You may choose to enroll in other TRICARE Prime options (*where available*).

TRANSITIONAL CARE FOR SERVICE-RELATED CONDITIONS

If you are eligible for care under TAMP and have a newly diagnosed medical condition that is related to your active duty service, you may qualify for the Transitional Care for Service-Related Conditions (TCSRC) program, which provides 180 days of care for your condition with no out-of-pocket costs. If you believe you may qualify for TCSRC, visit <u>www.tricare.mil/tcsrc</u> for instructions on how to apply.

DENTAL COVERAGE DURING TAMP

During TAMP, service members may receive dental care from military dental treatment facilities or, if necessary, from civilian providers through the Active Duty Dental Program. Family members may qualify to purchase coverage under the TRICARE Dental Program (TDP) at the National Guard and Reserve family member rate. For more information, visit <u>www.tricare.mil/dental</u>. For cost information, visit <u>www.tricare.mil/costs</u>.

Note: There is a 12-month minimum-enrollment commitment for new TDP enrollees.

PURCHASING TRICARE RESERVE SELECT® AND TRICARE RETIRED RESERVE®

If you are a member of the Selected Reserve of the Ready Reserve or the Retired Reserve, you may qualify to purchase TRICARE Reserve Select (TRS) or TRICARE Retired Reserve (TRR) to begin after your TAMP coverage ends. TRS and TRR are premium-based health plans. To avoid a break in coverage, log on to the Reserve Component Purchased TRICARE Application at www.dmdc.osd.mil/appj/reservetricare to access and submit your Reserve Component Health Coverage Request form (DD Form 2896-1) and required initial premium payment up to 60 days before, but no later than 30 days after, your TAMP coverage ends. Two months of premium payments are required when initially purchasing TRS or TRR. The first payment may be made with a personal check, cashier's check, money order, or credit/debit card (i.e., Visa/MasterCard). After the initial payment, all monthly premium payments must be made by either automated electronic funds transfer (EFT) or automated credit/debit card (i.e., Visa/MasterCard) payment. For more information on purchasing TRS or TRR, monthly premium payments, out-of-pocket costs, and other program information, visit www.tricare.mil/trs or www.tricare.mil/trr or contact your regional contractor.

PURCHASING THE CONTINUED HEALTH CARE BENEFIT PROGRAM

If you do not qualify to purchase TRS or TRR after TAMP coverage ends, you may qualify to purchase temporary transitional health care coverage (*18–36 months*) under the Continued Health Care Benefit Program (CHCBP), which is administered by Humana Military. For more information, visit <u>www.tricare.mil/chcbp</u> or call Humana Military at **1-800-444-5445**.

PURCHASING TRICARE YOUNG ADULT

While you are eligible for TAMP, your adult children may qualify to purchase coverage under TRICARE Young Adult (TYA). TYA is a premium-based health care plan available for purchase by qualified dependents until reaching age 26. TYA offers TRICARE Prime and TRICARE Standard coverage worldwide. It includes medical and pharmacy benefits, but excludes dental coverage. Your status after the TAMP period ends will determine your child's TYA program eligibility and whether he or she will be able to continue TYA enrollment. Visit www.tricare.mil/tya for more information.

FOR INFORMATION AND ASSISTANCE

TRICARE North Region Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) www.hnfs.com	S TRICARE South Region Humana Military, a division of Humana Government Business 1-800-444-5445 Humana-Military.com	W TRICARE West Region UnitedHealthcare Military & Veterans 1-877-988-WEST (1-877-988-9378) www.uhcmilitarywest.com
TRICARE Overseas Program (TOP) Regional Call Center—Eurasia-Africa¹ +44-20-8762-8384 (overseas) 1-877-678-1207 (stateside) tricarelon@internationalsos.com	TOP Regional Call Center—Latin America and Canada ¹ +1-215-942-8393 (overseas) 1-877-451-8659 (stateside) tricarephl@internationalsos.com	TOP Regional Call Centers—Pacific1Singapore:+65-6339-2676 (overseas)1-877-678-1208 (stateside)sin.tricare@internationalsos.comSydney:+61-2-9273-2710 (overseas)1-877-678-1209 (stateside)sydtricare@internationalsos.com
TRICARE Reserve Select www.tricare.mil/trs TRICARE Retired Reserve www.tricare.mil/trr	TRICARE Young Adult www.tricare.mil/tya	TRICARE Active Duty Dental Program and TRICARE Dental Program www.tricare.mil/dental
milConnect Web Site—Update DEERS Information http://milconnect.dmdc.mil	US Family Health Plan www.tricare.mil/usfhp	Continued Health Care Benefit Program www.tricare.mil/chcbp

1. For toll-free contact information, visit <u>www.tricare-overseas.com</u>.

An Important Note About TRICARE Program Information

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. **Military hospital and clinic guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact your TRICARE regional contractor or local military hospital or clinic. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.