

TRICARE® MATERNITY CARE



If you are pregnant, your care and costs before, during, and after childbirth are determined by your beneficiary status, how close you live to a military hospital or clinic that provides obstetric and gynecological services, and your choice of TRICARE program and provider.

MATERNITY CARE COVERAGE

TRICARE covers the following maternity care services if medically necessary:

- Obstetric visits throughout your pregnancy
- Fetal ultrasounds
- Hospitalization for labor, delivery, and postpartum care
- Anesthesia for pain management during labor and delivery
- Cesarean sections
- Management of high-risk or complicated pregnancies
- Deliveries at TRICARE-certified/authorized birthing centers (Stateside only)
- Breast pumps, breast pump supplies, and breast-feeding counseling

For more information on covered services, go to www.tricare.mil/coveredservices.

COSTS

Active duty service members (ADSMs) and active duty family members (ADFMs) have no costs for maternity care under any TRICARE Prime option. Others (including those enrolled in TRICARE Select, TRICARE Reserve Select (TRS), TRICARE Retired Reserve (TRR), TRICARE Young Adult (TYA) Select, the Continued Health Care Benefit Program (CHCBP), and retirees, their family members and all others) have copayments and/or cost-shares. For detailed cost information, go to www.tricare.mil/costs.

Except for ADSMs, beneficiaries with a TRICARE Prime option may use the point-of-service (POS) option to self-refer to an obstetrician, but will pay higher out-of-pocket costs. For more information about the POS option, go to www.tricare.mil/pointofservice.



GETTING MATERNITY CARE

Your guidelines for getting care vary based on your TRICARE program option and whether you live stateside or overseas. Maternity care services may require referrals and/or prior authorizations.

BENEFICIARY TYPE	GUIDELINES
TRICARE Prime	If your primary care manager (PCM) is at a military hospital or clinic, you should get maternity care at the military hospital or clinic. If maternity care is unavailable at your military hospital or clinic, your PCM will refer you to a civilian network provider. If you have a civilian PCM, your PCM will direct your maternity care or give you a referral to an obstetrician.
TRICARE Prime Remote (TPR)	If you have TPR with an assigned PCM, your PCM will direct your care. Otherwise, you may visit a TRICARE-authorized civilian provider with prior authorization from your regional contractor.
TRICARE Select, TRICARE Reserve Select (TRS), TRICARE Retired Reserve (TRR), and Continued Health Care Benefit Program (CHCBP)	You may get care from any TRICARE-authorized provider without a referral. Visits to a network provider will cost you less out of pocket, and the provider will file claims for you. With a non-network provider, you may pay more out of pocket and have to file your own claims. Non-network providers may charge up to 15 percent above the TRICARE-allowable charge, and you are responsible for that amount in addition to any deductible or cost-shares.
TRICARE Overseas Program (TOP) Prime and TOP Prime Remote	You should get maternity care from a military hospital or clinic if your PCM is located there. If you aren't located near a military hospital or clinic, or care there is unavailable, your PCM will give you a referral to a TRICARE-authorized civilian provider in your overseas area. If you have TOP Prime Remote, your TOP Regional Call Center will help you coordinate care.
TOP Select and Overseas TRS, TRR, and CHCBP	<p>You may seek care from almost any TRICARE-authorized civilian provider without a referral. Overseas providers aren't required to bill TRICARE on your behalf. You should expect to pay up front for care and submit a claim with proof of payment to get money back. Outside the U.S. and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands), there may be no limit to the amount that nonparticipating non-network providers may bill, and you are responsible for paying any amount that exceeds the TRICARE-allowable charge in addition to your deductible, cost-shares, and copayments. For more information, visit www.tricare.mil/overseas.</p> <p>Note: Under TOP Select, you may receive care from any host nation provider without a referral. If you live or travel in the Philippines, you are required to see a certified provider for care. Additionally, TOP Select beneficiaries who reside in the Philippines and who seek care within designated Philippine locations are encouraged to see a TRICARE-preferred provider. Out-of-pocket costs are lower when using a preferred provider. For more information, visit www.tricare-overseas.com/philippines.htm.</p>
TRICARE Young Adult (TYA)	Young adults who have purchased coverage under TYA follow the rules (including costs and provider choices) of the plan they have—either TYA Prime or TYA Select.
TRICARE Dental Program	During pregnancy, a third cleaning is covered in a 12-month period.

NEWBORN AND ADOPTED CHILD COVERAGE

All newborn and adopted children must be registered in the Defense Enrollment Eligibility Reporting System (DEERS) within 90 days (120 days if overseas). To do this, the sponsor must go to a uniformed services ID card office and present the child's birth certificate, certificate of live birth from the hospital, record of adoption, or letter of placement of your child into your home by a recognized placement or adoption agency or the court.



If your child is registered in DEERS after the allotted time period, they will only be able to receive care if space is available at a military hospital or clinic.

The sponsor can only enroll the child in an eligible TRICARE plan after another Qualifying Life Event (QLE) or during the annual TRICARE Open Season. Newborn and adopted children of TRS or TRR members can't become qualified for coverage and enroll in TRS or TRR until registered in DEERS. Visit www.dmdc.osd.mil/rsl to find a uniformed services ID card office in your area.

TRICARE Prime® and TRICARE Select®

Once registered in DEERS, children of ADSMs will be automatically enrolled in a TRICARE plan based on where they live.

Note: For children of retirees, there is no automatic enrollment process. Children of retirees must first be registered in DEERS within 90 days (120 days if overseas), and then the family must contact their TRICARE contractor to enroll them in a desired TRICARE plan.

Stateside children of ADSMs are automatically enrolled in TRICARE Prime as long as:

- They are registered in DEERS
- They live in a stateside Prime Service Area (PSA). If they don't live in a PSA, the child will be automatically enrolled in TRICARE Select.

You may choose to change your child's coverage to another TRICARE plan or US Family Health Plan (USFHP), if eligible, within 90 days from the date entered in DEERS. After 90 days, you must wait until another QLE or TRICARE Open Season to enroll your child in a different TRICARE plan.

Overseas Enrollment

Once a newborn is registered in DEERS, your child will automatically be enrolled in TOP Select. You will have 90 days

from the date of DEERS registration to change or transfer your newborn's enrollment to TOP Prime or TOP Prime Remote (if eligible and command-sponsored). If you don't enroll within the 90-day period, your child will remain in TOP Select.

If the sponsor enrolls the newborn in TOP Prime or TOP Prime Remote, coverage is backdated to the date of birth and the family may ask the TOP contractor to reprocess any claims that either were denied or should be processed under TOP Prime or TOP Prime Remote.

TRICARE Reserve Select® and TRICARE Retired Reserve®

Your child will be covered by TRS or TRR if you purchased family coverage, registered him or her in DEERS, and enrolled him or her in TRS or TRR. Submit your child's enrollment form to your regional contractor within 90 days (120 days if overseas) of birth or adoption. For information about covering your child with TRS or TRR family coverage, visit www.tricare.mil/trs or www.tricare.mil/trr.

TRICARE Young Adult

Under TYA, newborn and newly adopted children aren't covered by TRICARE unless the child's other parent is a sponsor or the child is adopted by a sponsor. They will also not be able to receive care from a military hospital or clinic.

Continued Health Care Benefit Program

If your child is born or adopted under CHCBP coverage, you may not need to register him or her in DEERS. Contact the CHCBP contractor, Humana Military, to enroll your child in the CHCBP.

Note: CHCBP doesn't offer online or phone enrollment. Visit www.tricare.mil/chcbp for more information.

HOW TO ENROLL OR CHANGE ENROLLMENT

To enroll your child online, by phone, or by mail:

- Go to the Beneficiary Web Enrollment (BWE) website at www.dmdc.osd.mil/appj/bwe (Stateside only).
- Call your regional contractor or USFHP customer service representative. Overseas, call your Global TRICARE Service Center.
- Mail your enrollment form. Find forms online at www.tricare.mil/forms.

IF YOU TAKE AN EXTENDED TRIP

If you have TRICARE Prime and plan to travel for more than 30 days, you may keep your current TRICARE Prime enrollment or transfer your enrollment if TRICARE Prime is available in your new location. If you keep your TRICARE Prime enrollment in your original enrolled location, you need to coordinate with your PCM to get referrals for non-emergency health care services you get in the location you are visiting. To transfer your enrollment, contact your regional contractor.

Overseas, different rules apply. Contact your TOP Regional Call Center for guidance.

If you are using TRICARE Select or TOP Select, you may get care from any TRICARE-authorized provider (unless local country restrictions apply) in your new location without a referral.

IF YOU LOSE TRICARE ELIGIBILITY

You may lose TRICARE eligibility, including maternity coverage, for various reasons related to life events and sponsor status changes. Depending on the reason for losing eligibility, you may qualify for continued coverage under the Transitional Assistance Management Program, TYA, or CHCBP. TYA and CHCBP require premium payments. If you are an ADSM who is pregnant at the time of release from active duty, you may also work with your service (unit personnel and military hospital or clinic administrative channels) to determine if you are eligible for ongoing care at a military hospital or clinic.

Visit www.tricare.mil/maternitycare for more information.

LOOKING FOR **More Information?**

GO TO www.tricare.mil/contact-us

This brochure is **not** all-inclusive. For additional information, please go to www.tricare.mil.

E

TRICARE East Region

Humana Military
1-800-444-5445
HumanaMilitary.com
www.tricare-east.com

O

TRICARE Overseas Program (TOP)

International SOS
Government Services, Inc.
www.tricare-overseas.com
For toll-free contact information, visit
www.tricare-overseas.com/contact-us

Defense Enrollment Eligibility Reporting System (DEERS)

www.tricare.mil/deers

Transitional Assistance Management Program (TAMP)

www.tricare.mil/tamp

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.*

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TRICARE West Region

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TOP Regional Call Centers

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tricarelon@internationalsos.com

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tricareph@internationalsos.com

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+65-6339-2676 (overseas)
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+61-2-9273-2710 (overseas)
1-877-678-1209 (stateside)
sydticare@internationalsos.com

US Family Health Plan

1-800-74-USFHP (1-800-748-7347)
www.tricare.mil/usfhp

Continued Health Care Benefit Program

www.tricare.mil/chcbp