

	PRIME			PRIME REMOTE			STANDARD			EXTRA		
	ADSM	ADFM	RET	ADSM		RET	ADSM	ADFM	RET	ADSM	ADFM	RET
Enrollment Required	Yes	Yes	Yes	Yes	Yes	N/A	N/A	No	No	N/A	No	No
Enrollment Fee	No	No	Enrolled before 10/1/2011 for FY 2012: \$230 individual \$460 family Enrolled after 10/1/2011: \$260 individual \$520 per family	No	No	N/A	N/A	N/A	N/A	N/A	N/A	N/A
PCM Assigned	Yes	Yes	Yes	Yes, if network provider is available	Yes, if network provider is available	N/A	N/A	No	No	N/A	No	No
Copays	No	No, except when using the pharmacy benefit outside of an MTF	\$12/outpatient visit \$17/outpatient mental health group visit \$20/outpatient ambulance svc occurrence \$25/mental health individual visit \$30/emergency room visit	No	No, except when using pharmacy benefit outside of an MTF	N/A	N/A	No	No	N/A	No	No
Civilian Outpatient Cost Shares	No	No, unless using POS option, non-network pharmacy	No, unless using POS option, non-network pharmacy	No	No, unless using POS option, non-network pharmacy	N/A	N/A	20% of TRICARE allowable charge	25% of TRICARE allowable charge	N/A	15% of fee negotiated by regional contractor	20% of fee negotiated by regional contractor
Civilian Inpatient Costs	No	No, unless using POS	\$11 per day or \$25 per admission, whichever is greater; no charge for separately billed professional charges	No	No, unless using POS	N/A	N/A	Per diem or \$25 per admission, whichever is greater; no charge for separately billed professional charges	Per diem or 25% of the total charge, whichever is less, plus 25% of the TRICARE allowable charge for separately billed professional services	N/A	Per diem or \$25 per admission, whichever is greater; no charge for separately billed professional charges	\$250 per day or 25% of the total charge, whichever is less, plus 20% of the TRICARE allowable charge for separately billed professional services

	PRIME			PRIME REMOTE			STANDARD			EXTRA		
	ADSM	ADFM	RET	ADSM		RET	ADSM	ADFM	RET	ADSM	ADFM	RET
Mental Health Inpatient Costs	No, use direct care or prior authorization for civilian care	\$0 per admission	\$40 per day; no charge for separately billed professional charges	No, use direct care or prior authorization for civilian care	No, requires prior authorization	N/A	N/A	Per diem or \$25 per admission, whichever is greater	HVH: 25% hospital specific charges LVH: Lesser of \$202 per day or 25% of billed charges Partial Hospitalization: 25% of TRICARE allowable charge, plus 25% of TRICARE allowable charge for separately billed professional service	N/A	Per diem or \$25 per admission, whichever is greater	20% of total charge, plus 20% of the TRICARE allowable charge for separately billed professional services
Catastrophic Cap	No	\$1,000 per family per fiscal year	\$3,000 per family per fiscal year	No	\$1,000 per family per fiscal year	N/A	No	\$1,000 per family per fiscal year	\$3,000 per family per fiscal year	N/A	\$1,000 per family per fiscal year	\$3,000 per family per fiscal year
Deductibles	No	No, unless using non-network pharmacy, or POS option	No, unless using non-network pharmacy, or POS option	No	No, unless using non-network pharmacy, or POS option	N/A	N/A	E1-E4: \$50 individual \$100 family E5-Above: \$150 individual \$300 family	\$150 individual \$300 family	N/A	E1-E4: \$50 individual \$100 family E5-Above: \$150 individual \$300 family	\$150 individual \$300 family
Does the beneficiary have to file claims?*	No, network provider files claims.	No, Network provider files claim. Beneficiary may have to file if using non-network pharmacy, or POS option.	No, unless using non-network pharmacy, or POS option.	No	No, unless using non-network provider, non-network pharmacy, or POS option.	N/A	N/A	Yes, may be filed by the provider. Non-network Pharmacy may require the beneficiary to pay up front, provider is not required to file the claim.	Yes, may be filed by the provider. Non-network Pharmacy may require the beneficiary to pay up front, provider is not required to file the claim.	N/A	No	No
MTF Access	Yes	Yes	Yes	Yes, may be required by MMSO	Yes	N/A	N/A	Yes, if space is available	Yes, if space is available	N/A	Yes, if space is available	Yes, if space is available
Portable	Yes (geographically based)	Yes (geographically based)	Yes, but only if relocating to another Prime Service Area (geographically based)	Yes, Explain link between Prime and Prime Remote	Yes (geographically based)	N/A	N/A	N/A	N/A	N/A	N/A	No
Civilian Equivalent	Managed care option similar to civilian (HMO)						Fee-for-Service Option			Preferred Provider Organization (PPO)		
Advantages	Highest access to MTF medical care, low out-of-pocket costs			Managed care in remote stateside locations for active duty and their family members residing with them			Freedom to choose from a larger pool of TRICARE-authorized providers			Discounted cost share (5%). No claims to file		

*Note: Ultimately, it is the beneficiary's responsibility to ensure that any and all claims are filed.