

# TRICARE Fundamentals Course

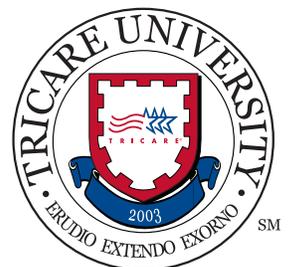
## Pharmacy

# 9

### Instructor Guide

#### References

10 USC 32 CFR § 199  
2008 TRICARE Policy Manual, Chapter 8  
2008 TRICARE Operations Manual, Chapter 23  
[www.tricare.mil](http://www.tricare.mil)  
<http://member.express-scripts.com>  
MMSO Process Guide



**Brainteaser**

Each of the eight items below is a separate puzzle.  
 How many can you figure out?

<p>1.</p> <p>TOOL        O O        O O        LOOT</p>	<p>2.</p> <div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>Bathing          Suit</p> </div>	<p>3.</p> <p>gone let gone        gone be gone</p>	<p>4.</p> <p>N N N N N N N        A A A A A A A        C C C C C C C</p>
<p>5.</p> <p>(ice)^3</p>	<p>6.</p> <p>Gun Jr.</p>	<p>7.</p> <p>GI        cccc</p>	<p>8.</p> <p><b>BLOOD WATER</b></p>

1 Toolbox

5 Ice Cube

2 Topless bathing suit

6 Son of a gun

3 Let bygones be bygones

7 GI Overseas

4 7-Up Cans

8 Blood is thicker than water

# Module Objectives



Show slide #2

#### Module Objectives

- Describe the TRICARE Pharmacy Benefits Program
- Identify who is eligible for TRICARE pharmacy benefits
- Compare the TRICARE pharmacy options
- List TRICARE pharmacy costs



Introduce the Pharmacy module.

- **Describe the TRICARE Pharmacy Benefits Program**
- **Identify who is eligible for TRICARE Pharmacy Benefits**
- **Compare the TRICARE pharmacy options**
- **List TRICARE pharmacy costs**

Show slide #3 for 1.0



## 1.0 TRICARE Pharmacy Benefits Program

- The TRICARE Pharmacy Benefits Program cost-shares on prescription drugs and medicines that:
  - Are approved for marketing by the U.S. Food and Drug Administration (FDA)
  - By U.S. law, require a physician or other authorized professional provider, acting within the scope of his or her license, to provide a prescription to obtain medicines
  - Are ordered and prescribed by an authorized provider in accordance with state and federal law
- TRICARE processes all military treatment facility (MTF), home delivery, and network retail pharmacy transactions through the Pharmacy Data Transaction Service (PDTs). The PDTs is a database that helps to ensure the beneficiary's safety by checking for drug interactions and prescription warnings.
- The TRICARE Pharmacy Benefits Program offers services through:
  - MTF pharmacies
  - TRICARE Pharmacy Home Delivery (including specialty services)
  - TRICARE network retail pharmacies (stateside and U.S. territories)
  - Non-network retail pharmacies
    - Host nation pharmacies are considered non-network pharmacies. (Beneficiaries are responsible for the total cost of pharmacy services up front and must file a claim for reimbursement.)

**Note:** U.S. Family Health Plan (USFHP) enrollees aren't eligible for the TRICARE Pharmacy Benefits Program and must use USFHP pharmacy providers.

2.0: Test Question

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## 2.0 TRICARE Pharmacy Benefits Program Overseas

- There are three pharmacy options available overseas (other than U.S. territories):
  - MTF pharmacies
  - Host nation non-network pharmacies (Beneficiaries pay the total amount up front and must file claims for reimbursement with the overseas contractor.)
  - TRICARE Pharmacy Home Delivery (Restrictions apply for home delivery outside of the United States and U.S. territories. See Section 6.0 of this module for details.)

## 3.0 Eligibility

Mention that non-active duty National Guard/Reserve family members are NOT eligible for the pharmacy program unless they're enrolled in TRS.

The TRICARE Pharmacy Benefits Program is available to:

- Active duty service members (ADSMs)
- Active duty family members (ADFMs)
- Beneficiaries listed in the Defense Enrollment Eligibility Reporting System (DEERS) as TRICARE eligible
- Certain Guard and Reserve members
- TRICARE Reserve Select (TRS) members, TRICARE Retired Reserve (TRR) members, TRICARE Young Adult (TYA) members, and Continued Health Care Benefit Program (CHCBP) enrollees
- Foreign force members and their families

**Note:** Enrollment isn't required to use the pharmacy benefit. Eligibility is verified through DEERS.

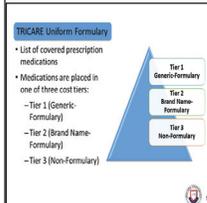
The sponsor and family member become eligible for the pharmacy program when the sponsor is activated/on active duty.

### 3.1 Pharmacy Benefits for Dependent Parents and Parents-in-Law

Dependent parents and parents-in-law aren't TRICARE eligible. However, they may be eligible to use the TRICARE Pharmacy Benefits Program if they:

- Meet the uniformed service's requirements to be considered a dependent of an active duty or retired uniformed service sponsor

Show slide #5 for 4.0



4.1 NOTE: DoD's generic drug policy has been in place for over a decade.

- Show as eligible in DEERS
- Are a dependent parent or parent-in-law, turned 65 years old on or after April 1, 2001, and are entitled to Medicare Part A and purchase Part B. (Note: Prior to turning 65, a dependent parent or parent-in-law may only fill prescriptions through the MTF pharmacy.)

## 4.0 TRICARE Uniform Formulary

### 4.1 Uniform Formulary

- The Uniform Formulary process determines and lists covered prescription medications. The cost for prescriptions are determined in the following manner:
  - The Department of Defense Pharmacy & Therapeutics (DoD P&T) Committee makes recommendations concerning a medication's formulary status.
  - The Beneficiary Advisory Panel comments on the DoD P&T Committee's recommendations.
    - The Director, TRICARE Management Activity (TMA), makes a final decision after reviewing the DoD P&T Committee recommendations and Beneficiary Advisory Panel comments.

#### 4.1.2 Uniform Formulary Tiers

- The Uniform Formulary process evaluates the clinical and cost effectiveness of drugs within therapeutic drug classes, where medications are placed in one of three cost tiers:
  - Tier 1: Generic Formulary
  - Tier 2: Brand Name Formulary
  - Tier 3: Non-Formulary
- The DoD P&T Committee can also make recommendations for the Basic Core Formulary.
  - The Basic Core Formulary is a list of medications from the TRICARE Uniform Formulary that all full-service MTFs are required to have available.
- The DoD mandates prescriptions be filled with a generic equivalent if one is available.
- If a brand name medication has a generic equivalent, the brand name medication may only be dispensed if the provider establishes medical necessity. Brand name copays apply. If medical necessity isn't established, the beneficiary is responsible for the full cost of the medication.

#### 4.1.3 Uniform Formulary Limits and Prior-Authorization

- TRICARE has quantity limits on certain medications, meaning TRICARE only pays for a specific limited amount of medication each time a beneficiary gets a prescription filled.
- Certain medications require prior-authorization.
- TRICARE denies payment for medications used to treat conditions that aren't covered by TRICARE or aren't in the formulary due to federal regulations (e.g., food supplements, drugs for cosmetic purposes).

### 4.2 TRICARE Formulary Search Tool

Information about the Uniform Formulary and the status of various medications can be found in the TRICARE Formulary Search Tool at [www.pec.ha.osd.mil/formulary\\_search.php](http://www.pec.ha.osd.mil/formulary_search.php). The TRICARE Formulary Search Tool allows users to:

- View which medications are on the Basic Core Formulary
- Check benefit coverage of specific medications and generic equivalents
- Find copayment information for prescription medications, including injectables
- Learn about generic equivalents for brand name medications, quantity limits, and prior authorization requirements
- View and print prior authorization criteria and medical necessity forms

Show slide #6  
for 5.0

**Military Treatment Facility Pharmacy**

- Required to make available medications listed on the Basic Core Formulary
- Non-formulary drugs are generally not available at MTFs
- May add other medications to their local formularies based on its scope of care
- Eligible beneficiaries may receive up to a 90-day supply of most medications at no cost



## 5.0 Military Treatment Facility (MTF) Pharmacy

- Each MTF is required to make available the medications listed on the Basic Core Formulary.
  - Non-formulary drugs generally aren't available at MTFs. Based on its scope of care and beneficiary population, MTFs may add select medications to their local formulary.
- MTFs will fill most prescriptions with a 90-day supply.
- MTFs can fill prescriptions written by licensed civilian providers if the MTF carries the medication.
- Prescriptions are filled at no cost to the beneficiary.

Show slide #7  
for 6.0

**TRICARE Pharmacy Home Delivery**

- Least expensive option when not using an MTF Pharmacy
- Best suited for medications taken on a regular basis
- Eligible beneficiaries may receive up to a 90-day supply of medications
- Refills may be ordered online, by phone, or by mail



## 6.0 TRICARE Pharmacy Home Delivery

- The TRICARE Pharmacy Home Delivery option is a cost-effective and convenient way for beneficiaries to get prescription medications while helping the DoD reduce health care costs and sustain health care benefits.
- Beneficiaries may have prescriptions for specialty medications filled through home delivery if the medication is available on the formulary.
  - Specialty medications are usually high-cost; self-administered; injectable or oral medications that treat serious chronic conditions.

### 6.1 Pharmacy Home Delivery Overseas

- There are unique restrictions for home delivery overseas (not including U.S. territories):
  - Outside of the United States and U.S. territories, home delivery is only available to registered beneficiaries with Army Post Office (APO), Fleet Post Office (FPO), or Diplomatic Post Office (DPO) addresses.
    - Beneficiaries who are assigned to a U.S. embassy and do not have APO/FPO/DPO addresses must use the embassy address.
    - DPO (U.S. embassy) mailings are restricted to TRICARE eligible persons on official duty.
  - Beneficiaries can update their APO/FPO/DPO and e-mail addresses online at [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) or [www.dmdc.osd.mil/appj/bwe/](http://www.dmdc.osd.mil/appj/bwe/).
  - Refrigerated medications cannot be shipped to APO/FPO/DPO addresses.
  - All prescription medications are subject to local customs or policies.
  - Prescriptions must be written by U.S.-licensed providers.

6.2 Test Question:  
Home Delivery allows a bene to set up an online account.

### 6.2 Opening a Pharmacy Home Delivery Account

- To begin using the home delivery option, beneficiaries must establish and create an account.
- A separate account must be created for each family member. Accounts can be created and activated:
  - Online: [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE)
  - Phone: Stateside and overseas call toll-free: 1-877-363-1303
  - Mail: Download the registration form on [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) and mail it to:

Express Scripts, Inc.  
P.O. Box 52150  
Phoenix, AZ 85072-9954

### 6.3 Using Home Delivery

- Beneficiaries can fill or refill home delivery prescriptions by mail, fax, phone, or online.
  - By law, new prescriptions can only be submitted by mail, fax, or through a provider's e-prescribing system.
    - New prescriptions submitted by fax may only be faxed directly from a provider's office.
    - Providers can fax prescriptions to the pharmacy contractor.

- Controlled substance prescriptions can only be mailed.
- A 90-day supply and three refills are available for most medications.
  - For certain types of medications, such as controlled substances, there may be a 30-day supply limit imposed by federal law.
- After registering for home delivery, registered users have online access to account and general prescription drug and health information.
  - Registered users mail their health care provider's written prescription(s) and pay the appropriate copayment by check or credit card to the pharmacy contractor with the submission. The following information should be included on each new prescription:
    - Patient's full name, date of birth, address, and sponsor's identification (ID) number (sponsor's SSN or DoD Benefits Number may be used instead of the sponsor's ID number)
    - Prescriber's name, address, phone number, license, and Drug Enforcement Agency (DEA) number
    - Prescriber's handwritten signature
- Once the prescription is processed (usually within 10–14 days), the contractor sends medications directly to the beneficiary.
- To ensure beneficiaries don't run out of their medication, it's recommended they have a 30-day supply on hand when requesting a refill through home delivery.
- Beneficiaries can use the auto-refill option or may request refills based on the refill date on the medication label.

#### **6.4 Converting Retail or MTF Prescriptions to Home Delivery (Where Applicable)**

- Beneficiaries can convert their retail or MTF prescriptions to home delivery by either:
  - Activating their account at [www.express-scripts.com/TRICARE](http://www.express-scripts.com/TRICARE) and following the instructions provided
    - The pharmacy contractor contacts the beneficiary by e-mail or phone to confirm the conversion request
    - The online process is secure and personal information is safeguarded
  - Contacting the pharmacy contractor using the stateside or overseas phone number
    - Contractor staff walks beneficiaries through the conversion process by accessing their records, verifying their information, and converting their medication(s) to home delivery
    - The pharmacy contractor contacts beneficiaries via e-mail or phone to confirm the conversion request

#### **6.5 Using the TRICARE Home Delivery through the Overseas Deployment Prescription Program**

6.5: Test Question

- Deploying service members should receive an initial supply of maintenance medications prior to deployment, per the current theater guidance.
- The MTF pharmacy or deployment processing center forwards a deployment prescription form via mail, fax, or through the secure DoD PharmacoEconomic Center website ([www.pec.ha.osd.mil](http://www.pec.ha.osd.mil)) to the TMA Pharmacy Operations Center for future processing of the service member's medications.
- The TMA Pharmacy Operations Center reviews the deployment prescriptions, processes them according to DoD policy, and forwards them to the pharmacy contractor.
- After deploying, service members receive an e-mail from the pharmacy contractor asking them to update their online account with their current mailing address (APO/FPO/DPO).
  - Service members who do not receive an e-mail 60 days after deploying should contact the TMA Pharmacy Operations Center by:
    - Phone: 1-866-275-4732 (stateside or overseas) or 1-210-221-8274  
DSN: 471-8274
    - E-mail: [pdts.ameddcs@amedd.army.mil](mailto:pdts.ameddcs@amedd.army.mil)

- Prescription(s) are on hold until refills are available.
- When the medication refill is available, the pharmacy contractor sends an e-mail to the service members to remind them to order the refill.
  - Service members may then order the refill by logging in to their account on the pharmacy contractor's website.
  - **Note:** Deployment prescription refills **are not** automatically sent out since the service member's deployment status could change unexpectedly.
- It's very important for service members to keep their e-mail and mailing address information updated. If service members have questions or experience problems, they should contact the pharmacy contractor or the TMA Pharmacy Operations Center.
  - When service members don't update their contact information or request available refills, the prescription remains on hold until it expires, which is one year from the date the prescription was written.
  - Beneficiaries with questions about the Deployment Prescription Program can contact the TMA Pharmacy Operations Center by:
    - Phone: 1-866-275-4732 (stateside or overseas) or 1-210-221-8274  
DSN: 471-8274
    - E-mail: [pdts.ameddcs@amedd.army.mil](mailto:pdts.ameddcs@amedd.army.mil)
- Delivery overseas may take anywhere from 2–4 weeks from the date shipped.

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for 7.0

**Network Retail Pharmacy**

- All TRICARE-eligible beneficiaries registered in DEERS are automatically eligible
- Eligible beneficiaries may fill prescriptions at network pharmacies throughout the U.S., including U.S. territories, without having to file a claim
- Beneficiaries present their written prescriptions along with their uniformed services ID card



## 7.0 Network Retail Pharmacy

### 7.1 Network Retail Pharmacy

The network retail pharmacy option allows beneficiaries to fill prescriptions at network pharmacies in the United States and U.S. territories (currently, there are no network retail pharmacies in American Samoa).

### 7.2 Using Network Retail Pharmacies

- Beneficiaries must present their written prescriptions along with their Uniformed Services ID card.
- Prescriptions from a licensed provider may be submitted to the network retail pharmacy of choice by internet, fax, or phone, depending on pharmacy laws for that state or territory.
- Beneficiaries can find network retail pharmacies near their home or while traveling by accessing the Pharmacy Locator at [www.express-scripts.com/tricare/pharmacy](http://www.express-scripts.com/tricare/pharmacy) or calling 1-877-363-1303.

Show slide #9  
for 8.0

**Non-Network Retail Pharmacy**

- A pharmacy that is not in the TRICARE pharmacy retail network
- Non-active duty beneficiaries pay the full price of medication up front and file
- Non-active duty Prime beneficiaries incur POS charges



## 8.0 Non-Network Retail Pharmacy

- A non-network retail pharmacy is a pharmacy that isn't in the TRICARE retail pharmacy network, including host nation pharmacies.
  - Using a non-network retail pharmacy should be a beneficiary's last option when getting a prescription filled within the United States or U.S. territories, as it's the most expensive option.
- When using a non-network retail pharmacy or overseas host nation pharmacy, beneficiaries pay the total amount up front and file claims to receive the appropriate reimbursement after applicable cost-shares, deductibles, or copays are met. (See Section 12.0 of this module for claims filing information.)

### 8.1 TRICARE Pharmacy Services in the Philippines

- As of September 1, 2011, to be reimbursed for out-of-pocket costs TRICARE beneficiaries living or traveling in the Philippines must obtain prescription medications from either a TRICARE-certified licensed civilian retail pharmacy outlet or TRICARE-certified hospital-based pharmacy.

- TRICARE won't reimburse beneficiaries for medications purchased in an individual provider's office in the Philippines.
  - Beneficiaries can get help locating a TRICARE-certified licensed civilian retail pharmacy by calling the TRICARE Overseas Program Singapore Regional Call Center at +65-6339-2676 (overseas) or 1-877-678-1208 (stateside). Certified providers in the Philippines are listed at [www.tricare.mil/tma/pacific/pacificcertifiedproviders.aspx](http://www.tricare.mil/tma/pacific/pacificcertifiedproviders.aspx).

Show slide #10 for 9.1

## 9.0 Pharmacy Program Cost Overview

### 9.1 Stateside and U.S. Territories

Pharmacy Costs

	Formulary Medication	Formulary Brand Name	Non-Formulary Medication
MTF (up to a 90-day supply)	\$0	\$0	N/A
Home Delivery (up to a 90-day supply)	\$0	\$9	\$25
Network Retail Pharmacy (up to a 30-day supply)	\$5	\$12	\$25
Non-Network Retail Pharmacy (up to a 30-day supply)	TRICARE Prime options: 50% cost-share after the POS deductible is met. All other beneficiaries: \$12 or 20% of the total cost, whichever is greater, after annual outpatient deductible is met.	TRICARE Prime options: 50% cost-share after the POS deductible is met. All other beneficiaries: \$25 or 20% of the total cost, whichever is greater, after annual outpatient deductible is met.	TRICARE Prime options (stateside and overseas): 50% cost-share after the POS deductible is met (\$300 single/\$600 family). All other beneficiaries: \$25 or 20% of the total cost, whichever is greater, after annual outpatient deductible is met.

(Cost/Rates Effective October 1, 2011)

	Formulary Medication		Non-Formulary Medication
	Generic		Brand Name
MTF (up to a 90-day supply)	\$0	\$0	Not Applicable (generally not available at MTFs)
Home Delivery (up to a 90-day supply)	\$0	\$9	\$25
Network Retail Pharmacy (up to a 30-day supply)	\$5	\$12	\$25
Non-Network Retail Pharmacy (up to a 30-day supply)	TRICARE Prime options (stateside and overseas): 50% cost-share after the point-of-service (POS) deductible is met (\$300 single/\$600 family) All other beneficiaries: \$12 or 20% of the total cost, whichever is greater, after the annual outpatient deductible is met		TRICARE Prime options (stateside and overseas): 50% cost-share after the POS deductible is met (\$300 single/\$600 family) All other beneficiaries: \$25 or 20% of the total cost, whichever is greater, after annual outpatient deductible is met

- ADSMs' prescriptions are filled at no cost to ADSMs, unless they use a non-network pharmacy.
- When using non-network pharmacies, ADSMs must pay up front and file a claim to receive 100% reimbursement.
  - Beneficiaries other than ADSMs (e.g., ADFMs, retirees, Guard/Reserve members, and their families) pay billed charges up front and have cost-shares applied.
- ADSMs cannot fill prescriptions for non-formulary medications unless medical necessity is established.

**Note:** Copayments are applied to deductibles and catastrophic caps.

### 9.2 Overseas

- Beneficiaries filling prescriptions at overseas retail pharmacies pay up front and file claims with the overseas contractor.
  - TOP Prime/TOP Prime Remote enrollees are reimbursed 100% of billed charges.
  - All others pay applicable TOP Standard cost-shares and deductibles.

## 10.0 Guard or Reserve Members and Line of Duty or Notice of Eligibility Retail Pharmacy Claims

- Guard or Reserve members who require medications for an approved Line of Duty or Notice of Eligibility (LOD/NOE) condition must pay out of pocket for prescription medications as they don't show as TRICARE eligible in the DEERS.

9.2: Test Question

- Members with LOD/NOE prescription services must complete a *TRICARE DoD/CHAMPUS Medical Claim—Patient’s Request for Medical Payment* (DD Form 2642) and mail or fax it along with a copy of the LOD document and the civilian/host nation pharmacy’s payment receipt or invoice.

**Note:** LOD documents may include orders, drill attendance sheet, or an official LOD from the service member’s respective service.

- The payment receipt or invoice must include all of the following:
  - Drug name and strength
  - Prescription number
  - National drug code number
  - Quantity
  - Amount charged/paid
  - Date of service
  - Name and address of the civilian pharmacy
  - Name of prescribing doctor

### 10.1 LOD/NOE Pharmacy Claim Submission

Care Rendered Stateside and in the U.S. Virgin Islands	Care Rendered in All Other Overseas Locations
Guard or Reserve members submit the <i>DD Form 2642</i> , claims receipts, and LOD documents (if not already sent or on file) to:  Military Medical Support Office (MMSO) Attn: RC Retail Pharmacy Reimbursement P.O. Box 886999 Great Lakes, IL 60088-6999  Fax: 1-847-688-6460	Guard or Reserve members submit the <i>DD Form 2642</i> , claims receipts, and LOD documents (if not already sent or on file) to:  Overseas Active Duty Claims TRICARE Active Duty Claims P.O. Box 7968 Madison, WI 53707-7968
Once the information is received and verified, MMSO faxes the <i>DD Form 2642</i> and the receipt or invoice to the pharmacy contractor for payment.	Once the information is received and verified, the overseas contractor’s claims processor reviews, verifies, and processes the claim.
The pharmacy contractor mails the reimbursement check directly to the Guard or Reserve member (who pays the pharmacy if he/she hasn’t already).	The overseas contractor’s claims processor mails the reimbursement check directly to the Guard or Reserve member (who would pay the pharmacy if he/she hasn’t already).

## 11.0 TRICARE and Medicare Part D

- TRICARE for Life (TFL) beneficiaries are covered under the TRICARE Pharmacy Benefits Program. Requirements and costs are based on how and where prescription services are received (i.e., MTF, home delivery, retail, non-network; stateside/U.S. territories or overseas).
- Medicare has a prescription drug option available to Medicare eligible individuals. The option is referred to as Medicare Part D and is only available in the United States and U.S. territories.
  - **Note:** Medicare eligible beneficiaries aren't required to purchase Medicare Part D to have prescription drug coverage under the TRICARE Pharmacy Benefits Program. If beneficiaries choose not to purchase Part D, their claims and ability to use TRICARE pharmacy benefits won't be affected and are processed normally. TRICARE is considered creditable coverage (i.e., equal to) Medicare Part D coverage for Medicare purposes.
  - If a TFL beneficiary shows as having Medicare Part D but isn't enrolled or has disenrolled, the beneficiary should contact DEERS to get assistance.
    - Phone: 1-800-538-9552 (worldwide) or 1-866-363-2883 (TTY/TDD)
    - In person: To find a DEERS office visit [www.dmdc.osd.mil/rsl/](http://www.dmdc.osd.mil/rsl/)
- TFL beneficiaries who live overseas and have questions about TRICARE pharmacy benefits may contact the pharmacy contractor. Overseas contact information is available in Section 14.0 of this module.

## 12.0 Pharmacy Claims

- To get reimbursed for prescription costs when using non-network pharmacies stateside or overseas, beneficiaries must complete a *DD Form 2642*.
  - Forms are available at [www.tricare.mil/forms](http://www.tricare.mil/forms)
- Beneficiaries must include the following information with their claims:
  - Patient's name
  - Drug name, strength, date filled, recommended dose, quantity dispensed, and price of each drug
  - National Drug Code for each drug, if available
  - Prescription number of each drug
  - Name and address of the pharmacy
  - Name and address of the prescribing physician

**Note:** Billing statements showing only total charges, canceled checks, or cash register and similar types of receipts are not acceptable as itemized statements, unless the receipt provides the detailed information listed above. Beneficiaries with other health insurance (OHI) should include a copy of their Explanation of Benefits (EOB) from their primary insurance.

- Payment of claims for medications dispensed in a provider's office or by a home health care agency or specialty pharmacy are the responsibility of the regional contractor (not the pharmacy contractor).
- Beneficiaries in overseas areas, excluding U.S. territories, must file their prescription claims with the overseas claims processor and must include proof of payment with their claims.
- Claims for prescriptions filled in the United States and Puerto Rico must be received and entered in the claim processor's system within one year of the date of service.
- Claims for prescriptions filled in overseas locations (including all U.S. territories except Puerto Rico) must be submitted for processing within three years of the date of service.

Pharmacy Claims Contact Information	
United States and U.S. Territories	Overseas Areas, Excluding U.S. Territories
<p>Express Scripts, Inc.            P.O. Box 52132            Phoenix, AZ 85082</p> <p>1-877-363-1303</p> <p><a href="http://www.express-scripts.com/TRICARE">www.express-scripts.com/TRICARE</a></p>	<p><b>Active Duty Service Members</b>            TRICARE Active Duty Claims            P.O. Box 7968            Madison, WI 53707-7968</p> <p>Eurasia-Africa and Pacific: 1-608-301-2310, option 2            Latin America and Canada: 1-608-301-2311, option 2</p> <p><a href="http://www.tricare-overseas.com/beneficiaries.htm">www.tricare-overseas.com/beneficiaries.htm</a></p>
	<p><b>All Other Beneficiaries—Eurasia-Africa</b>            TRICARE Overseas Program            P.O. Box 8976            Madison, WI 53708-8976</p> <p>1-608-301-2310, option 2</p> <p><a href="http://www.tricare-overseas.com/beneficiaries.htm">www.tricare-overseas.com/beneficiaries.htm</a></p>
	<p><b>All Other Beneficiaries—Latin America and Canada</b>            TRICARE Overseas Program            P.O. Box 7985            Madison, WI 53707-7985</p> <p>1-608-301-2311, option 2</p> <p><a href="http://www.tricare-overseas.com/beneficiaries.htm">www.tricare-overseas.com/beneficiaries.htm</a></p>
	<p><b>All Other Beneficiaries—Pacific</b>            TRICARE Overseas Program            P.O. Box 7985            Madison, WI 53707-7985</p> <p>1-608-301-2310, option 2</p> <p><a href="http://www.tricare-overseas.com/beneficiaries.htm">www.tricare-overseas.com/beneficiaries.htm</a></p>

### 12.1 Appealing a Denied Claim

- Beneficiaries can appeal a denied a pharmacy claim. The appeal for reconsideration must be in writing, signed, and postmarked or received by the pharmacy contractor within 90 calendar days from the date the claim was initially denied. A copy of the claim decision must be submitted with the appeal. The appeal must state what the beneficiary disagrees with and can be sent to :

Express Scripts, Inc.  
 P.O. Box 60903  
 Phoenix, AZ 85082-0903

- Note:** Appeals for prescriptions filled in overseas locations (including all U.S. territories except Puerto Rico) should be filed with the overseas contractor. See the *Claims and Appeals* module for overseas appeals filing addresses.
- Beneficiaries can send additional documentation to further support their appeal. However, beneficiaries must still submit their appeal within the 90-day time frame and indicate in their appeal that additional documentation will come at a later date. Beneficiaries shouldn't wait until additional documentation is received to start their appeal.

Show slide #11  
for 13.0

**Pharmacy and OHI**

- Federal law requires the OHI to be the primary payer when beneficiaries have OHI and TRICARE pharmacy coverage.
- Beneficiaries who have OHI with prescription coverage may not use the TRICARE pharmacy home delivery option, unless:
  - The medication is not covered under the OHI, or
  - The beneficiary has exceeded the dollar limit of coverage under the OHI plan for the current year.

### 13.0 Pharmacy Benefits with OHI

- For beneficiaries with OHI and TRICARE pharmacy coverage, federal law requires the OHI be the primary payer.
- TRICARE is the last payer, typically covering costs not covered by the OHI.
  - Between the two payers, most medication expenses are covered.
- TRICARE is the primary payer for TRICARE-covered medications not covered by the beneficiary's OHI or when the beneficiary reaches the OHI plan's pharmacy benefit cap.
- Beneficiaries who have OHI with prescription coverage cannot use TRICARE's home delivery, unless:
  - The medication isn't covered under the OHI; or
  - The beneficiary has exceeded the dollar limit of coverage under their OHI plan for the current year
- At retail pharmacies, TRICARE beneficiaries who have OHI with prescription coverage must show both their OHI and Uniformed Services ID cards.
- For medication covered by OHI, beneficiaries should use that plan's home delivery or retail pharmacy benefit, pay that plan's copayment, and then submit a paper claim to the pharmacy or overseas contractor for reimbursement of appropriate out-of-pocket expenses.
- Stateside beneficiaries with OHI should select a pharmacy that is in both their OHI's and TRICARE's network. Otherwise the beneficiary may be subject to the TRICARE non-network retail pharmacy cost-share or POS charges if enrolled in TRICARE Prime.
- Many TRICARE network retail pharmacies can now coordinate benefits electronically, which allows TRICARE's secondary payment to be processed before the beneficiary leaves the pharmacy.
  - How it works:
    - The beneficiary goes to a pharmacy that accepts their OHI and is also a TRICARE network retail pharmacy.
    - The beneficiary shows proof of OHI and TRICARE (enrollment and ID cards).
    - The pharmacy submits the claim to the OHI.
    - The pharmacy then submits a secondary transaction to TRICARE.
    - TRICARE's claims system reviews the unpaid portion of the claim and pays up to the TRICARE-allowable amount.
    - The beneficiary pays any remaining costs after both plans process the claim.

**Note:** Medicaid, TRICARE supplements, and Indian Health Services plans aren't considered OHI.

## 14.0 Resources

<b>Pharmacy Benefit Contractor Contact Information for Home Delivery and Retail (Stateside and U.S. Territories)</b>	
<b>General Correspondence</b>	<b>Phone:</b> 1-877-363-1303 <b>Online:</b> <a href="http://www.express-scripts.com/tricare">www.express-scripts.com/tricare</a> <b>Mail:</b> <div style="text-align: right;">Express Scripts, Inc.            P.O. Box 60903            Phoenix, AZ 85082-0903</div>
<b>International Toll-Free Access</b>	Dial the in-country access code listed below <b>Germany:</b> 00+800-3631-3030 <b>Italy:</b> 00+800-3631-3030 <b>Japan—IDC:</b> 0061+800-3631-3030 <b>Japan—Japan Telecom:</b> 0041+800-3631-3030 <b>Japan—KDD:</b> 010+800-3631-3030 <b>Japan—Other:</b> 0033+800-3631-3030 <b>South Korea:</b> 002+800-3631-3030 <b>Turkey:</b> 0811-288-0001 (once prompted, input 877-363-1303) <b>United Kingdom:</b> 00+800-3631-3030 <b>Note:</b> Beneficiaries residing overseas located in areas outside of these six countries should call their local point of contact number, which will provide access to the Express Scripts Contact Center.
<b>Pharmacy Operations Center</b>	<b>Phone:</b> 1-866-ASK-4PEC/1-866-275-4732 (for specific in-country, toll-free service, where established) <b>Online:</b> <a href="http://www.pec.ha.osd.mil">www.pec.ha.osd.mil</a>
<b>Pharmacy Claim Filing Information</b>	<b>Phone:</b> 1-877-363-1303 <b>Online:</b> <a href="http://www.tricare.mil/pharmacy/claims">www.tricare.mil/pharmacy/claims</a>

# Module Objectives



Show slide #12

Module Summary

- Describe the TRICARE Pharmacy Benefits Program
- Identify who is eligible for TRICARE Pharmacy Benefits
- Compare the TRICARE pharmacy options
- List TRICARE pharmacy costs

## Summary:

- Describe the TRICARE Pharmacy Benefits Program
- Identify who is eligible for TRICARE Pharmacy Benefits
- Compare the TRICARE pharmacy options
- List TRICARE pharmacy costs

Show slide #13

Questions?

A red circular icon with a white question mark inside, set against a white background with a subtle shadow.

Show slide #14

The TRICARE logo, consisting of three red wavy lines above a blue star with a white outline, and the word "TRICARE" in red capital letters below.

## Module Review Sheet

### Question 1:

What are the three pharmacy options overseas?

#### Answer 1:

1. MTF pharmacies
2. Host nation non-network pharmacies
3. TRICARE Pharmacy Home Delivery (Restrictions apply for home delivery outside of the United States and U.S. territories.

### Question 2:

Who may use the MTF pharmacy and how much does it cost?

#### Answer 2:

Any TRICARE beneficiary may use the MTF pharmacy and it is free.

### Question 3:

What is the cost of a non-formulary medication?

#### Answer 3:

\$25

### Question 4:

What does PDTS stand for and how does it provide safety to beneficiaries?

#### Answer 4:

Pharmacy Data Transaction Service. As long as the beneficiary uses an MTF, home delivery pharmacy, or a retail network pharmacy, an alert will display on PDTS whenever a prescription being filled will adversely interact with the beneficiary's current medication. The pharmacy will notify the beneficiary and the provider that the prescription cannot be filled.

### Question 5:

What is the maximum supply that a beneficiary may receive from the home delivery pharmacy?

#### Answer 5:

90-day supply.

## Exams Questions and Answers: Pharmacy

**37) When deploying overseas, service members using home delivery through the Overseas Deployment Prescription Program should \_\_\_\_\_.**

- A. Receive a supply of maintenance medication before deployment
- B. Keep their address and e-mail updated in DEERS
- C. Contact the overseas contractor or POC with questions if they experience problems
- D. All of the above

**Answer: [D] Reference: Participant Guide, Pharmacy, Section 6.5**

**38) TOP Prime and TOP Prime Remote beneficiaries pay up front for pharmacy prescriptions, file claims with overseas contractors, and \_\_\_\_\_.**

- A. Are reimbursed 100% for billed charges
- B. Are reimbursed 50% for billed charges
- C. Pay cost-shares
- B. Pay deductibles

**Answer: [A] Reference: Participant Guide, Pharmacy, Section 9.2**

**39) Which of the following TRICARE pharmacy options are available overseas?**

- A. MTF pharmacies
- B. Host nation non-network pharmacies
- C. TRICARE Pharmacy Home Delivery
- D. All of the above

**Answer: [D] Reference: Participant Guide, Pharmacy, Section 1.0**

**40) Which of the following TRICARE pharmacy program options allows beneficiaries to set up an online account to receive prescription medications?**

- A. MTF pharmacies
- B. Host nation non-network pharmacies
- C. TRICARE Pharmacy Home Delivery
- D. All of the above

**Answer: [C] Reference: Participant Guide, Pharmacy, Section 6.2**