



TRICARE Overseas Marketing and Education Products Survey (October 2004)

Response Rate: Survey sent to 296 council members, with 162 responses = 55%

Q#1: Do you currently live within the United States (one of the 50 states or the District of Columbia)?

Yes	145	90%
No	17	10% (Skip to question #3)
TOTAL	162	100%

Q#2: Have you ever lived outside the U.S. as a TRICARE beneficiary, either as a member of the U.S. uniformed services, as a uniformed services retiree or as a family member of a uniformed services sponsor?

No	66 (Please STOP and submit your survey)
Yes, within the last 5 years	25
Yes, more than 5 years ago	54
TOTAL	145

Summary:

Never lived outside U.S.	66	41%
Currently live outside U.S.	17	10%
Not currently, but within past 5 years	25	15%
More than 5 years ago	54	33%
TOTAL	162	100%

Note: It appears likely many who had not lived outside the U.S. failed to return their survey.

Q#3: Please provide the name of the foreign country or U.S. territory in which you currently live or in which you lived most recently.

Overseas Location	Currently	Not currently, but		Total	%
		within past 5 years	> 5 years ago		
Alaska			1	1	2%
Australia	1			1	2%
Azores		1		1	2%
Belguim			1	1	2%
Bermuda			1	1	2%
Egypt	1			1	2%
England			1	1	2%
Estonia	1			1	2%
France	1			1	2%
Germany	2	3	9	14	26%
Greece			1	1	2%
Guam		3		3	6%
Guatemala	1			1	2%
Honduras			1	1	2%
Hong Kong			1	1	2%
Italy	1			1	2%
Japan	3	3	2	8	15%
Jordan		1		1	2%
Lithuania	1			1	2%
Marshall Islands	2			2	4%
Peru	1			1	2%
Philippines	1			1	2%
Puerto Rico	1			1	2%
Scotland			1	1	2%
South Korea			1	1	2%
South Korea & Germany			1	1	2%
Spain		1		1	2%
U.K.			1	1	2%
(blank)			3	3	6%
Total	17	12	25	54	100%

Q#4: While living or working overseas, what arrangements were available for your health care? (Mark all responses that apply.)

	Currently overseas	Not currently overseas, but		Total
		within past 5 years	Overseas more than 5 years ago	
Care via a military provider	47%	83%	80%	70%
Care via local civilian providers, at my own expense (not reimbursed)	18%	0%	4%	7%
Care via local civilian providers under a host-naton agreement	6%	25%	20%	17%
Care via local civilian providers, under the International SOS Assistance program	41%	17%	4%	19%
Other arrangements, not listed above. (please comment)	47%	8%	12%	22%
No arrangements, or don't recall	0%	0%	12%	6%
Total	17	12	25	54

NOTE: Nearly half of respondents currently overseas have used "other" sources of care. (see comments)

Q#5: How did you obtain information on your overseas health care options? (Mark all responses that apply.)

	Currently overseas	Not currently overseas, but within past 5 years	Overseas more than 5 years ago	Total
Provided to me before I went overseas.	29%	25%	16%	22%
Provided to me after I arrived overseas.	53%	83%	56%	61%
Obtained myself via a Web site.	12%	0%	0%	4%
Obtained myself via an in-person visit or telephone call.	35%	8%	12%	19%
Other source, not listed. (please comment)	24%	0%	0%	7%
No information obtained, or don't recall	6%	0%	28%	15%
Total	17	12	25	54

Q#6: Please think back to the adequacy of the health care information you had when you first arrived at your new overseas home and mark the response that applies best.

	Currently overseas	Not currently overseas, but within past 5 years	Overseas more than 5 years ago	Total
I was adequately informed about how to obtain health care as a result of my own efforts.	53%	58%	56%	56%
I was adequately informed about how to obtain health care as a result of TRICARE customer education products and briefings such as deployment briefings.	24%	25%	4%	15%
I was not adequately informed about how to obtain health care.	24%	17%	36%	28%
No response.	0%	0%	4%	2%
Total	17	12	25	54

Q#7: In what format would you prefer to receive overseas health care information? (Mark the response that applies best.)

	Currently overseas	Not currently overseas, but within past 5 years	Overseas more than 5 years ago	Total
Verbally, one-on-one, either in person or via	6%	17%	20%	15%
Verbally, as part of a group briefing.	24%	33%	16%	22%
Via printed materials, such as brochures, tri-folds, healthcare passports, booklets.	29%	25%	28%	28%
Via the Web (either E-mail or Web pages).	24%	17%	32%	26%
Computer disk (either a briefing video or	18%	8%	4%	9%
Other (please comment)	0%	0%	0%	0%
None of the above.	0%	0%	0%	0%
No response	0%	0%	0%	0%
Total	17	12	25	54

Q#8: In thinking only about printed health care information, which format would you prefer? (Mark the response that applies best.)

	Currently overseas	Not currently overseas, but within past 5 years	Overseas more than 5 years ago	Total
A brochure or booklet with information specific to where I live.	71%	42%	60%	59%
A comprehensive overseas handbook with information covering all ways of accessing health care in all overseas regions.	29%	58%	40%	41%
No response	0%	0%	0%	0%
Total	17	12	25	54

COMMENTS BY MEMBERS CURRENTLY LIVING OVERSEAS:

I receive most of my information from my husband who is the Tricare point of contact at our embassy. We have a State Department hired nurse at the embassy as well as a State Department Regional Medical Officer who provide us with adequate info.

I don't completely understand question #4. We have "participating" providers here in the Philippines that are able to bill TRICARE directly. I'm not sure if that's the same as having a host-nation agreement. The other option is to pay for your care and file a claim. I don't know if the embassy care goes under tri-care. But we received the briefing through the embassy.

If an agreement is put in place for TRICARE overseas to attend Active Duty Military and their Dependents then the SAME agreement should be in effect for Retired Military and their Dependents. WPS should either pay or reimburse TRICARE claims within 60 Item 4 - Normally we use local German providers but we have the option of driving the 2+ hours to a US treatment facility. Item 5 - Our 30 man unit has a Tricare advisor/medical record translator that provides emails and walk-in service for our health Kwajalein has a contractor-operated hospital that provides no Tri-Care support except for the few active duty Army personnel assigned. Expanding to retired veterans would be great.

Provide information on tricare ISOS for family members planning vacations overseas when military MTF are not available. QUESTION #5: I WORK FOR THE GOVERNMENT AND HAVE BLUE CROSS BLUE SHIELD AS WELL AS TRICARE. The POC for EFM's and AD...WAS...the OPSCO in the DAO (Defense Attache Office). Unfortunately there is not an OPSCO for DAO in Lithuania at this time nor will there be one other than a TDYer until late April. You should consider dependent care especially where the expectation of medical care does not compare to mainland standards. We should also consider language barriers. Access standards are very different in many foreign countries.

COMMENTS BY MEMBERS WHO DON'T CURRENTLY LIVE OVERSEAS, BUT LIVED OVERSEAS WITHIN THE PAST 5 YEARS:

Big problem for civilians that are not always TRICARE beneficiaries. There is no overseas clearance process for DoD civilians and often they go overseas to take DODDs jobs and have many medical conditions which often cannot be handled by a remote clinic. I believe briefings should be given to all service members prior to going overseas and if necessary provide another when they arrive in country that is more specific to the area in which we live. If you live overseas- specifically Europe you need info on accessing many systems due to the traveling most people do. Since most people will be on Standard overseas due to limited military facilities, there should be a lot of emphasis on fixing the many problems with TRICARE Standard rather than on Prime. The information on each country and situation should be available. The booklet we received when we arrived in-country was very difficult to understand. An 'easier to understand' format would have been appreciated--something that was much more area-specific. The comprehensive overseas handbook would help me anywhere I would go overseas.

COMMENTS BY MEMBERS WHO LIVED OVERSEAS MORE THAN 5 YEARS AGO:

How does a military retiree obtain Tricare services when in a travel/tourism status overseas? I feel computer disk is an excellent way to get information regarding healthcare choices; however, with the move a computer may not be readily available in the home yet. Therefore providing this information in a hard copy abbreviated version would be best. I think having a brochure for overseas would be helpful to any beneficiary either living or being assigned there. The brochure could cover the map-- toll free numbers, how to get care when traveling in CONUS and assigned to overseas etc.

Is Tricare Prime valid for overseas travel? If so how can authorization be obtained? The domestic waiting time for Triwest to answer the telephone is often in excess of 20 minutes. This could be prohibitively expensive when calling from overseas.

More attention should be placed on services available to Family members of Active Duty and services available to Retired Military members and their family

My overseas Tricare healthcare experience was as a dependent.

My tour in Honduras was well before TRICARE was implemented thus my answers may be worth little to this survey.

Not very good customer service anywhere in the past 5 years! Too confident about their positions and they are not hiring trained people. As I have heard it's who you know that got hired and thus don't have to do their jobs!

There are National Guard and Reserve units now being deployed overseas some on fairly short notice. Since the members of these units are not usually career military, they may not know what medical support is available. That is even more true of family members.

We used foreign military and civilian medical facilities.

We used local ex-patriate physicians and were reimbursed via CHAMPUS Standard. Local care was excellent ,but reimbursement schedules were based on Hawaii costs which were much different than Hong Kong costs. Our out-of-pocket costs were much higher than the reimbursement.