

The Doctor is in ...

Strength in the Face of Stigma

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Service members returning from deployment face many challenges, including the invisible wounds of mental health conditions. It is important to emphasize the seriousness of these injuries and remind people that the earlier a mental health condition is treated, the less damage it does.

Unfortunately, many service members believe there is a stigma to seeking care for their mental health needs. They may feel a personal aversion or fear facing discrimination or harassment for seeking treatment. Much of this stigma is based on myth, not reality. Some examples are:

- Myth: Seeking mental health care will hurt your career.
- Reality: Seeking mental health care will ensure you get the appropriate care delivered by trained professionals, and help keep your career on track. Mental health counseling in and of itself is not a reason to revoke or deny a security clearance.
- Myth: You will lose the trust of your unit if you admit to mental distress.
- Reality: Your unit will trust you more once you seek help and receive care. Taking responsibility for your health shows that you are reliable. Without care, you may become a liability to those around you.
- Myth: Needing mental health care is a sign of weakness.
- Reality: It takes real strength and courage to admit you have a problem and seek help. Post-traumatic stress, anxiety,

depression and other types of psychological conditions are due to changes in the brain and body caused by life experiences or physical trauma, and require medical care.

The downsides of not seeking help are serious. Untreated mental health conditions can cause your job performance and family life to suffer. Not receiving care can lead to substance abuse, increased stress at home and a higher risk of suicide.

If you recognize any signs of a mental health condition in yourself, your family or a friend, speak up. The Defense Center of Excellence Outreach Center at www.dcoe.health.mil/24-7help.aspx is an excellent resource for service members and their families to learn about the mental health services available to them. Military OneSource at www.militaryonesource.mil is another resource to help you find care.

Active duty service members may receive mental health care at any military treatment facility without a referral. For civilian care, you need a referral. Other TRICARE beneficiaries don't need a referral or prior authorization for the first eight visits. For more information on TRICARE's mental health coverage, go to www.tricare.mil/mentalhealth.

Just like any other injury or illness, mental health conditions require medical treatment as soon as possible. Asking for help is hard, and can require great courage. Overcoming that challenge takes personal resolve and strength. For examples of real service members who had the courage to ask for help and the care they needed to maintain success in their personal and professional lives, visit www.realwarriors.net. ■

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An Important Note about TRICARE Program Information: At the time of printing, 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 treatment facility guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact your TRICARE regional contractor, TRICARE Service Center, or local military treatment facility.

No Need to Skip That Mammogram

When was the last time you put off a health screening? Do you remember why? “I only had time to take my kids to the doctor,” or maybe, “Waiting a few extra months won’t matter.” Here are four common excuses women use to avoid getting their mammograms—and why they should stop “excusing” themselves from this lifesaving screening:

1. I’m too busy.

Having a mammogram will only take a few moments¹—usually three to five minutes. Typically, it takes less than an hour from checking in to walking out the door.

Additionally, a woman’s risk for developing breast cancer grows as she gets older. The sooner you detect breast cancer, the better your chance of treating it.² Remember, what’s the point of “being too busy,” if you can’t be there for your family someday?

2. It hurts.

As a general rule, having a mammogram may cause some minor discomfort. Yes, there is pressure on the breast tissue—but for most people it is pressure, not pain.

3. Nothing can be wrong if I don’t check.

Breast cancer is the most common type of cancer in American women, other than skin cancer.³ Therefore, the odds may be against you if you don’t get yourself checked out. Just getting older increases your risk.

Some of the warning signs of breast cancer include:⁴

- A new lump in the breast or armpit
- Thickening or swelling of the breast
- Nipple discharge, other than breast milk, including blood
- Change in size or shape of the breast
- Pain in any area of the breast

4. I don’t know where to go for a mammogram.

Your doctor can give you some options of where you can conveniently get a mammogram. Your closest option might be at a military treatment facility or a local imaging center—sometimes these are called radiology centers. Always call ahead to make sure your mammography center is TRICARE-authorized.

TRICARE covers mammograms for women beginning at age 40. For those considered at high risk for breast cancer, TRICARE begins covering mammograms at age 35.

For more information about breast cancer prevention, visit www.triwest.com/breasthealth. ■

1. http://www.cdc.gov/cancer/breast/basic_info/mammograms.htm
2. http://ww5.komen.org/uploadedFiles/Content_Binaries/806-374a.pdf
3. http://www.cdc.gov/cancer/breast/basic_info/fast_facts.htm
4. http://www.cdc.gov/cancer/breast/basic_info/symptoms.htm

Time to Plan for Back-to-School Physicals

Before starting school this fall, your child may need to visit the doctor for a school physical. These annual physicals help make sure children start the school year in good health, with up-to-date immunizations. For children ages 5–11, TRICARE covers annual physicals and immunizations required for school enrollment.

TRICARE also covers well-child care for eligible children from birth until reaching age 6. The well-child benefit includes routine newborn care, comprehensive health-promotion and disease-prevention exams, vision and hearing screenings and routine immunizations and developmental assessments according to the American Academy of Pediatrics®. There are no copayments or cost-shares for well-child care.

Note: TRICARE does **not** cover sports or camp physicals. If your child needs a sports or camp physical, you may be required to submit a *TRICARE Beneficiary Liability Form (Waiver of Non-Covered Services)* to your health care provider. Completing this form shows that you know you will be paying for the non-covered service. The form is available on TriWest Healthcare Alliance’s website at www.triwest.com.

To learn more about TRICARE’s school-physical coverage, visit www.tricare.mil/backtoschool. ■

Six Ways to Manage Your Health Care on the Go

You can manage your family's health care without being parked in front of your computer all day. TriWest Healthcare Alliance (TriWest) has the mobile tools that let you get to your information whenever and wherever you need it. You have your phone with you—why not put it to work? Start by visiting www.triwest.com/gomobile and you can:

1. Find a provider, military treatment facility or urgent care facility near you.

The complete TRICARE West Region network provider directory is now combined with the military clinic finder and optimized for your phone or tablet. It can use your location to find the closest local TRICARE network providers. You can also search by location, name and specialty.

2. View specialty care referrals, authorizations and claims status.

Formatted to fit your phone, TriWest's mobile site at m.triwest.com lets you log in to your secure TriWest account to view your specialty care referrals, authorizations and medical claims.

3. Register for a secure account at www.triwest.com.

If you have not registered to get access to your health care information, register online from your desktop, laptop, phone or tablet.

4. Access preventive care and wellness tips for you and your family.

TRICARE covers recommended clinical preventive services at no cost, and TriWest wants to help you keep your family healthy. Learn more about your TRICARE benefit and pick up some healthy-living tips on the TriWest app for Android and iOS.



5. Manage your TRICARE coverage after a life-changing event like marriage, a new child or deployment.

Make sure you are taking the right steps with a new spouse, new child or new status with the TriWest app to avoid coverage or claims issues.

6. Pay your fee or premium.

Do you have a payment due? Leave the checkbook at home. Log in to the secure mobile website and make a one-time payment for your TRICARE Prime enrollment fee.

Bonus Tip: Save Time, Get Text Alerts

Choose to receive text QuickAlerts to be notified as soon as your referral, authorization or claim is processed or when a fee is due. Simply log in to your www.triwest.com account and go to your communications preferences. The text will have a link to view your referral information right on your phone (with an Internet connection). Then you can contact your provider and make your appointment. ■

TRICARE HealthMatters

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TRICARE

An Excellent Value

- Generous coverage
- Superior health care
- Decisions are health driven, not insurance driven
- High satisfaction with care
- Low out-of-pocket costs
- Easy access



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Fees Increase in 2013 for Most TRICARE Prime Retirees

TRICARE Prime-enrolled retirees should check their annual billing statement closely this year. A new TRICARE Prime annual fee went into effect last year for new enrollees. Existing enrollees will see an increase starting Oct. 1, 2012, for fiscal year 2013. Future annual fee increases will be based on the Cost-of-Living Adjustment (COLA) in effect for the calendar year.

Fees for survivors of active duty deceased sponsors and medically retired uniformed service members and their dependents will be frozen at the rate in effect when they were classified and enrolled. The fee will remain frozen as long as there is no break in TRICARE Prime enrollment. All new fees, cost-shares and copayments can be found at www.tricare.mil/costs. ■

Proof of Payment on Claims for Care Received Overseas

Beginning Sept. 1, 2012, all claims submitted for care received overseas must include proof of payment, which may include a receipt, canceled check, credit card statement or invoice from the provider that clearly states payment was received. This requirement applies to all TRICARE beneficiaries who receive medical care while living or traveling overseas. Claims for care received overseas should be filed with the TRICARE Overseas Program (TOP) claims processor, not the regional contractor for the region where you reside. If you have questions, contact the TOP Regional Call Center and select option 2 for claims. For contact information,

visit www.tricare.mil/contacts. For more information about proof-of-payment requirements, visit www.tricare.mil/claims.

TRICARE has extended the period in which TOP claims can be submitted. Overseas claims must be filed within three years of the date of service or within three years of the date of inpatient discharge. **Note:** This policy change applies only to care received outside of the United States and U.S. territories (American Samoa, Guam, the Northern Mariana Islands, Puerto Rico and the U.S. Virgin Islands). In the United States and U.S. territories, claims must be filed within one year of service or the date of inpatient discharge. ■

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