



TRICARE® Eligibility

General TRICARE eligibility information for sponsors and their family members

TRICARE is the Department of Defense’s worldwide health care program available to eligible beneficiaries from any of the seven uniformed services—the U.S. Army, U.S. Navy, U.S. Air Force, U.S. Marine Corps, U.S. Coast Guard, Commissioned Corps of the U.S. Public Health Service, and the National Oceanic and Atmospheric Administration. Eligibility for TRICARE is determined by the services and information is maintained in the Defense Enrollment Eligibility Reporting System (DEERS). Keeping your information up to date in DEERS is key to ensuring TRICARE eligibility for you and your family. All uniformed service sponsors (*active duty, National Guard and Reserve, and retirees*) should ensure that their military career status, family events (*e.g., marriage, divorce, birth, adoption*), and residential address are current in DEERS at all times. All beneficiaries must be registered in DEERS to show as eligible for TRICARE, except for newborns and newly adopted children, who should be registered in DEERS as soon as possible after birth or adoption to ensure continued TRICARE coverage. Your Social Security number (SSN) and the SSNs of each of your covered family members must be included in DEERS for TRICARE coverage to be reflected accurately. DEERS registration may be completed at uniformed services identification (ID) card-issuing facilities.

You have several options for updating and verifying your DEERS information:

| | |
|--|---|
| In Person¹ <i>(add a family member or update contact information)</i> | Visit a uniformed services identification card-issuing facility. <ul style="list-style-type: none"> • Find a facility near you at www.dmdc.osd.mil/rsl. • Call to verify location and business hours. |
| Phone² | 1-800-538-9552 1-866-363-2883 (TDD/TTY) |
| Fax² | 1-831-655-8317 |
| Mail² | Defense Manpower Data Center Support Office 400 Gigling Road Seaside, CA 93955-6771 |
| Online | Visit http://milconnect.dmdc.osd.mil to update contact information or sign up to receive benefit information by e-mail. |

1. Only sponsors (or a sponsor-appointed individual with valid power of attorney) can add a family member in DEERS. Family members age 18 or older may update their own contact information.
2. Use these methods to change contact information only.

This fact sheet is **not** all-inclusive. For additional information, please visit www.tricare.mil.

GENERAL ELIGIBILITY INFORMATION BY BENEFICIARY CATEGORY

| Service Member Status | Eligibility for TRICARE Benefits |
|---|---|
| <p>Active Duty Service Members (ADSMs) (includes National Guard and Reserve members called or ordered to active service for more than 30 consecutive days)</p> | <p>ADSMs include service members from any of the seven uniformed services: the U.S. Army, U.S. Navy, U.S. Air Force, U.S. Marine Corps, U.S. Coast Guard, Commissioned Corps of the U.S. Public Health Service, and the National Oceanic and Atmospheric Administration. Eligibility for TRICARE is determined by the services and information is maintained in the Defense Enrollment Eligibility Reporting System.</p> <p>Spouses and children of ADSMs are eligible for benefits as active duty family members (ADFM). For children, certain other provisions may apply:</p> <ul style="list-style-type: none"> • The sponsor’s children remain eligible even if parents divorce or remarry; however, the sponsor’s stepchildren lose their eligibility. • Children placed in the custody of an ADSM or former service member, either by a court or by a recognized adoption agency in anticipation of legal adoption by the member, may be eligible. <p>The sponsor’s children’s eligibility continues until reaching age 21 (or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provides over 50 percent of the financial support).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TRICARE Young Adult (TYA) program. For more information, visit www.tricare.mil/tya.</p> <p>Surviving spouses and surviving children continue to receive benefits after the sponsor’s death.</p> <ul style="list-style-type: none"> • Surviving spouses will have ADFM benefits and costs for three years after the sponsor’s death and, thereafter, at the retiree rate. Surviving spouses who have not remarried remain eligible (eligibility for surviving spouses who remarry cannot be regained later, even in the case of divorce or death of the new spouse). • Surviving unmarried children remain eligible with ADFM benefits and costs until reaching age 21 (or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program, but with deductibles, cost-shares, or copayments at the retiree rate. |
| <p>Retired Service Members²</p> | <p>Retired service members, their spouses, and their children are eligible for benefits and are responsible for paying any applicable enrollment fees, deductibles, cost-shares, or copayments at the retiree rate.</p> <p>For children, certain other provisions may apply:</p> <ul style="list-style-type: none"> • The sponsor’s children remain eligible even if parents divorce or remarry; however, the sponsor’s stepchildren lose their eligibility. • Children placed in the custody of a retired service member, either by a court or by a recognized adoption agency in anticipation of legal adoption by the member, may be eligible. • The sponsor’s children’s eligibility continues until reaching age 21 (or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provides over 50 percent of the financial support).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program. <p>Survivors of retirees remain eligible with the same TRICARE options and costs they had before the sponsor died.</p> <ul style="list-style-type: none"> • Surviving spouses who have not remarried remain eligible (eligibility for surviving spouses who remarry cannot be regained later, even in the case of divorce or death of the new spouse). • Surviving unmarried children remain eligible until reaching age 21 (or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program. |

1. Children with disabilities may remain TRICARE-eligible beyond the normal age limits. Check with the sponsor’s service for eligibility criteria.

2. Excludes members of the Retired Reserve who have not reached age 60, as well as their spouses and children.

GENERAL ELIGIBILITY INFORMATION BY BENEFICIARY CATEGORY *(continued)*

| Service Member Status | Eligibility for TRICARE Benefits |
|--|--|
| <p>Activated National Guard and Reserve Members</p> | <p>The National Guard and Reserve includes service members from the Army National Guard, Army Reserve, Navy Reserve, Air National Guard, Air Force Reserve, Marine Corps Reserve, and Coast Guard Reserve. Members called or ordered to active service for more than 30 consecutive days are covered as ADSMs, and their eligible family members are covered as ADFMs.¹ Members called or ordered to active service for 30 days or less (<i>including active duty training/drill, annual training, and individual duty training</i>) and their family members may qualify to continue or purchase coverage under TRICARE Reserve Select (TRS).</p> <p>Survivors of National Guard and Reserve sponsors who died while serving on active duty for a period of more than 30 consecutive days continue to receive benefits after the sponsor's death.</p> <ul style="list-style-type: none"> • Surviving spouses will have ADFM benefits and costs for three years after the sponsor's death and, thereafter, at the retiree rate. Surviving spouses who have not remarried remain eligible (<i>eligibility for surviving spouses who remarry cannot be regained later, even in the case of divorce or death of the new spouse</i>). • Surviving unmarried children remain eligible with ADFM benefits and costs until reaching age 21 (<i>or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support</i>).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program, but with deductibles, cost-shares, or copayments at the retiree rate. <p>Survivors of National Guard and Reserve sponsors who died while serving on active duty for a period of 30 days or less (<i>including active duty training/drill, annual training, and individual duty training</i>) receive benefits at the retiree rate.</p> <ul style="list-style-type: none"> • Surviving spouses who have not remarried remain eligible (<i>eligibility for surviving spouses who remarry cannot be regained later, even in the case of divorce or death of the new spouse</i>). • Surviving unmarried children remain eligible with retiree benefits and costs until reaching age 21 (<i>or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support</i>).¹ Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program. |
| <p>National Guard and Reserve Members Released from a Period of Activation of More than 30 Consecutive Days in Support of a Contingency Operation</p> | <p>National Guard and Reserve members may qualify for the Transitional Assistance Management Program (TAMP) following an activation period of more than 30 consecutive days. TAMP provides 180 days of transitional TRICARE coverage for eligible sponsors and their eligible family members. Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program.</p> <p>Qualifying sponsors may purchase Continued Health Care Benefit Program (CHCBP) coverage within 60 days of the end of TRICARE eligibility or TAMP coverage, whichever is later. Though not a TRICARE program, CHCBP provides up to 18 months of premium-based health coverage. Qualifying family members may be included in CHCBP family coverage purchased by their sponsors.</p> |

1. Early eligibility applies when the sponsor is called or ordered to active service in support of a contingency operation for more than 30 consecutive days. The sponsor and family members are eligible for TRICARE on the date the order was issued or 180 days before reporting to active duty, whichever is later. The service member's personnel office is solely responsible for establishing eligibility and notifying the sponsor.

2. Children with disabilities may remain TRICARE-eligible beyond the normal age limits. Check with the sponsor's service for eligibility criteria.

GENERAL ELIGIBILITY INFORMATION BY BENEFICIARY CATEGORY (*continued*)

| Service Member Status | Eligibility for TRICARE Benefits |
|---|--|
| Non-Activated National Guard and Reserve Members | <p>Non-Activated National Guard and Reserve members may qualify to purchase TRS coverage if they are both:</p> <ul style="list-style-type: none"> • Members of the Selected Reserve • Not eligible for, or enrolled in, the Federal Employees Health Benefits (FEHB) Program |
| | <p>Family members of National Guard and Reserve members qualify for comprehensive coverage if the sponsor purchases TRS member-and-family coverage. Former spouses do not qualify to purchase TRS. Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program.</p> |
| | <p>Survivors of Selected Reserve members may qualify to continue or purchase TRS coverage for up to six months from the date of the sponsor's death if all of the following apply:</p> <ul style="list-style-type: none"> • The deceased sponsor was covered by TRS on the date of his or her death • The survivors are currently immediate family members of the deceased sponsor (<i>spouses cannot have remarried</i>) <p>Note: Surviving family members who are eligible for or enrolled in the FEHB Program may purchase TRS. Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program.</p> |
| Retired Reserve Members | <p>Retired Reserve members may qualify to purchase TRICARE Retired Reserve (TRR) coverage if they are:</p> <ul style="list-style-type: none"> • Members of the Retired Reserve who qualify for non-regular retirement • Under age 60 • Not eligible for, or enrolled in, the FEHB Program |
| | <p>Family members of Retired Reserve members qualify for comprehensive coverage if the sponsor purchases TRR member-and-family coverage. Former spouses do not qualify to purchase TRR. Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program.</p> |
| | <p>Survivors of Retired Reserve members may qualify to continue or purchase TRR coverage until the day the sponsor would have turned 60 if all of the following apply:</p> <ul style="list-style-type: none"> • The deceased sponsor was covered by TRR on the date of his or her death • The survivors are immediate family members of the deceased sponsor (<i>spouses cannot have remarried</i>) • TRR coverage would begin before the date the deceased sponsor would have reached age 60 <p>Note: Surviving family members who are eligible for or enrolled in the FEHB Program may purchase TRR. Certain qualified dependents may extend TRICARE coverage until reaching age 26 with the premium-based TYA program.</p> |

Note: Medal of Honor recipients and their eligible family members (*including former spouses who have not remarried*) are eligible for TRICARE.

INFORMATION FOR OTHER BENEFICIARY CATEGORIES

If you or your family members fall into one of the beneficiary categories listed below, certain additional eligibility rules and limitations may apply.

| | |
|--|--|
| <p>Medicare-Eligible</p> | <p>If you are entitled to premium-free Medicare Part A:</p> <ul style="list-style-type: none"> • Medicare Part B coverage is required to remain TRICARE-eligible when you are a(n): <ul style="list-style-type: none"> • Retired service member (<i>including retired National Guard and Reserve members drawing retirement pay</i>) • Family member of a retired service member • Medal of Honor recipient or eligible family member • Survivor of a deceased sponsor • Eligible former spouse • Medicare Part B coverage is not required to keep your current TRICARE coverage if: <ul style="list-style-type: none"> • You are an active duty service member (ADSM) or active duty family member (ADFM) (<i>ADSMs and ADFMs remain eligible for TRICARE Prime or TRICARE Standard and TRICARE Extra options while the sponsor is on active duty; however, when the sponsor retires, you must have Medicare Part B to remain TRICARE-eligible</i>) • You are enrolled in TRICARE Reserve Select (TRS), TRICARE Retired Reserve (TRR), TRICARE Young Adult (TYA), or the US Family Health Plan (USFHP) (<i>while you are not required to have Medicare Part B to remain eligible for TRS, TRR, or USFHP, you are strongly encouraged to sign up for Medicare Part B when first eligible to avoid paying a premium surcharge if you enroll at a later date</i>) |
| <p>Dependent Parents and Parents-in-Law</p> | <ul style="list-style-type: none"> • Dependent parents and parents-in-law are eligible for care only in military hospitals and clinics and may enroll in TRICARE Plus based on space/resource availability. TRICARE Plus is a military hospital- and clinic-based primary care enrollment program that provides beneficiaries who are not enrolled in TRICARE Prime an opportunity to enroll with their local military hospitals and clinics and receive priority access to care. Enrollment in TRICARE Plus at one military hospital or clinic does not automatically extend TRICARE Plus enrollment to another military hospital or clinic. • Dependent parents and parents-in-law are not eligible for any other TRICARE programs. |
| <p>Eligible Former Spouses</p> | <p>To maintain eligibility, former spouses:</p> <ul style="list-style-type: none"> • Must not have remarried (<i>if a former spouse remarries, benefits are lost even if the remarriage ends in death or divorce</i>) • Must not be covered by an employer-sponsored health plan • Must not be the former spouse of a North Atlantic Treaty Organization or Partners for Peace nation member • Must meet the requirements listed in either Situation 1 or Situation 2 as follows: <ul style="list-style-type: none"> • Situation 1: The former spouse must have been married to the same service member or former member for at least 20 years, and at least 20 of those years must have been creditable in determining the member’s eligibility for retirement pay. If this requirement is met, the former spouse is eligible for TRICARE coverage after the date of the divorce, dissolution, or annulment. Eligibility continues as long as the preceding requirements continue to be met and the former spouse does not remarry. • Situation 2: The former spouse must have been married to the same service member or former member for at least 20 years, and at least 15—but less than 20—of those married years must have been creditable in determining the member’s eligibility for retirement pay. If this requirement is met, the former spouse is eligible for TRICARE coverage for only one year from the date of the divorce, dissolution, or annulment. <p>Note: Former spouses who remarry after age 55 and who were enrolled in the Continued Health Care Benefit Program (CHCBP) for the 18 months prior to the end of the marriage may still be eligible to continue coverage under CHCBP.</p> |

INFORMATION FOR OTHER BENEFICIARY CATEGORIES (*continued*)

| | |
|---|---|
| <p>Adult-Age Children</p> | <p>Children who age out of regular TRICARE coverage may qualify to purchase premium-based TYA. TYA offers TRICARE Prime and TRICARE Standard coverage worldwide. TYA includes medical and pharmacy benefits, but excludes dental coverage.</p> <p>You may generally purchase TYA coverage if you are all of the following:</p> <ul style="list-style-type: none"> • A dependent of a TRICARE-eligible sponsor • Unmarried • At least age 21 (<i>or age 23 if enrolled in a full-time course of study at an approved institution of higher learning and if the sponsor provided over 50 percent of the financial support</i>), but have not yet reached age 26 • Not eligible for or enrolled in employer-sponsored health care coverage • Not a uniformed service sponsor (<i>e.g., a member of the Selected Reserve</i>) <p>For more information, visit www.tricare.mil/tya.</p> |
| <p>Disabled Veteran, Family of a Disabled Veteran, or Former Spouse Who Lost TRICARE Eligibility</p> | <p>Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) is administered by the Department of Veterans Affairs (VA). Veterans may contact the VA toll-free at 1-800-827-1000 for information. Details on possible CHAMPVA eligibility for family members are available by calling the VA Health Administration Center toll-free at 1-800-733-8387 or visiting www.va.gov/purchasedcare and clicking “Programs for Dependents.”</p> <p>The following beneficiary categories may be eligible:</p> <ul style="list-style-type: none"> • Family members of veterans who have been rated permanently and totally disabled, or of veterans who died from a service-related disability, may be covered by CHAMPVA as long as they are not eligible for TRICARE. • Former spouses who, when they remarried, lost their TRICARE eligibility, and whose marriage ended in divorce or death, may also be entitled CHAMPVA. |
| <p>Disabled ADFM</p> | <p>TRICARE Extended Care Health Option (ECHO) provides supplemental health and non-health care services to ADFMs who qualify based on specific mental or physical disabilities. ECHO offers beneficiaries integrated services and supplies beyond those offered by your TRICARE program option (<i>e.g., TRICARE Prime, TRICARE Standard</i>). ADFMs must enroll in their service’s Exceptional Family Member Program (<i>unless waived in specific situations</i>) and register for ECHO with their regional contractors to be eligible for ECHO benefits. For additional information, visit www.tricare.mil/echo.</p> |

SPECIAL CIRCUMSTANCES FOR TRICARE ELIGIBILITY

Check with your local ID card-issuing facility or uniformed services personnel office about eligibility requirements for the following beneficiary categories:

- Certain family members of active duty service members who were discharged as a result of a court-martial conviction or separated for spouse or child abuse
- Certain abused spouses, former spouses, and dependent children of service members who were eligible for retirement, but whose retirement was revoked as a result of abuse of the spouse or child
- Spouses and children of representatives of the North Atlantic Treaty Organization and Partners for Peace nations that are signatories to the respective Status of Forces Agreements with the United States while stationed in or passing through the United States on official business; these family members are eligible for outpatient benefits only

For more information about TRICARE eligibility, beneficiaries may contact their local Beneficiary Counseling and Assistance Coordinator (BCAC). To find a BCAC near you, visit the Customer Service Community Directory at www.tricare.mil/bcacdcao. You may also find more information about eligibility online at www.tricare.mil.

YOUR TRICARE BENEFIT AND THE AFFORDABLE CARE ACT

The Affordable Care Act requires that individuals maintain health insurance or other health coverage that meets the definition of “minimum essential coverage.” The TRICARE program meets the minimum essential coverage requirement. Most people who do not meet this provision of the law will be required to pay a fee for each month they do not have adequate coverage. The fee will be collected each year with federal tax returns. For more information, visit www.tricare.mil/aca. You can also find other health care coverage options at www.healthcare.gov.

FOR INFORMATION AND ASSISTANCE

TRICARE eligibility is determined by the services. If you have questions or need more information regarding your TRICARE eligibility, contact your unit personnel office.

| | | |
|--|--|--|
| <p> TRICARE North Region Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) www.hnfs.com</p> | <p> TRICARE South Region Humana Military, a division of Humana Government Business 1-800-444-5445 HumanaMilitary.com</p> | <p> TRICARE West Region UnitedHealthcare Military & Veterans 1-877-988-WEST (1-877-988-9378) www.uhcmilitarywest.com</p> |
| <p> TRICARE Overseas Program (TOP) Regional Call Center—Eurasia-Africa¹ +44-20-8762-8384 (overseas) 1-877-678-1207 (stateside) tricarelon@internationalsos.com</p> | <p> TOP Regional Call Center—Latin America and Canada¹ +1-215-942-8393 (overseas) 1-877-451-8659 (stateside) tricarephl@internationalsos.com</p> | <p> TOP Regional Call Centers—Pacific¹ Singapore: +65-6339-2676 (overseas) 1-877-678-1208 (stateside) sin.tricare@internationalsos.com Sydney: +61-2-9273-2710 (overseas) 1-877-678-1209 (stateside) sydricare@internationalsos.com</p> |
| <p>TRICARE Reserve Select www.tricare.mil/trs</p> <p>TRICARE Retired Reserve www.tricare.mil/trr</p> | <p>TRICARE Young Adult www.tricare.mil/tya</p> | <p>TRICARE Extended Care Health Option www.tricare.mil/echo</p> |
| <p>Continued Health Care Benefit Program Humana Military 1-800-444-5445 www.tricare.mil/chcbp</p> | <p>Transitional Assistance Management Program www.tricare.mil/tamp</p> | <p>milConnect Web Site http://milconnect.dmdc.osd.mil</p> |

1. For toll-free contact information, visit www.tricare-overseas.com.

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. The TRICARE program meets the minimum essential coverage requirement under the Affordable Care Act.

TRICARE is a registered trademark of the Department of Defense, Defense Health Agency. All rights reserved.