

# TRICARE® Guiding the Claims Process



## TRICARE® Guiding the Claims Process

This brochure is **not** all-inclusive. For additional information, please contact your regional contractor, local military treatment facility, or overseas contractor.

In most cases, you will not need to file claims for health care services, but there may be times when you will need to pay up front and file a claim for reimbursement. You will be reimbursed for TRICARE-covered services at the TRICARE-allowable amount, less any copayments, cost-shares, and deductibles.

### Filing a Claim

In the United States and U.S. territories (*American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, and the U.S. Virgin Islands*), claims must be filed within one year from the date of service or date of inpatient discharge. Outside of the United States and U.S. territories, claims must be filed within three years. To file a claim, you must complete and sign a *TRICARE DoD/CHAMPUS Medical Claim—Patient's Request for Medical Payment* form (DD Form 2642), available at [www.tricare.mil/claims](http://www.tricare.mil/claims) or your regional contractor's Web site. Beneficiaries (*age 18 or older*), spouses, parents, or guardians may sign the initial claim form, though later forms (*needed to process a claim*) must be signed by the beneficiary (*or parent or guardian if child is under 18*). Attach a readable copy of the provider's itemized bill and include:

- Patient's name
- **Sponsor's** Social Security number (SSN) or Department of Defense Benefits Number (DBN) (*Eligible former spouses should use their own SSNs, not the sponsor's.*)
- Provider's name and address (*If more than one provider's name is on the bill, circle the name of the provider who performed the service for which the claim is filed.*)
- Date, place, description, and charge of each service
- Diagnosis (*If the diagnosis is not on the bill, complete block 8a on the form.*)

Send all claims, except TRICARE For Life (TFL) claims and claims for care received overseas, to the claims processor for the region in which you live.

### TRICARE For Life Claims

Wisconsin Physicians Service is the claims processor for all TFL claims for care received in the United States and U.S. territories, where Medicare is available. In most cases, your provider should file a claim with Medicare first. Medicare pays its portion and forwards the claim to TFL for processing, unless you have other health insurance (OHI). If you have OHI, after Medicare has processed the claim and paid its portion, Medicare will forward the claim to your OHI. If there is a remaining balance after your OHI has processed the claim, you will need to submit the *Medicare Summary Notice* along with the OHI explanation of benefits (EOB) and the *DD Form 2642* for payment. Use *DD Form 2642* if filing a TFL claim yourself.

Medicare does not provide coverage outside of the United States and U.S. territories. Therefore, TFL is your primary payer for health care received overseas (*except U.S. territories*), unless you have OHI. TFL provides the same coverage as TRICARE Standard and has the same cost-shares and deductibles for beneficiaries who live or travel overseas. Submit claims directly to the overseas claims processing address for the region where you received care.

### TRICARE Overseas Claims

If you live in the United States and receive care overseas, be prepared to pay up front for services, then file a claim with the TRICARE Overseas Program (TOP) claims processor. If you live overseas, you will file claims with your TOP claims processor regardless of where you receive care.



All beneficiary-submitted claims for care received overseas must include proof of payment. Submit proof of payment, along with the *DD Form 2642*, to the TOP claims processor. When submitting your *DD Form 2642*, include one of the following, as applicable:

- An itemized bill or invoice
- A diagnosis describing why you received medical care
- An EOB from your OHI

A canceled check or credit card receipt showing payment for medical supplies or services often satisfies the proof-of-payment requirement. If you paid for care or supplies in cash, TRICARE may ask for proof-of-cash withdrawal from your bank or credit union along with a receipt from your provider.

To help facilitate claims processing, write at the top of *DD Form 2642* if payment was made directly to the provider. **Note:** After submitting the documents listed, you may be asked for additional documentation. Call your TOP Regional Call Center and select option 2 for claims assistance. For more information about the overseas claims process, visit [www.tricare.mil/claims](http://www.tricare.mil/claims).

## Coordinating Claims with OHI

Keep your regional contractor and health care providers informed about your OHI so they can better coordinate your benefits and prevent claim-payment delays (*or denials*). Visit your regional contractor's Web site to update your OHI information. Follow your OHI's rules for filing claims first. If there is a billed amount your OHI does not cover, you can file a claim with TRICARE. After your OHI pays its portion, submit a copy of your EOB and a copy of the itemized bill with your TRICARE claim. For additional OHI information, visit [www.tricare.mil/ohi](http://www.tricare.mil/ohi). **Note:** TRICARE is the last payer to all health care benefits and insurance plans, except for Medicaid, TRICARE supplements, the Indian Health Service, and other programs and plans identified by the TRICARE Management Activity. National health insurance programs overseas are considered OHI.

## Filing an Appeal

You may appeal the denial of a requested authorization of services, as well as TRICARE decisions regarding claims payments, by submitting an appeal to your regional contractor. For additional information, visit [www.tricare.mil/appeals](http://www.tricare.mil/appeals).

## For Information and Assistance

Claims addresses are included below. Claims forms are available from your contractor's Web site or [www.tricare.mil/claims](http://www.tricare.mil/claims).

<p><b>TRICARE North Region</b> Health Net Federal Services, LLC 1-877-TRICARE (1-877-874-2273) <a href="http://www.hnfs.com">www.hnfs.com</a> (<i>general information</i>) <a href="http://www.myTRICARE.com">www.myTRICARE.com</a> (<i>claims</i>) Health Net Federal Services, LLC c/o PGBA, LLC/TRICARE P.O. Box 870140 Surfside Beach, SC 29587-9740</p>	<p><b>TRICARE South Region</b> Humana Military Healthcare Services, Inc. 1-800-444-5445 <a href="http://Humana-Military.com">Humana-Military.com</a> (<i>general information</i>) <a href="http://www.myTRICARE.com">www.myTRICARE.com</a> (<i>claims</i>) TRICARE South Region Claims Department P.O. Box 7031 Camden, SC 29020-7031</p>	<p><b>TRICARE West Region</b> TriWest Healthcare Alliance 1-888-TRIWEST (1-888-874-9378) <a href="http://TriWest.com">TriWest.com</a> (<i>general information and claims</i>) West Region Claims P.O. Box 77028 Madison, WI 53707-1028</p>
<p><b>TRICARE Overseas Program (TOP) Regional Call Center—Eurasia-Africa<sup>1</sup></b> +44-20-8762-8384 (<i>overseas</i>) 1-877-678-1207 (<i>stateside</i>) <a href="mailto:tricarelon@internationalsos.com">tricarelon@internationalsos.com</a> TRICARE Overseas Program P.O. Box 8976 Madison, WI 53708-8976 USA</p>	<p><b>TOP Regional Call Center—Latin America and Canada<sup>1</sup></b> +1-215-942-8393 (<i>overseas</i>) 1-877-451-8659 (<i>stateside</i>) <a href="mailto:tricarephl@internationalsos.com">tricarephl@internationalsos.com</a> TRICARE Overseas Program P.O. Box 7985 Madison, WI 53707-7985 USA</p>	<p><b>TOP Regional Call Center—Pacific<sup>1</sup></b> Singapore: +65-6339-2676 (<i>overseas</i>) 1-877-678-1208 (<i>stateside</i>) <a href="mailto:sin.tricare@internationalsos.com">sin.tricare@internationalsos.com</a> Sydney: +61-2-9273-2710 (<i>overseas</i>) 1-877-678-1209 (<i>stateside</i>) <a href="mailto:sydricare@internationalsos.com">sydricare@internationalsos.com</a> TRICARE Overseas Program P.O. Box 7985 Madison, WI 53707-7985 USA</p>
<p><b>TRICARE Active Duty Claims Overseas</b> (<i>All regions</i>) <a href="http://www.tricare-overseas.com">www.tricare-overseas.com</a> TRICARE Active Duty Claims P.O. Box 7968 Madison, WI 53707-7968</p>	<p><b>TRICARE For Life (TFL)</b> (<i>United States and U.S. territories</i>) 1-866-773-0404 1-866-773-0405 (<i>TDD/TTY</i>) <a href="http://www.TRICARE4u.com">www.TRICARE4u.com</a> WPS TRICARE For Life P.O. Box 7890 Madison, WI 53707-7890</p>	<p><b>TRICARE Web Site</b> <a href="http://www.tricare.mil">www.tricare.mil</a></p>

1. For toll-free contact information, visit [www.tricare-overseas.com](http://www.tricare-overseas.com).

### 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 product.** For the most recent information, contact your TRICARE regional contractor, TRICARE Service Center, or local military treatment facility.

"TRICARE" is a registered trademark of the TRICARE Management Activity. All rights reserved.