



TRICARE Reserve Select Frequently Asked Questions

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1. What is TRICARE Reserve Select?

TRICARE Reserve Select is a premium-based TRICARE health care plan, similar to TRICARE Standard, offered for purchase to certain Reserve Component members and their families. It provides continued access to TRICARE and will be available by April 26, 2005.

2. Who is covered?

Reserve Component members may be eligible to purchase TRICARE Reserve Select for themselves and their immediate family members if they were called or ordered to active duty under Title 10 in support of a contingency operation for more than 30 consecutive days on or after 9/11 (September 11, 2001), and served continuously for 90 days or more. They also must enter into a Service Agreement through the Guard Reserve Portal at <https://www.dmdc.osd.mil/Guard-ReservePortal> to serve in the Selected Reserves for one or more whole years. Then they must follow up with their Service/Reserve Component to execute (complete) the Service Agreement on a DD Form 2895.

3. How do I verify TRICARE Reserve Select enrollment?

After purchasing TRICARE Reserve Select, each member receives a TRICARE Reserve Select card. This card must be presented to you before the beneficiary receives care. You may ask the TRICARE Reserve Select member to present a photo ID, such as a driver's license, to verify the cardholder's name. It is recommended that you make a photocopy of the member's TRICARE Reserve Select card and retain a copy in the member's file.



TRICARE Reserve Select Card

You may also contact TriWest through the TRICARE Reserve Select toll-free customer service number at 1-888-TRIWEST (1-888-874-9378) to verify enrollment status.

4. What is covered under TRICARE Reserve Select?

Individuals who purchase TRICARE Reserve Select receive comprehensive coverage similar to the coverage available through TRICARE Standard and TRICARE Extra for active duty family members, including such TRICARE-covered services as:

- Routine, urgent and emergency care, including ambulance services
- Family health care
- Obstetrics, gynecology, and maternity services
- Clinical preventive services, including health screening and immunizations
- Behavioral health care, including partial hospitalization and residential treatment
- Annual eye examinations
- Durable medical equipment (DME) and supplies
- Ancillary services, such as laboratory and radiology
- Prescription drug coverage

This list of covered services is not all inclusive. Refer to the TRICARE Reserve Select Handbook on the TRICARE Web site at www.tricare.osd.mil/reserve/reserveselect, the TRICARE Provider Handbook, or TriWest's Web site at www.triwest.com for more information about coverage offered by TRICARE Reserve Select.

5. Where may TRICARE Reserve Select members receive care?

TRICARE Reserve Select members may access care from any TRICARE network or non-network TRICARE-certified provider. TRICARE Reserve Select members may also receive care at military treatment facilities (MTFs) on a space-available basis only.

6. What pharmacy services are available?

TRICARE Reserve Select members may fill prescription medications through the TRICARE Mail Order Pharmacy (TMOP) program, at TRICARE retail network and non-network pharmacies, or at military treatment facilities (MTFs). MTF pharmacies will accept written prescriptions from any TRICARE-certified provider.

7. What services under TRICARE Reserve Select require prior authorization?

Referrals are not required; however, you should refer to the TriWest Medical Necessity Review list at www.triwest.com for services requiring prior authorization.

See Section 7: Health Care Management and Administration in the TRICARE Provider Handbook for more information. TRICARE Reserve Select prior authorization requirements mirror TRICARE Standard beneficiary requirements.

You may also contact TriWest at 1-888-TRIWEST (1-888-874-9378) or visit www.triwest.com for assistance with submitting and receiving authorization before rendering care.

8. Where do network providers submit claims?

Claims must be filed with WPS on behalf of TRICARE Reserve Select members.

Network providers are required to submit TRICARE claims electronically.

See Section 8: Claims Processing and Billing Information in the TRICARE Provider Handbook or visit www.triwest.com for details about filing claims.

9. Where do non-network providers submit claims?

It is urged, but not required, that claims be filed on behalf of TRICARE Reserve Select members. You are encouraged to submit TRICARE claims electronically. Visit the TriWest Web site at www.triwest.com for more information.

The address for submitting TRICARE Reserve Select paper claims is:

West Region Claims
P.O. Box 77028
Madison, WI 53707-7028

See Section 8: Claims Processing and Billing Information in the TRICARE Provider Handbook or visit www.triwest.com for details about filing claims.

10. How will network providers be reimbursed for their services?

Claims are filed and reimbursed in the same manner as other TRICARE claims. For most care, TRICARE Reserve Select members will pay 15 percent of the negotiated fee for covered services, and you will receive a reimbursement from TRICARE for the remaining amount of the negotiated fee.

11. How will non-network providers be reimbursed for their services?

When filing claims on behalf of members, participating providers receive 80 percent of the covered “allowed” reimbursement from TRICARE and the 20 percent cost-share of the “allowed” reimbursement from the beneficiary. If a non-network provider does not file the claim, members file their own claims with TRICARE for reimbursement and then pay the non-network provider.

12. What are the costs for TRICARE Reserve Select?

TRICARE Standard and TRICARE Extra cost-shares, deductibles, and catastrophic caps applicable for active duty family members shall be followed for all individuals (including TRICARE Reserve Select members) covered under TRICARE Reserve Select. In addition, beneficiaries pay a monthly premium to TRICARE to remain enrolled in the program.

13. Whom shall I contact if I experience billing problems?

Contact TriWest at 1-888-TRIWEST (1-888-874-9378) or visit www.triwest.com for questions regarding claims.

14. Where do I direct questions?

You may contact TriWest at 1-888-TRIWEST (1-888-874-9378) or visit www.triwest.com if you have questions or need additional information about TRICARE Reserve Select.