

TRICARE Prime Enrollment Portability

Revision:

1.0 The term “contractor” applies to Uniformed Services Family Health Plan (USFHP) Designated Providers (DPs) as well as to the Managed Care Support (MCS) and TRICARE Overseas Program (TOP) contractors for purposes of enrollment portability.

1.1 TRICARE Prime enrollees retain Prime coverage whenever they move or travel. Enrollment portability provisions apply to TRICARE Prime enrollees’ travel or relocation to or from all areas, where TRICARE Prime is available. The contractor for the region in which the beneficiary is enrolled on Defense Enrollment Eligibility Reporting System (DEERS) is responsible for providing continuing coverage and updating catastrophic cap accumulations for the enrollee while the enrollee is traveling or relocating, except in the case of care provided overseas (i.e., care outside of the 50 United States (U.S.) and the District of Columbia). Civilian Health Care (CHC) while traveling or visiting overseas shall be processed by the TRICARE Overseas Program (TOP) contractor, regardless of where the beneficiary resides or is enrolled.

1.2 A Prime enrollee may transfer enrollment before or after moving either temporarily or permanently to a new location using any of the enrollment options in [Chapter 6, Section 1, paragraph 1.0](#). The losing contractor shall continue to provide health care coverage until the enrollment is transferred to the gaining contractor, the beneficiary is no longer eligible for enrollment in Prime, the beneficiary disenrolls, or the beneficiary is disenrolled due to failure to pay required enrollment fees, whichever occurs first. Referral and authorization rules continue to apply. Primary Care Manager (PCM) referrals are required for non-emergency, specialty, or inpatient care (see [32 CFR 199.17\(n\)\(2\)](#)). Claims for non-emergency care without a referral shall be processed under the Point of Service (POS) option. Under no circumstances will retroactive disenrollment be allowed in order to avoid POS cost-sharing provisions. Even though a Prime enrollee who is relocating must request a referral for non-emergency care from the losing contractor, the enrollee shall not be required to use a network provider, and the contractor shall ensure that the relocating TRICARE Prime enrollee’s copayment is applied correctly to claims for authorized care.

1.2.1 On the day the gaining contractor receives either a TRICARE Prime beneficiary’s signed enrollment form, telephone portability request, or a request via the Government furnished web-based self-service enrollment system/application agreeing to a transfer of enrollment to the new region, the beneficiary shall be considered enrolled at the new location and should contact the new PCM, the new region’s Health Care Finder (HCF), or the DP for health care and health related assistance. For enrollment requests received via the Government furnished web-based self-service enrollment system/application, the contractor shall modify the effective date to be the date the enrollment was submitted, except when the “20th of the month rule” applies.

TRICARE Operations Manual 6010.59-M, April 1, 2015

Chapter 6, Section 2

TRICARE Prime Enrollment Portability

1.2.2 The effective date for transfer of enrollment differs from the effective date for initial enrollment. See [Section 1, paragraph 4.1](#) for information on initial enrollment in TRICARE Prime. For transfers, the original enrollment period on DEERS will remain in effect.

1.3 Within four calendar days of receipt of a beneficiary's request for enrollment transfer, the gaining contractor shall submit the transfer of enrollment to DEERS using the Government-furnished systems application. The effective date of the transfer shall be the day the gaining contractor received the enrollment request. Upon acceptance of the transfer of enrollment, DEERS will automatically notify the losing contractor of the change. An official enrollment request includes those with:

- An enrollment form with an original signature;
- An electronic signature offered by and collected by the contractor; or
- A verbal consent provided via telephone and documented in the contractor's call notes; or
- A self-attestation by the beneficiary when using the Government furnished web-based self-service enrollment system/application. For enrollment requests received via the Government furnished web-based self-service enrollment system/application, the contractor shall modify the effective date to be the date the enrollment was submitted, except when the 20th of the month rule applies.

1.4 When TRICARE Prime enrollment changes from one contractor to another prior to the annual renewal for enrollees in beneficiary categories required to pay enrollment fees the gaining contractor shall obtain information from the losing contractor on fees that are being paid monthly (i.e., by allotment or Electronic Funds Transfer (EFT)) and transition these monthly payment types in the least disruptive manner for the beneficiary. If the enrollee relocates to an area where TRICARE Prime is not offered, there shall be no refund of the unused portion of the enrollment fee.

1.4.1 Enrollees in the following categories who are relocating to an area served by a different contractor shall be allowed two "out-of-contract" enrollment transfers (refer to [Appendix A, Definitions](#)) per enrollment year:

- TRICARE Prime enrollees in beneficiary categories required to pay enrollment fees (e.g., retirees, retiree family members); and
- TRICARE/Medicare eligible enrollees who are not Active Duty Family Members (ADFM). (Note: The enrollment fee is waived for those beneficiaries who are eligible for Medicare on the basis of disability or End Stage Renal Disease (ESRD) and who maintain enrollment in Part B of Medicare.)

1.4.2 "Within-contract" enrollment transfers are not limited.

1.5 TRICARE Prime DP enrollees who are not TRICARE-eligible may only transfer enrollment from one DP to another DP; they may not transfer to a MCS contractor.

1.6 A TRICARE-eligible Prime enrollee who is not relocating may either transfer enrollment from a MCS contractor to a DP or from a DP to a MCS contractor under the rules of this section. However, such

TRICARE Operations Manual 6010.59-M, April 1, 2015

Chapter 6, Section 2

TRICARE Prime Enrollment Portability

transfers are allowed only once during an enrollment period and no transfer back to the other plan during that enrollment period is permitted.

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