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TRICARE
MANAGEMENT ACTIVITY

MB&RB

**CHANGE 159
6010.54-M
JUNE 7, 2012**

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE POLICY MANUAL (TPM), AUGUST 2002**

The TRICARE Management Activity has authorized the following addition(s)/revision(s).

CHANGE TITLE: MAIL DELIVERY QUALITY CODE (MDQC)

CONREQ: 15805

PAGE CHANGE(S): See page 2.

SUMMARY OF CHANGE(S): This change revises the referenced Manuals to require use of the Mail Delivery Quality Code (MDQC) when processing returned mail or verifying addresses. An updated MDQC will prevent mailings to the beneficiary such as enrollment cards and letters. The MDQC field automatically resets whenever the address is updated.

EFFECTIVE AND IMPLEMENTATION DATE: Upon direction of the Contracting Officer.

This change is made in conjunction with Aug 2002 TOM, Change No. 142 and Aug 2002 TSM, Change No. 97.

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Chief, Medical Benefits and
Reimbursement Branch**

**ATTACHMENT(S): 4 PAGE(S)
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Care Plan (e.g., Prime, Standard, etc.) shall continue until such time it is changed by the beneficiary.

b. In Survivor status shall have their Transitional Survivor status reinstated and shall remain in Transitional Survivor status in accordance with [paragraph III.B](#). The Health Care Plan (e.g., Prime, Standard, etc.) that the beneficiary was in as a Survivor shall continue to apply and will be carried over when the status is changed to Transitional Survivor until such time the beneficiary elects to choose another plan.

c. In Survivor status and who have since lost TRICARE eligibility shall have their Transitional Survivor status end date changed to the date they lost eligibility for TRICARE. The Health Care Plan (e.g., Prime, Standard, etc.) that the beneficiary was in as a Survivor shall also be applied to the period of Transitional Survivor status.

2. Refunds - General.

a. The contractor shall process refunds of enrollment fees proactively.

b. The contractor shall reprocess claims either based on proactive contact with the beneficiary, upon the beneficiary's request, or when contacted by a beneficiary's parent or legal guardian.

c. The contractor shall confirm the beneficiary's mailing address before mailing any refunds. **If the contractor uses DEERS to determine an address and it is determined that the mailing address is invalid, it shall not be used. Invalid addresses are noted by an updated Mail Delivery Quality Code (MDQC), which indicates that mail is undeliverable to that address. See the TRICARE Systems Manual (TSM), Chapter 3, Section 1.5, paragraph 1.3.1., Addresses.**

d. A letter will be sent to beneficiaries affected by changes found in Section 715, NDAA FY 2006. The letter will advise them of the extended Transitional Survivor time frames and will direct them to contact the contractor for further information. Once contacted by the beneficiary or beneficiary's parent or legal guardian, the contractor shall assist the beneficiary with actions necessary in order to correctly reprocess claims in accordance with this policy.

3. Refunds - Enrollment Fees.

a. Upon contact by a beneficiary, beneficiary's parent, or legal guardian or when the contractor initiates contact with those due a refund of enrollment fees, the contractor shall issue an enrollment fee refund for all individuals described in [paragraphs III.C.1.b.](#) and [c.](#)

b. Since the Prime Health Care Delivery **Program** (HCDP) that the beneficiary was in during the Survivor status shall be carried over and applied during the Transitional Survivor status, refunds are necessary. Refunds shall be:

(1) The difference between Prime enrollment fee for family versus Prime enrollment fee for individual (if a spouse was enrolled); or

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(2) Refund of all applicable enrollment fees (if a spouse was not enrolled).

c. The contractor shall include a written explanation, with any applicable refund of enrollment fees.

4. Refunds - Claims.

a. The contractor shall reprocess claims and issue refunds to the family for those individuals described in [paragraphs III.C.1.b.](#) and [c.](#) Since the HCDP (e.g., Prime, Standard, etc.) that the beneficiary was in as a Survivor shall be carried over and applied during the Transitional Survivor status, refunds shall be the difference between any retiree payment rates the beneficiary may have paid and the active duty payment rates that now apply. For example, those Survivors who were in TRICARE Standard and had paid retiree cost-shares for covered care may now be entitled to refunds of the difference between Standard retiree cost-shares and active duty dependent cost-shares.

b. Waiver of timely filing. [32 CFR 199.7\(d\)\(2\)\(i\)\(A\)](#) permits an exception for the timely filing waiver of claims in the event of retroactive eligibility. Consequently, timely filing waivers apply to those whose status is changed from Survivor to Transitional Survivor.

5. Refunds - PFPWD/ECHO.

a. Upon request, contractors shall reprocess Survivor Basic Program claims that otherwise would have been processed as Program For Persons With Disabilities (PFPWD) claims had Transitional Survivor status been in effect at the time the benefit was received and will issue appropriate refunds.

b. Upon request, contractors shall reprocess denied Survivor Basic Program claims that otherwise would have been processed as PFPWD claims had Transitional Survivor status been in effect at the time the benefit was received and will issue appropriate refunds.

c. The contractor shall assist those Transitional Survivors who are otherwise eligible for the Extended Care Health Option (ECHO) to register in ECHO. Contractors will also reprocess claims for services or items that were previously denied and claims for services or items that were not previously submitted because the beneficiary was not eligible for ECHO due to his/her Survivor status at the time such services or items were received by the beneficiary.

d. For the purpose of [paragraphs III.C.5.a., b., and c.](#) contractors shall waive the requirement for prior authorization of a PFPWD benefit and the requirement for the "Public Facility Use Certification." For the purpose of [paragraph III.C.5.c.](#), contractors shall waive the ECHO requirement that the beneficiary demonstrate enrollment in the Exceptional Family Member Program (EFMP).

e. Claims processing under [paragraphs III.C.5.a., b., and c.](#), shall be done in accordance with the claims adjustment policies in effect at the time the claim was originally processed. In no case will reprocessing result in a greater cost share to the sponsor/beneficiary than what was determined when the claims were originally processed.

D. Prime Enrollment.

1. Transitional Survivors shall retain eligibility to enroll in TRICARE Prime, TRICARE Prime Remote Active Duty Family Member (TPRADFM), and TRICARE Overseas Program (TOP) Prime at the ADFM payment rate and shall receive the ADFM health care benefit. For Overseas enrollments, see [Chapter 12, Section 3.1](#).

2. Survivors are eligible to enroll in TRICARE Prime at retiree payment rates. TPRADFM, and TOP Prime are not available to Survivors and Survivors are covered by TRICARE Standard.

3. Prime enrollment rules and policies found in [Chapter 10, Section 2.1](#) and [Chapter 12](#) shall apply.

E. Benefits.

1. Transitional Survivors receive the same TRICARE benefits that are available to ADFMs subject to any exclusions. This includes those TRICARE benefits that are restricted to ADFMs such as, but not limited to, hearing aids and eye examinations.

2. Survivors receive the same TRICARE benefits that are available to retirees.

F. ECHO.

1. Transitional Survivors may register in the ECHO program subject to all ECHO rules and policies. See [Chapter 9, Section 2.1](#) for further information on ECHO eligibility.

2. Survivors are excluded from the ECHO registration. This is because the ECHO is not available to retirees and Survivors are treated as retirees.

G. Payment Rates (e.g., catastrophic cap, cost-shares, copayments, deductibles, etc.).

1. Transitional Survivors. Payment rates are the same as ADFM payment rates for their respective health care plan (Standard, Extra, Prime, TPRADFM, etc.). See [Chapter 12, Section 2.3](#), and the TRICARE Reimbursement Manual (TRM), Chapter 2, [Sections 1](#) and [2](#).

2. Survivors. Payment rates are the same as retiree payment rates for their respective health care plan (Standard, Extra, Prime, etc.). See [Chapter 12, Section 2.3](#), and the TRM, Chapter 2, [Sections 1](#) and [2](#).

IV. LIMITATION

TRICARE Dental Program (TDP) which has its own statutory provision regarding Transitional Survivors and is found at 10 U.S.C. 1076a(k). The TDP has a three year Transitional Survivor benefit.

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V. EFFECTIVE DATE

With respect to deaths that occur on or after October 7, 2001.

- END -