



Young Adult Program

TRICARE Young Adult (TYA) is a premium-based program offering TRICARE Standard/Extra and Prime/USFHP coverage.

Eligibility

- Unmarried dependent child of an eligible sponsor:
 - Active duty service member
 - Activated Selected Reserve member
 - Retired service member
 - Not eligible for Prime overseas
 - Inactive Selected Reserve member
 - Sponsor must be enrolled in TRICARE Reserve Select
 - Not eligible for Prime/USFHP
 - Retired Reserve member
 - Sponsor must be enrolled in TRICARE Retired Reserve
 - Not eligible for Prime/USFHP
- At least age 21 (23 if full-time student with 50% sponsor financial support), but not yet age 26
- Not eligible for an employer-sponsored health plan
- Not otherwise eligible for TRICARE coverage (such as children with disabilities who retain TRICARE eligibility into adulthood)

Purchasing

- Must be registered in DEERS
- The application is available at www.tricare/mil/tya
- Take the application and initial premium payment (3 months of premiums) to a TRICARE Service Center, or mail or fax it to the North Region contractor:
 - Health Net Federal Services, LLC
 - P.O. Box 870162
 - Surfside Beach, SC 29587-9762
 - Fax: 1-888-745-1545
- Premium payment methods:
 - Initial—personal check, cashier's check, money order, or credit/debit card
 - Monthly—automated payment

Enrollment

- After the application is received and processed, the child will receive a TYA enrollment card in the mail. The child must then visit an ID card office - either with the sponsor, or with a completed and notarized DD Form 1172 signed by the sponsor - to get a new uniformed services ID card
 - Bring the TYA enrollment card and two other forms of identification, including one unexpired government-issued picture ID card
 - To find an ID card office near you, visit the Rapids Site Locator at: www.dmdc.osd.mil/rsl
 - To schedule an appointment at an ID card office, visit: <https://rapids-appointments.dmdc.osd.mil/>
 - TRICARE Standard/Extra coverage will begin the first day of the month after the enrollment is complete
 - TRICARE Prime/USFHP coverage will begin based on the 20th-of-the-month rule - if the application is received by the 20th of the month, enrollment is effective the first of the following month

Ending TYA Coverage

- Voluntary termination—will result in a 1 year lock-out from purchasing TYA coverage
- Non-payment of monthly premium
 - Payment due no later than the last day of the month for the next month's coverage
 - Non-payment will result in 1 year lock-out
- Change in status
 - Reach age 26
 - Get married
 - Become eligible for an employer-sponsored health plan
 - If eligibility for an employer-sponsored plan is subsequently lost, eligibility for TYA may be reinstated (lock-out does not apply)
 - Become eligible for other TRICARE coverage
 - Sponsor ends or loses eligibility for TRICARE

See other side for covered services and costs

NMCP Health Benefits

Building 3, 3rd Floor; Mon-Fri, 7 a.m.—3:30 p.m.
(757) 953-2610/2611

NMCP TRICARE Service Center

Health Net Federal Services
Building 249 (next to parking garage)
Mon—Fri, 7:30 a.m.—4:30 p.m.
1-(877) 874-2273



Appointments & Specialty Referral Status

Hampton Roads Appointment Center
Mon—Fri, 6 a.m.—8 p.m.
S, S & Holidays, 7 a.m.—3:30 p.m.
1-(866) 645-4584

To Schedule a Presentation

TRICARE Operations—Marketing
(757) 953-6153/6048

TRICARE Young Adult Program

Option	Prime/USFHP	Extra	Standard
Program Type	HMO—Managed Care	Preferred Provider	Fee-for-Service
Monthly Premium*	\$201	\$176	
Annual** Outpatient Deductible	None (except for the Point-of-Service option)	Active/Reserve Sponsor E-4 & below: \$50 individual/\$100 family Active/Reserve Sponsor E-5 & above: \$150 individual/\$300 family Retired Sponsor: \$150 individual/\$300 family	
Annual** Point-of-Service Outpatient Deductible*	\$300 individual \$600 family	N/A	
Point-of-Service Cost Share*	50%	N/A	
Providers	TRICARE Authorized Military or Network	TRICARE Authorized Network	TRICARE Authorized Non-Network
Office Visit Co-Pay Active/Reserve Sponsor	\$0	15%	20%
Office Visit Co-Pay Retired Sponsor	\$12	20%	25%
ER Services Co-Pay Active/Reserve Sponsor	\$0	15%	20%
ER Services Co-Pay Retired Sponsor	\$30	20%	25%
Hospitalization Active/Reserve Sponsor	\$0	\$17.05/day (\$25 minimum charge)	
Hospitalization Retired Sponsor	\$11/day (\$25 minimum charge)	\$250/day or 25% (20% additional services)	\$708/day or 25% (25% additional services)
Claims	Provider files		Provider may file
Balance Bill Above TRICARE-Allowable	No		Non-participating—up to 15%**
Referrals & Authorizations	Required for most specialty services	Pre-authorization required for certain services	
Annual* Catastrophic Cap	Active/Reserve Sponsor: \$1000/family Retired Sponsor: \$3000/family		

Notes

* Monthly premiums, point-of-service & balance billing charges do not apply towards the deductible or catastrophic cap

** Annual—Fiscal Year (October 1—September 30)

This list is not all-inclusive—for more information, visit www.tricare.mil

Pharmacy	Formulary Medications		Tier 3—Non-formulary
	Tier 1—Generic	Tier 2—Brand Name	
Military (up to 90 days)	\$0	\$0	N/A
Mail Order (up to 90 days)	\$0	\$9	\$25
Retail Network (up to 30 days)	\$5	\$12	\$25
Retail Non-network (up to 30 days)	Non-Prime: \$12 or 20%, after deductible is met		Non-Prime: \$25 or 20%, after deductible is met
	Prime: 50%, after Point Of Service deductible is met		