

Administration-Proposed TRICARE Fee Increases for FY2013-17

TRICARE Prime for Retired Beneficiaries Under Age 65 (Family Rate)*

<u>Retired Pay**</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>	<u>FY2017***</u>
\$0-22,589	\$520	\$600	\$680	\$760	\$850	\$893
\$22,590- \$45,178	\$520	\$720	\$920	\$1,185	\$1,450	\$1,523
\$45,179 or more	\$520	\$820	\$1,120	\$1,535	\$1,950	\$2,048

*Single rate is 50% of family rate

** Retired pay thresholds to be indexed to COLA increases

*** Fees for FY18 and outyears to be indexed to health cost inflation

TRICARE Standard for Retired Beneficiaries Under Age 65 (Family Rate)*

<u>Enrollment Fee</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>	<u>FY2017**</u>
	\$0	\$140	\$170	\$200	\$230	\$250
<u>Deductible</u>	\$300	\$320	\$400	\$460	\$520	\$580

*Single rate is 50% of family rate

** Fees for FY18 and outyears to be indexed to health cost inflation

TRICARE-for-Life Annual Enrollment Fee (Per Individual)

<u>Retired Pay*</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>	<u>FY2017**</u>
\$0-22,589	\$0	\$35	\$75	\$115	\$150	\$158
\$22,590- \$45,178	\$0	\$75	\$150	\$225	\$300	\$317
\$45,179 or more	\$0	\$115	\$225	\$335	\$450	\$475

** Retired pay thresholds to be indexed to COLA increases

*** Fees for FY18 and outyears to be indexed to health cost inflation

<u>Pharmacy Copays</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>	<u>FY2017</u>
Retail (1 mo fill)						
Generic	\$5	\$5	\$6	\$7	\$8	\$9
Brand	\$12	\$26	\$28	\$30	\$32	\$34
Non-Formulary*	\$25	N/A	N/A	N/A	N/A	N/A
Mail-Order (3 mo fill)						
Generic	\$0	\$0	\$0	\$0	\$0	\$9
Brand	\$9	\$26	\$28	\$30	\$32	\$34
Non-Formulary	\$25	\$51	\$54	\$58	\$62	\$66

* Non-Formulary pharmaceuticals will have limited availability in retail pharmacies

Exceptions: 1) Medically retired servicemembers and survivors of members who died on active duty would be exempt from fee increases. 2) The only impact proposed in the budget for ADFMs would be for prescription co-pays, the Standard enrollment fee and deductibles proposed are for retirees under 65 only, not ADFMs.

formulary -

A list of preferred pharmaceuticals to be used by a managed care plan's network physicians, chosen based on the drug's efficacy, safety, and cost-effectiveness; the list varies from one organization to another; in a healthcare system, providers are expected to use the listed products.