



TRICARE® Pharmacy Program Overview

Learn about your TRICARE pharmacy coverage

The TRICARE Pharmacy Program provides prescription drug coverage for all TRICARE beneficiaries. You have the same coverage with any TRICARE health plan. **Note:** If you use the US Family Health Plan, you have separate pharmacy coverage that isn't discussed in this overview.

Your pharmacy contractor is Express Scripts, Inc. (Express Scripts). This means that Express Scripts will help you with coverage reviews, filing claims to get money back from up-front payments and other pharmacy needs. Your beneficiary category and the type of drug you are prescribed determine how you fill prescriptions. This includes what you pay and which type of pharmacy you get your drug from. For example, most people who are not active duty service members (ADSMs) are required to use the home delivery option for brand-name maintenance drugs. See "TRICARE Pharmacy Home Delivery" in this overview for more information.

GENERIC AND BRAND-NAME DRUGS





Your pharmacy will most often fill your prescription with a generic drug, unless your provider requests a brand-name drug for you. Your costs will vary based on which drug you get:

- You pay nothing for generic or brand-name drugs at military pharmacies.
- You pay a copayment for covered brand-name drugs and generic drugs at retail pharmacies and through home delivery (unless you are an ADSM, in which case you pay nothing).

For more information about your pharmacy benefit, go to www.tricare.mil/pharmacy.

FOUR CATEGORIES OF DRUGS

TRICARE groups prescription drugs into four categories. This grouping is based on the medical and cost effectiveness of a drug compared to other drugs of the same type. This graphic shows how your costs may vary depending on your drug's category.

<p>Generic formulary drugs*</p> <p>..... \$</p> <ul style="list-style-type: none"> • Widely available • Lowest out-of-pocket costs 	<p>Brand-name formulary drugs*</p> <p>..... \$ \$</p> <ul style="list-style-type: none"> • Generally available • Moderate out-of-pocket costs 	<p>Non-formulary drugs*</p> <p>..... \$ \$ \$</p> <ul style="list-style-type: none"> • May have limited availability • Higher out-of-pocket costs 	<p>Non-covered drugs</p> <p>..... \$ \$ \$ \$</p> <ul style="list-style-type: none"> • Not covered by TRICARE • Highest out-of-pocket costs (You pay 100% of the drug's cost) 
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* May require prior authorization or medical necessity

FILLING YOUR PRESCRIPTIONS

Look up your drug at:

www.express-scripts.com/tricareformulary for information about filling your prescriptions

You will need to know:

- The name and strength of the drug prescribed

The online tool will tell you:

- If you need a coverage review from Express Scripts
- If you need a request form from your provider (This usually applies to non-formulary drugs and medications that require prior authorization.)
- Where you can fill your prescription

- You have costs for both generic and brand-name drugs when you go to non-network pharmacies. See "Non-network pharmacies" in this overview for more information.

OVER-THE-COUNTER DRUGS

TRICARE covers some over-the-counter drugs if you have a prescription. For more information, go to www.tricare.mil/otc.

YOUR PHARMACY COSTS

A **deductible** is a fixed amount you have to pay for covered services each calendar year (Jan. 1–Dec. 31) before TRICARE pays anything. You may have a deductible if you have TRICARE Prime or TRICARE Select and use a non-network pharmacy. If you have TRICARE Prime and use a non-network pharmacy, this cost is sometimes called the point-of-service (POS) deductible.

A **pharmacy copayment** is the amount you pay for your covered prescription. For non-ADSMs, copayments apply when you use home delivery or a retail pharmacy for drugs. Copayments vary depending on where you fill your prescription, your medication, and the quantity dispensed.

A **cost-share** is a percentage of the total cost of your prescription that you may pay at non-network pharmacies after you meet your deductible.

The **catastrophic cap** is the most you pay each calendar year for TRICARE-covered services, including pharmacy costs. Your catastrophic cap depends on who you are and whether you fall into Group A or Group B. For costs, including information on Groups A and B, visit www.tricare.mil/costs.

WHERE TO FILL PRESCRIPTIONS

Military pharmacies

Military pharmacies are usually located in military hospitals or clinics. Military pharmacies:

- Charge nothing for a 90-day supply of most covered drugs
- Usually accept prescriptions from military and civilian providers
- Accept electronic prescriptions
- Usually don't carry non-formulary drugs

TRICARE Pharmacy Home Delivery

With TRICARE Pharmacy Home Delivery, your covered drugs are mailed to you using free standard shipping. You may be required to use the home delivery option for some drugs. For example, unless you are an ADSM, you must fill select brand-name maintenance drugs through home delivery or a military pharmacy. Maintenance drugs are those you take on a regular basis, such as birth control or cholesterol medications. To find out if your drug is a maintenance medication that requires you to use home delivery, call 1-877-363-1303 or visit www.health.mil/selectdruglist.

With home delivery, you get up to a 90-day supply of drugs with:

- No costs for ADSMs
- Copayments apply to all non-ADSMs
- No need to file claims
- An option to enroll your medication in the Express Scripts Automatic Refill Program

For information on switching to home delivery, visit www.express-scripts.com/TRICARE or call 1-877-363-1303.

The home delivery option is available overseas if you have an APO/FPO address or are assigned to a U.S. Embassy or consulate and if you have a written prescription from

a U.S.-licensed provider. Exceptions include refrigerated medications, which can't be shipped to APO/FPO addresses. Also, legal restrictions prohibit home delivery to Germany. Prescriptions should be filled at military pharmacies or overseas civilian pharmacies. Learn more about the pharmacy benefit overseas at www.tricare.mil/overseas-pharmacy.

TRICARE retail network pharmacies

You may fill prescriptions at TRICARE retail network pharmacies without having to file a claim, but you may:

- Pay one copayment for each 30-day supply of a covered drug
- Need to show your uniformed services ID card or Common Access Card and your prescription
- Save money by using a pharmacy that is also in-network with your other health insurance, if you have it

Visit www.tricare.mil/networkpharmacy to find a TRICARE retail network pharmacy.

Non-network pharmacies

At non-network pharmacies, you pay the full price for a covered drug up front and file a claim to get money back. You'll have costs when using a non-network pharmacy that you won't be refunded. These costs include your yearly deductible, out-of-network cost-shares, TRICARE pharmacy copayments, and POS charges for some.

FOR INFORMATION AND ASSISTANCE

TRICARE Pharmacy Program

Express Scripts, Inc.
1-877-363-1303
1-877-540-6261 (TDD/TTY)
www.tricare.mil/pharmacy
www.express-scripts.com/TRICARE
DOD.customer.relations@express-scripts.com

An Important Note About TRICARE Program Information

At the time of publication, this information is current. It is important to remember that TRICARE policies and benefits are governed by public law and federal regulations. Changes to TRICARE programs are continually made as public law and/or federal regulations are amended. **Military hospital and clinic guidelines and policies may be different than those outlined in this publication.** For the most recent information, contact the TRICARE pharmacy contractor or your local military hospital or clinic.

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