



American Military Society
Group TRICARE and CHAMPVA Supplement Insurance
Annual Enrollment Guide

What is it? What does it cover? How can you enroll?
Answers to your questions about your AMS TRICARE
or CHAMPVA Supplement Insurance Plan



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This booklet is designed to answer some of your questions about the AMS TRICARE and CHAMPVA Supplement Insurance coverage being offered to eligible members and their eligible family members. It is not intended to provide a detailed description of the coverage. When you become insured you will receive a certificate containing a detailed description of the insurance including the definitions, exclusions, limitations, reductions and terminating events. The controlling provision will be in the group policy. Neither this booklet nor the certificate modifies the group policy of the insurance coverage in any way.





Group TRICARE and CHAMPVA Supplement Insurance Plans

Welcome to annual enrollment for the 2017 – 2018 plan year. This initial annual enrollment is your opportunity to select TRICARE and CHAMPVA Supplement coverage for the upcoming year.

AMS continuously looks for ways to expand your member benefits and provide you with valuable insurance options. We are happy to offer to you and your family TRICARE and CHAMPVA Supplement plans associated with the AMS.

AMS brings together the collective power of its membership to bring our members valuable products that are not always available through other organizations, like TRICARE and CHAMPVA Supplement coverage. Many of you will find TRICARE and CHAMPVA Supplement insurance plans to be very attractive. You'll find details on this insurance contained within this package.

TRICARE AND CHAMPVA SUPPLEMENT COVERAGE

<p>Helps pay your medical bills not paid by TRICARE or CHAMPVA (after you meet any applicable TRICARE or CHAMPVA plan deductible)</p>	<p>Pays Inpatient and Outpatient Benefits</p>
<p>No Medical Exam Needed</p>	<p>Your acceptance is not based on your health history.</p>
<p>Covers You and/or Your Family</p>	<p>Provides additional coverage protection (the TRICARE or CHAMPVA Catastrophic Cap does not protect you from excess charges) — these plans can help.</p>



Frequently Asked Questions

The following information will help give you a better understanding of AMS Group TRICARE and CHAMPVA Supplement Insurance Plans.

What is TRICARE and CHAMPVA Supplement?

TRICARE and CHAMPVA Supplement insurance was developed to help with your coverage gaps and to pay for coinsurance/fees.

Who is eligible for the TRICARE and CHAMPVA Supplement Insurance?

AMS members and their families who have TRICARE or CHAMPVA are eligible for TRICARE and CHAMPVA Supplement insurance. TRICARE and CHAMPVA are available to active duty service members and retirees of the seven uniformed services, their family members, survivors and others who are registered in the Defense Enrollment Reporting System (DEERS) and also to members of the National Guard and Reserves and their families. CHAMPVA is available to the spouse or widow(er) and to the children of a veteran who met certain criteria. For questions regarding eligibility for TRICARE and CHAMPVA, please contact DEERS at 1-800-538-9552.

When does the plan terminate?

Your coverage will continue until one of the following occurs:

- 1) your premium is not paid, subject to the Grace Period provision;
- 2) you cease to be a member of the AMS;
- 3) you are no longer eligible for the Plan under which you are covered;
- 4) the AMS cancels coverage for all persons covered under the Policy;
- 5) you attain age 65;
- 6) you are no longer covered under TRICARE and CHAMPVA;
- 7) you become eligible for Medicare unless you reside in an area where Medicare is not available, in which case coverage will not terminate until you return to residency in an area where Medicare is available;
- 8) if a child is covered under CHAMPVA, the date the child attains age 21 or age 23 if the child is enrolled full-time at a school of higher learning.

What about pre-existing conditions?

All AMS members who are eligible for TRICARE and CHAMPVA (as defined by TRICARE or CHAMPVA) are eligible for guaranteed issuance for TRICARE or CHAMPVA Supplement insurance. A limit to coverage may apply during the first 6 months from the effective date due to Pre-Existing Conditions. Pre-Existing Conditions, as used in this limitation, means any Injury or Sickness, diagnosed or undiagnosed, for which Medical Care is received by a Covered Person within the 6 month period prior to the Covered Person's effective date of insurance. After the 6 month waiting period, the TRICARE or CHAMPVA Supplement insurance covers all conditions.

When does my insurance go into effect?

Your coverage and that of your covered dependents becomes effective on the first day of the month following receipt of your Enrollment Form and first premium payment. If, on that day you or a covered dependent are confined in a hospital, the effective date will be the day following discharge from the hospital.

Will I have to provide information regarding my medical history?

No. You do not have to answer a single health question. Your acceptance is guaranteed. An injury or sickness for which any person eligible for coverage under the TRICARE or CHAMPVA Supplement insurance has received medical treatment or care within 6 months immediately preceding their effective date will not be covered until that person has ceased receiving medical treatment or care for that condition for 6 consecutive months. Any new conditions will be covered immediately.

How are benefits paid?

Most TRICARE and CHAMPVA Supplement claims are processed and paid directly to the provider(s). If the member is required to pay the provider at the time of service, the TRICARE or CHAMPVA Supplement will reimburse the co-pays directly to the member. It is important that your name on the enrollment form appears exactly the same as it is on your military ID card to ensure proper claims processing.

Please be aware that some TRICARE or CHAMPVA Supplement claims cannot be processed electronically, such as claims filed overseas.

What is my obligation when I enroll for coverage?

There is absolutely no obligation. When you enroll, your certificate of coverage will be mailed to you upon processing and acceptance of the enrollment form. Review the certificate of coverage at your leisure. If you are not completely satisfied, simply mail back your certificate within 30 days and any money paid will be refunded in full. We will consider your coverage void from the effective date. After the 30 day free-look, you may cancel coverage at any time by giving us notice (the termination date will be the first day of the following month).

If my status changes, can I keep my TRICARE Supplement insurance for myself and/or my family?

AMS Supplement insurance offers many plan options to best fit your situation. TRICARE Supplement is available for both active duty and retiree status. TRICARE Supplement works with TRICARE Standard, Extra or Prime. The coverage is yours to keep even if you change jobs or move.

Are there any restrictions with TRICARE or CHAMPVA Supplement insurance as to what doctor or hospital I use?

No. There are no preferred provider lists. No doctor or hospital networks. And no referrals required for specialized care. You may see the TRICARE or CHAMPVA authorized doctor of your choice.

What is the TRICARE and CHAMPVA Catastrophic Cap?

The TRICARE and CHAMPVA Catastrophic Cap limits the amount that a family would have to pay out of their own pocket for medical expenses incurred in a given fiscal year for TRICARE and calendar year for CHAMPVA. The maximum "out-of-pocket" per fiscal year is \$3,000 per family for TRICARE Standard or Extra, and \$1,000 for TRICARE Prime; and per calendar year is \$3,000 per family for CHAMPVA. The expenses applied to the Catastrophic Cap are cost-shares and deductibles. Excess charges are not applied to the out-of-pocket.

How are the TRICARE and CHAMPVA Supplement insurance premium rates determined?

AMS TRICARE and CHAMPVA Supplement are group insurance policies. Premiums are based on the group claims history and not based on the individual. We have the right on each premium due date to change the rate at which further premiums will be calculated. Any change will be applied to all individuals of the same class, age, plan and effective date. We will give the Policyholder notice of any change at least 45 days before the premium due date to which the change will become effective.

How do I enroll?

Enrolling for TRICARE or CHAMPVA Supplement is easy. Complete, sign and mail the enrollment form in the enclosed postage-paid envelope to AmWINS Group Benefits, P.O. Box 153085, Irving, Texas 75015.

Are there any exclusions or limitations?

Nervous, Mental, Emotional Disorder, Alcoholism, and Drug Addiction Limits — The coverage provided under the Inpatient Benefits of the TRICARE or CHAMPVA Supplement for nervous, mental, emotional disorders, including alcoholism and drug addiction, is limited to: (a) 30 days Inpatient treatment for a Covered Person age 19 and older per Fiscal Year; or (b) 45 days Inpatient treatment for a Covered Person under age 19 per Fiscal Year; or for CHAMPVA (c) 150 Inpatient treatment days in a CHAMPVA authorized Residential Treatment Center for a Covered Person under age 21; per Fiscal Year.

This Inpatient limit is based on the number of days TRICARE or CHAMPVA normally provides each Fiscal Year for such confinements. In rare instances, TRICARE or CHAMPVA extends these daily limits. If this occurs, we will limit the number of days that we provide for such Confinement to the lesser of: (a) the number of days TRICARE or CHAMPVA pays for such Inpatient treatment during the Fiscal Year; or (b) 90 Inpatient days per Fiscal Year.

The coverage provided under the Outpatient Benefits of the TRICARE and CHAMPVA Supplement Plans for: (a) nervous, mental, and emotional disorders; and (b) alcoholism and drug addiction; is limited to \$500 during any period of any fiscal year for all such disorders.

TRICARE and CHAMPVA Cap— TRICARE and CHAMPVA will increase its rate of payment to 100% of the TRICARE and CHAMPVA Allowed Amount when a Covered Person has met the TRICARE or CHAMPVA Cap. After the TRICARE or CHAMPVA Cap has been met, we will not duplicate benefits by paying any part of the cost-share which is payable under TRICARE or CHAMPVA.

Other Insurance With Us — If a Covered Person is insured under more than one policy underwritten by Transamerica Premier Life Insurance Company which provides TRICARE Supplement benefits, we will limit our payment of benefits to the one policy that affords the greater level of benefits.

Non-Duplication of Coverage under Employer Health Program — If a claim payable under the Policy is also payable under an Employer Health Program with TRICARE as the secondary payor, we will limit our payment to an amount which, when added to the amounts paid by the Employer Health Program and TRICARE, will not exceed 100% of TRICARE Covered Expenses.

TRICARE Exclusions — The Policy does not cover: 1) injury or sickness resulting from war or act of war, whether war is declared or undeclared; 2) intentionally self-inflicted injury; 3) suicide or attempted suicide, whether sane or insane (in Missouri while sane); 4) routine physical exams, unless required for school enrollment (but not sports physicals) by a Covered Child ages 5 through 11, and immunizations, except when: (a) rendered to a child up to 6 years from the child's birth; or (b) ordered by a Uniform Service: (1) for a

Covered Spouse or Child of an Active Duty Member; (2) for such spouse or child's travel out of the United States due to your assignment; or routine physical 5) domiciliary or custodial care; 6) eye refractions and routine eye exams except when rendered to a child up to 6 years from the child's birth; 7) eyeglasses and contact lenses; 8) prosthetic devices (except that artificial limbs and eyes and devices which must be implanted by surgery are covered); 9) cosmetic procedures, except those resulting from Sickness or Injury; 10) hearing aids; 11) orthopedic footwear; 12) care for the mentally incapacitated or physically handicapped if the care is required because of the mental incapacitation or physical handicap or the care is received by an Active Duty Member's child who is covered by the Program for the Handicapped under TRICARE; 13) drugs which do not require a prescription, except insulin; 14) dental care unless such care is covered by TRICARE, and then only to the extent that TRICARE covers such care; 15) any confinement, service, or supply that is not covered under TRICARE; 16) Hospital nursery charges for well newborn, except as specifically provided under TRICARE; 17) any routine newborn care except Well Baby Care, as defined, for a child up to 6 years from the child's birth; 18) expenses in excess of the TRICARE Cap; 19) expenses which are paid in full by TRICARE; 20) any expense or portion thereof applied to the TRICARE Outpatient Deductible; 21) treatment for the prevention or cure of alcoholism or drug addiction except as specifically provided under TRICARE; 22) any part of a covered expense which the Covered Person is not legally obligated to pay because of payment by a TRICARE alternative program; 23) any claim under more than one of the TRICARE Supplement Plans, or under more than one Inpatient Benefit or more than one Outpatient Benefit of the TRICARE Supplement Plans. If a claim is payable under more than one of the stated Plans or Benefits, payment will only be made under the one that provides the highest coverage, subject to the Pre-Existing Condition Limitation; 24) treatment or confinement not ordered by a physician or necessary for medical care; 25) expenses in excess of the TRICARE Allowed Amount except as specifically provided. Limitations and exclusions may vary by state. Please refer to your certificate for details.

CHAMPVA Exclusions — The Policy does not cover: 1. injury or sickness resulting from war or act of war, whether war is declared or undeclared; 2. treatment or confinement not ordered by a Physician or necessary for medical care; 3. intentionally self-inflicted injury; 4. suicide or attempted suicide, whether sane or insane (in Missouri while sane); 5. routine physical exams and immunizations, except when considered Well Baby Care covered by CHAMPVA; 6. domiciliary or custodial care, care received in a retirement home, rest home or halfway house; 7. rest cures; 8. eye refractions and routine eye exams except when considered Well Baby Care covered by CHAMPVA; 9. eyeglasses and contact lenses; 10. cosmetic procedures, except those resulting from Sickness or Injury while a Covered Person; 11. hearing aids or hearing exams except when considered Well Baby Care covered by CHAMPVA; 12. orthopedic footwear; 13. care for the mentally incapacitated or physically handicapped if the care is required because of the mental incapacitation or physical handicap; 14. drugs which do not require a prescription, except insulin and other diabetic supplies; 15. any confinement, service, or supply that is not covered under CHAMPVA; 16. expenses in excess of the CHAMPVA Cap; 17. expenses which are paid in full by CHAMPVA; 18. any expenses or portion thereof applied to the CHAMPVA Deductible; 19. any part of a covered expense which the Covered Person is not legally obligated to pay.

Your coverage will become effective on the first day of the month following receipt of your Enrollment Form.



TRICARE Supplement Insurance Overview



	TRICARE Prime	TRICARE Standard and Extra
What is it?	TRICARE Prime is a managed care option offering the most competitive and comprehensive coverage.	TRICARE Standard and Extra is a fee-for-service option, which allows you the most flexibility in whom you see for care, but will cost you more out-of-pocket than a managed care plan such as TRICARE Prime, you can seek care from any TRICARE-authorized provider. If you see a network provider, you'll be using the TRICARE Extra option and will pay less than if you see a non-network provider.
What is the annual TRICARE deductible?	<p>There is no annual deductible unless you are using the Point of Service (POS) option, which allows you to see any provider without a referral from your primary care manager.</p> <p>POS Outpatient annual deductible: • \$300/Individual • \$600/Family</p> <p>Note: Active duty service members and activated National Guard or Reserve members may not use the POS option.</p>	<p>The annual outpatient deductible varies depending on the sponsor's military status and rank:</p> <p>Active duty family members (sponsor rank E-4 and below):</p> <ul style="list-style-type: none"> • \$50/Individual • \$100/Family <p>Active duty members (sponsor rank E-5 and above)</p> <ul style="list-style-type: none"> • \$150/Individual • \$300/Family <p>All others:</p> <ul style="list-style-type: none"> • \$150/Individual • \$300/Family <p>Family Member of National Guard or Reserve Members activated in support of a contingency operation (OEF, OIF, Noble Eagle): \$0; Deductible waived as part of the Reserve Family Demonstration Project</p> <p>Note: There is no annual deductible for care received in military treatment facilities.</p>
What's the maximum I'll pay out-of-pocket? (Also known as the Catastrophic Cap.)	<p>Your catastrophic cap varies depending on the sponsor's military status:</p> <ul style="list-style-type: none"> • Active duty families: \$1,000.00 per family, per fiscal year • National Guard and Reserve Families: \$1,000.00 per family, per fiscal year • Retired families (and all others): \$3,000.00 per family, per fiscal year <p>Note: POS fees do not apply toward meeting your catastrophic cap.</p>	<p>Your catastrophic cap varies depending on the sponsor's military status:</p> <ul style="list-style-type: none"> • Active duty families: \$1,000.00 per family, per fiscal year • National Guard and Reserve Families: \$1,000.00 per family, per fiscal year • Retired families (and all others): \$3,000.00 per family, per fiscal year
Where is the program available?	Plan may not be available in all states.	Plan may not be available in all states. TRICARE Standard option is available in the U.S. territories and overseas through the TRICARE Standard Overseas program. The TRICARE Extra option is not available overseas.



What if I have additional questions?

If you have any questions, please contact a Customer Service Representative toll-free at **1-800-808-4514**, Monday through Friday, from 8:00 a.m. to 4:30 p.m., Central Time.

	Retiree TRICARE Standard/Extra	Retiree TRICARE Prime	Active Duty TRICARE	CHAMPVA	You Pay
Supplement Coverage Pays:					
Annual Deductible	none	none	none	none	You pay all costs
Outpatient Services (Doctor's visits, clinics, prescriptions, outpatient surgeries)	The 25/20% TRICARE cost share after annual TRICARE plan deductibles are met plus 100% of applicable excess charges.	The TRICARE copayments and the 50% Point of Service (POS) cost shares after annual POS deductible is met.	The 15/20% TRICARE cost share after annual deductible is met plus 100% of applicable excess charges.	25% of CHAMPVA Allowed Amount until Cap is met.	\$0
Inpatient Services (room, board, supplies and staff, services billed by hospital)	The 25/20% TRICARE cost share after annual supplement plan deductible is met plus 100% of applicable excess charges.	The TRICARE copayments and the 50% POS cost share.	The lesser of Per Diem Charge for Period of Confinement or 25% of amount billed for Covered Expenses not to exceed DRG Amount until TRICARE Cap is met.	The lesser of CHAMPVA Per Diem Charge for Period of Confinement; or 25% of amount billed for Covered Expenses not to exceed CHAMPVA DRG Amount until the Cap is met.	\$0

TRICARE and CHAMPVA Supplement Insurance Rates

Use the chart rates to determine the premium for your TRICARE or CHAMPVA Supplement coverage



Retiree Rates per Individual

Attained Age	TRICARE Standard/Extra Monthly Premiums (\$300 policy deductible for individual coverage and \$600 for family)		TRICARE Prime Quarterly premiums per person (\$0 policy deductible)	
	M	F	M	F
Under 40	\$17.38	\$18.48	\$48.00	\$50.00
40-44	\$18.08	\$19.09	\$49.00	\$51.00
45-49	\$20.65	\$20.89	\$58.00	\$60.00
50-54	\$25.71	\$26.35	\$69.00	\$74.00
55-59	\$31.86	\$33.19	\$84.00	\$88.00
60-64	\$35.70	\$37.24	\$94.00	\$99.00
All Children	\$16.06	\$16.06	\$44.00	\$44.00



Monthly Rates per Individual

CHAMPVA (\$300 policy deductible for individual coverage and \$600 for family)		Active Duty	
M	F	Spouse	Each Child
\$17.38	\$18.48	\$10.48	\$9.63
\$18.08	\$19.09		
\$20.65	\$20.89		
\$25.71	\$26.35		
\$31.86	\$33.19		
\$35.70	\$37.24		
\$16.06	\$16.06		

Your payment options: You may also have the option of paying your premiums once a year (annually), twice a year (semi-annually), or four times a year (quarterly). If you pay your premiums monthly, quarterly or semi-annually, the total amount of premiums and/or administration fees you pay in a year may be higher than if you make one annual payment. If you are interested in learning more about these payment options, please refer to your fulfillment package for details.

Underwritten by Transamerica Premier Life Insurance Company.
Home Office: Cedar Rapids, IA
Administrative Office: AmWINS Group Benefits, P.O. Box 153085,
Irving, Texas 75015-9803,
1-800-808-4514

Group Policy MLTRC1000GP.
MZ0926079H0000A. Plans not available in all states.

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