



TRICARE Cost-Sharing Changes in 2023

Updated November 14, 2022

The Department of Defense (DOD) administers a statutory health entitlement (under Title 10, Chapter 55, of the *U.S. Code*) through the Military Health System (MHS). The MHS offers health care benefits and services through its TRICARE program to approximately 9.6 million beneficiaries that include servicemembers, military retirees, and family members. Health care services are available through DOD-operated hospitals and clinics, collectively referred to as *military treatment facilities* (MTFs), or through civilian health care providers participating in the TRICARE program. The Defense Health Agency (DHA) manages the TRICARE program, in collaboration with the military departments.

With the exception of active duty servicemembers, beneficiaries are subject to certain cost-sharing requirements based on beneficiary category, health plan or benefit program, and the sponsor's initial enlistment or appointment date. Beneficiary cost-sharing requirements include premiums (i.e., enrollment fees), deductibles, co-payments, coinsurance, and a catastrophic cap. Periodically, DHA reviews and adjusts certain beneficiary cost-sharing amounts for the various TRICARE health plans and benefit programs based on statutory requirements or changes to the cost of coverage. This Insight reviews changes to TRICARE's beneficiary cost-sharing amounts that are scheduled to take effect on January 1, 2023. These changes may generate constituent inquiries during the next TRICARE open enrollment season.

What TRICARE health plans and benefit programs are scheduled to have modified cost shares in 2023?

For calendar year (CY) 2023, DHA is increasing certain beneficiary cost-sharing amounts for the following TRICARE health plans and benefit programs:

- TRICARE Prime,
- TRICARE Select,
- TRICARE Reserve Select,
- TRICARE Retired Reserve,
- TRICARE Young Adult,
- Continued Health Care Benefit Program, and the

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• TRICARE Pharmacy Program.

There are no scheduled changes to the cost-sharing amounts for the TRICARE dental plan, or TRICARE for Life. A detailed listing of cost sharing amounts by health plan or benefit program is available on the CY2022 Costs and Fees Sheet, DHA's preview of CY2023 TRICARE Health Plan Costs, or by using the TRICARE compare cost tool.

How does DHA determine the change in cost-sharing amounts?

DHA generally adjusts the TRICARE beneficiary cost-sharing amounts based on (1) specified amounts established in federal statutes; (2) statutory formulas; or (3) actuarial adjustments equal to the cost of coverage. **Table 1** specifies the method by which DHA determines periodic adjustments to beneficiary cost-sharing amounts.

Table I. Adjustment Methods Used for TRICARE Enrollee Cost-sharing Amounts

Health Plan or Benefit Program	Adjustment Method	Authority 10 U.S.C. §1075a	
TRICARE Prime	Amounts specified in statute and statutory formula		
TRICARE Select	Amounts specified in statute and statutory formula	10 U.S.C. §1075	
TRICARE Reserve Select	 Enrollment fee: actuarial adjustment Other cost-sharing amounts: mirrors TRICARE Select 	10 U.S.C. §1076d	
TRICARE Retired Reserve	 Enrollment fee: actuarial adjustment Other cost-sharing amounts: mirrors TRICARE Select 	10 U.S.C. §1076e	
TRICARE Young Adult (Prime or Select)	Enrollment fee: actuarial adjustment Other cost-sharing amounts: mirrors TRICARE Prime or TRICARE Select	10 U.S.C. §1110b	
Continued Health Care Benefit Program	 Enrollment fee: actuarial adjustment Other cost-sharing amounts: mirrors TRICARE Select 	10 U.S.C. §1078a	
TRICARE Pharmacy	Amounts specified in statute and statutory formula	10 U.S.C. §1074g	
TRICARE Dental	 DHA-administered dental benefit: actuarial adjustment Federal Employee Dental and Vision Insurance Program (FEDVIP): actuarial adjustment 	10 U.S.C. §1076a 5 U.S.C. §8958	

Source: See various statutes in Chapter 55 of Title 10 and Chapter 89A of Title 5, U.S. Code.

Notes: DHA makes *actuarial adjustments* based on enrollment-weighted average annual costs of previous calendar years and projected administrative and health care costs. See DHA's methodology document for more on how actuarial adjustments are made annually. Certain DOD beneficiaries (i.e., military retirees and their family members) are eligible for dental benefits through FEDVIP, which annually adjusts its cost-sharing amounts in accordance with Chapter 89A of Title 5, U.S. Code, Part 894 of Title 5, Code of Federal Regulations, and Office of Personnel Management policies.

What and when is the TRICARE open enrollment season?

The TRICARE open enrollment season is an annual period when beneficiaries may enroll in, terminate, or change their health plan or benefit program. The open enrollment season for calendar year 2023 is to

begin on November 14, 2022, and end on December 13, 2022. Beneficiaries who opt to remain in their current health plan or benefit program are not required to re-enroll. Beneficiaries who are newly eligible or would like to change their enrollment may do so by submitting an online Beneficiary Web Enrollment request or contacting the appropriate TRICARE contractor.

Once the annual open enrollment season closes, beneficiaries may only make changes to their health plan or benefit program within 90 days after a *qualifying life event* (QLE). **Table 2** lists military or family-related life changes that DHA deem a QLE.

Table 2. TRICARE Qualifying Life Events

	Military Changes		Family Changes
•	Permanent change of station/moving	•	Marriage
•	Initial military commissioning or enlistment	•	Divorce
•	Reserve Component member activation/deactivation	•	Having a baby or adopting a child
•	Injured on active duty	•	Children going to college
•	Separating from active duty	•	Children becoming adults
•	Retiring	•	Becoming Medicare-eligible
•	Military-directed change of primary care manager	•	Moving
•	Change in overseas command-sponsorship	•	Death in family
		•	Loss or gain of other health insurance

Source: 32 C.F.R. §199.17(o) and TRICARE, "Qualifying Life Events," accessed November 9, 2022, https://www.tricare.mil/LifeEvents.

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