

New Copays to Take Effect on Feb. 1, 2013

Prescription costs are based on the type of prescription and where it's filled. Beginning February 1, 2013, there will be some increases to current prescription costs.

TRICARE Pharmacy (TPharm) Copayments/Cost-Shares in the United States (Including Puerto Rico, Guam, the U.S. Virgin Islands, America Samoa, and the Northern Marianna Islands)

PLACE OF SERVICE (POS)	Formulary Drugs		Non-Formulary Drugs (TIER 3)	
	Generic (TIER 1)	Brand Name (TIER 2)		
Military Treatment Facility (MTF) Pharmacy <i>(up to a 90-day supply)</i>	Current	\$0	\$0	Not Applicable
	Beginning February 2013: <u>No changes</u> to filling prescriptions at military pharmacies			
TRICARE Mail Order Pharmacy <i>(up to a 90-day supply)</i>	Current	\$0	\$9	\$25 unless you establish medical necessity
	New	\$0	\$13	\$43 unless you establish medical necessity
TRICARE Retail Pharmacy Network <i>(up to a 30-day supply)</i>	Current	\$5	\$12	\$25 unless you establish medical necessity
	New	\$5	\$17	\$44 unless you establish medical necessity
Retail Non-Network Pharmacy <i>(up to a 30-day supply)</i> Note: Beneficiaries using non-network pharmacies may have to pay the total amount of their prescription first and then file a claim to receive partial reimbursement.	TRICARE Prime: 50% cost share after Point of Service (POS) deductibles (\$300 per person, \$600 per family deductible) For those who are not enrolled in TRICARE PRIME: \$17 or 20% of total cost, whichever is greater, after annual deductible is met (E1-E4: \$50/person; \$100/family; all others, including retirees, \$150/person, \$300/family)		TRICARE Prime: 50% cost share after POS deductibles (\$300 per person, \$600 per family deductible) For those who are not enrolled in TRICARE Prime: \$44 or 20% of total cost, whichever is greater, after annual deductible is met (E1-E4: \$50/person; \$100/family; all others, including retirees, \$150/person, \$300/family)	
NOTE: If medical necessity is established for a non-formulary drug, patients may qualify for the \$17 copayment for up to a 30-day supply at the Retail point of service or a \$13 copayment for a 90-day supply at the Mail point of service.				
NOTE: Approved Over-The Counter (OTC) medications will be available at network retail pharmacies for up to a 30-day supply at \$0 copayment for beneficiaries eligible to use the TRICARE pharmacy benefit.				
Approved Over-The Counter (OTC) medications will be available at the TRICARE mail order pharmacy for up to a 90-day supply at \$0 copayment for beneficiaries eligible to use the TRICARE pharmacy benefit.				
Approved vaccines will be available at participating network retail pharmacies at \$0 copayment for beneficiaries eligible to use the TRICARE pharmacy benefit.				