

RAO Newsletter #2020-8 - TRICARE Revises Telehealth Policy to Respond to COVID-19

5/19/2020

To improve virtual access to health care during [COVID-19](#), TRICARE recently revised its policy on [telehealth services](#). This temporarily allows you access to care more easily during the constraints of the pandemic. These changes will remain for the duration of the stateside public health emergency. They may be in place overseas beyond the U.S. national emergency end date, based on local conditions.

“Telemedicine has become an important tool in caring for patients while keeping providers and others safe during the COVID-19 pandemic,” said Christopher Priest, deputy assistant director, Health Care Operations, Defense Health Agency. “These changes will help TRICARE beneficiaries by making it easier for you to use telehealth services for your health care needs.”

Here’s what you need to know about each of these temporary changes to telehealth visits:

1. Addition of audio-only health care visits

- Covered telehealth visits required both live video and audio. TRICARE will now also cover audio-only telehealth services. This allows you to continue care with providers who may not usually use telemedicine. It allows those who don’t have in-home technology, such as smartphones or computers, to access care. This also makes it easier if you live in a rural area without broadband internet.

2. No out-of-pocket costs for covered telehealth services

- You won’t have out-of-pocket costs for telehealth services that TRICARE covers. TRICARE will now waive your cost-shares and copayment and deductible (if applicable) for covered telehealth services you get from a military provider or TRICARE network provider. This waiver applies to all covered in-network telehealth services, not just the services related to COVID-19.
- What if you do have to pay? TRICARE can’t immediately waive all copayments and cost-shares. You may have to pay up front and [file a claim](#) with your TRICARE contractor for reimbursement. If you have questions, [contact your TRICARE contractor](#).

3. More providers able to offer covered telehealth services

- TRICARE policy requires providers to have a license in the state where they practice and where the patient lives. TRICARE will now reimburse providers for interstate care to patients. The care must be permitted by federal or state licensing laws.
- This change will allow providers to respond to areas of high-need (physically and via telemedicine) during the COVID-19 emergency without risking loss of reimbursement.

- This change will also apply overseas. But, the provider must hold an equal license in the other country and the country where the provider practices must permit such practice.

Remember that not all providers offer telehealth services. You may need to ask your provider if they do. Depending on your [TRICARE plan](#), you may also first need a [referral or authorization](#). Your [TRICARE contractor](#) can assist you.

Learn more about [telemedicine](#) and [telemental](#) services that TRICARE covers. Stay safe and take command of your health.

Sign up for [email alerts](#), and keep up with [TRICARE and COVID-19 updates](#).

SOURCE: TRICARE Bulletin Last Updated 5/19/2020