### **DEPARTMENT OF DEFENSE**

# Office of the Secretary

TRICARE; Calendar Year (CY) 2019 TRICARE Prime and TRICARE Select **Out of Pocket Expenses** 

**AGENCY:** Office of the Secretary, Department of Defense.

**ACTION:** Notice of Calendar Year (CY) 2019 TRICARE Prime and TRICARE Select Out of Pocket Expenses.

**SUMMARY:** This notice provides the Calendar Year (CY) 2019 TRICARE Prime and TRICARE Select Out of Pocket Expenses.

**DATES:** The CY19 rates contained in this notice are effective for services on or after January 1, 2019, unless otherwise indicated.

**ADDRESSES:** Defense Health Agency (DHA), TRICARE Health Plan, 7700 Arlington Boulevard, Suite 5101, Falls Church, Virginia 22042-5101.

FOR FURTHER INFORMATION CONTACT: Mark A. Ellis, telephone (703) 275-6234.

SUPPLEMENTARY INFORMATION: The National Defense Authorization Acts (NDAAs) for Fiscal Year (FY) 2012 and 2017 established rates for TRICARE beneficiary out of pocket expenses and how they may be increased by either the annual cost of living adjustment (COLA) percentage used to increase military retired pay or via budget neutrality rules. The FY 2019 retiree COLA increase is 2.8%. The "TRICARE Select and Other TRICARE Reforms" final rule (published February 15, 2019 at 84 FR 4326-4333) allows for adjustments to beneficiary out of pocket expenses for Group A beneficiaries (sponsor enlisted or was commissioned in a Uniformed Service before January 1, 2018) to maintain budget neutrality compared to the previous year.

The DHA has updated the CY19 fees as shown below:

TABLE 1—TRICARE PRIME AND TRICARE SELECT OUT OF POCKET EXPENSES FOR CY19—RETIREES AND RETIREE **FAMILY MEMBERS** 

	Select Group A retirees CY19	Select Group B retirees CY19	Prime** Group A retirees CY19	Prime** Group B retirees CY19
Annual enrollment fee:				
Individual	\$0	\$462	\$297	\$360.
Family	\$0	\$924	\$594	\$720.
Annual Deductible:				
Individual	\$150	\$154 (IN); \$308 (OON)	\$0	\$0.
Family	\$300	\$308 (IN); \$616 (OON)	\$0	\$0.
Annual catastrophic cap	\$3,000	\$3,598	\$3,000	\$3,598.
Preventive visit	\$0	\$0	\$0	\$0.
Primary care	\$29 (IN)	\$25 (IN)	\$20	\$20.
•	25% (OON)	25% (OON)	·	,
Specialty care	\$41 (ÌN)	\$41 (ÌN)	\$30	\$30.
,	25% (OON)	25% (OON)	·	,
ER visit	\$111 (IN)	\$82 (ÎN)	\$61	\$61.
	25% (OÓN)	25% (OON)	·	,
Urgent care center visit	\$29 (ÌN)	\$41 (ÌN)	\$30	\$30.
3	25% (OON)	25% (OON)	·	,
Ambulatory surgery	20% (IN)	\$97 (ÎN)	\$61	\$61.
, , ,	25% (OÓN)	25% (OON)	·	,
Ambulance, outpatient ground	\$102 (IN)	\$61 (lN)	\$41	\$41.
, ,	25% (OÓN)	25% (OON)	·	,
Ambulance, outpatient air	25% (IN or OON)	25% (IN or OON)	\$20	\$20.
Durable medical equipment	20% (IN)	20% (ON)	20%	20%.
	25% (OÓN)	25% (OON)		
Inpatient admission:	, ,	,		
In-network	\$250/day up to 25% of hospital	\$179 per adm	\$154 per adm	\$154 per adm.
	charges, plus 20% of sep.	· '	' '	
	billed services.			
Out of network	*\$953/day up to 25% of hosp.	25%	\$154 per adm	\$154 per adm.
	charges, plus 25% of sep.		, . ,	, , , , , , , , , , , , , , , , , , , ,
	billed services.			
Inpatient SNF/rehab facility	\$250/day up to 25% of hospital	\$51 per day (IN); lesser of	\$30 per day	\$30 per day.
	charges, plus 20% of sep.	\$308 per day or 20% (OON).	' '	' '
	billed services (IN); 25%			
	(OON).			

IN: In Network.

OON: Out of Network.

TABLE 2—TRICARE PRIME AND TRICARE SELECT OUT OF POCKET EXPENSES FOR CY19—ACTIVE DUTY FAMILY **MEMBERS** 

	Select Group A ADFM CY19	Select Group B ADFM CY19	Prime ** Group A ADFM CY19	Prime ** Group B ADFM CY19
Annual enrollment fee:	\$0	\$0	\$0	\$0

Per day rate change effective October 1, 2018.

<sup>\*\*</sup> When TRICARE Prime enrollees other than active duty service members self-refer to specialty or non-emergent inpatient care without a referral from a network provider and/or authorization from the regional contractor, the TRICARE Point of Service deductible and copayment applies in lieu of TRICARE Prime copayments.

TABLE 2—TRICARE PRIME AND TRICARE SELECT OUT OF POCKET EXPENSES FOR CY19—ACTIVE DUTY FAMILY MEMBERS—Continued

	Select Group A ADFM CY19	Select Group B ADFM CY19	Prime ** Group A ADFM CY19	Prime ** Group B ADFM CY19
Family	\$0	\$0	0	0
Annual Deductible:	4		_	_
E1-E4, individual	\$50	\$51	0	0
E1-E4, family	\$100	\$102	0	0
E5 & above, individual	\$150	\$154	0	0
E5 & above, family	\$300	\$308	0	0
Annual catastrophic cap	\$1,000	\$1,028	1,000	1,028
Preventive visit	\$0	\$0	0	0
Primary care	\$21 (IN)	\$15 (IN)	0	0
	20% (OON)	20% (OON)		
Specialty care	\$31 (IN)	\$25 (IN)	0	0
•	20% (OON)	20% (OON)		
ER visit	\$83 (ÌN)	\$41 (ÌN)	0	0
	20% (OON)	20% (OON)		
Urgent care center visit	\$21 (ÌN)	\$20 (ÌN)	0	0
3	20% (OON)	20% (OON)	_	
Ambulatory surgery	\$25 (IN)	\$25 (IN)	0	0
randalatery eargery	20% (OON)	20% (OON)	ŭ	·
Ambulance, outpatient ground	\$76 (IN)	\$15 (IN)	0	0
rumbalance, earpallem greatia ii	20% (OON)	20% (OON)	· ·	
Ambulance, outpatient air	20% (IN or OON)	20% (IN or OON)	0	0
Durable medical equipment	15% (IN)	10% (ON)	Ô	o o
Burable medical equipment	20% (OON)	20% (OON)	9	· ·
Inpatient admission	*\$19.05 per day; \$25 min. per	\$61 per adm. (IN); 20% (OON)	0	0
inpatient aumission	admission.	φοι ρει ααιπ. (πν), 2070 (ΟΟΙν)	0	0
Inpatient SNF/rehab facility	*\$19.05 per day; \$25 min. per	\$25 per day (IN); \$51 per day	0	0
inpatient Sixt /Terlab facility	admission.	(OON).	U	U
	aumssion.	(OON).		

IN: In Network.

OON: Out of Network.

The above rates are effective for services rendered on or after January 1, 2019 unless otherwise indicated.

Dated: April 5, 2019.

#### Aaron T. Siegel,

Alternate OSD Federal Register Liaison Officer, Department of Defense.

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### **DEPARTMENT OF DEFENSE**

Office of the Secretary

[Docket ID: DOD-2019-OS-0037]

## Privacy Act of 1974; System of Records

**AGENCY:** Defense Finance and Accounting Service, DoD.

**ACTION:** Rescindment of a system of records notice.

**SUMMARY:** The Defense Finance and Accounting Service is rescinding a system of records, T7901b, Consolidated Returned Items Stop Payment System. This system of records assisted in the processing and tracking of military pay returned checks for the active U.S.

Army and Reserve military members. The Consolidated Returned Items Stop Payment System (CRISPS) is no longer in use and is considered deactivated.

**DATES:** This action will be effective April 10, 2019. The specific date for when this system ceased to be a Privacy Act System of Records is February 22,

FOR FURTHER INFORMATION CONTACT: Mr. Gregory L. Outlaw, DFAS Privacy Officer, Defense Finance and Accounting Service, Corporate Communications Office, FOIA/PA Adherence Division, 8899 East 56th St., Indianapolis, IN 46249-3300, (317) 212-

SUPPLEMENTARY INFORMATION: The Consolidated Returned Items Stop Payment System (CRISPS) is no longer in use and is considered deactivated. All CRISPS customers successfully migrated to the system of records, T7320a, Deployable Disbursing System. The system of records notice for the Deployable Disbursing System is at 78 FR 14286 (March 5, 2013) and 72 FR 30785 (June 4, 2007). Department of Defense system of records notices subject to the Privacy Act of 1974 (5

U.S.C. 552a), as amended, have been published in the Federal Register and are available from the address in FOR FURTHER INFORMATION CONTACT or at the Defense Privacy, Civil Liberties and Transparency Division website at http:// dpcld.defense.gov/. The proposed systems reports, as required by the Privacy Act of 1974, as amended, were submitted on January 15, 2019, to the House Committee on Oversight and Government Reform, the Senate Committee on Homeland Security and Governmental Affairs, and on February 13, 2019, to the Office of Management and Budget (OMB) pursuant to Section 6 to OMB Circular No. A-108, "Federal Agency Responsibilities for Review, Reporting, and Publication under the Privacy Act," revised December 23, 2016 (December 23, 2016, 81 FR 94424).

System Name and Number Consolidated Returned Items Stop Payment System (CRISPS), T7901b

### HISTORY

May 28, 2013, 78 FR 31905.

<sup>\*</sup>Per day rate change effective October 1, 2018.
\*\* When TRICARE Prime enrollees other than active duty service members self-refer to specialty or non-emergent inpatient care without a referral from a network provider and/or authorization from the regional contractor, the TRICARE Point of Service deductible and copayment applies in lieu of TRICARE Prime copayments.