



TRICARE Supplement Insurance

A photograph of a group of soldiers in camouflage uniforms running on a dirt path in a field. The soldier in the foreground is a Black man, smiling and running towards the camera. Other soldiers are visible in the background, running in the same direction. The background is slightly blurred, showing a line of trees and a clear sky.

# TRICARE Supplement Insurance Plan

## Plan Design for Employees

TRICARE eligible employees have the freedom to choose an alternative to employer-sponsored health plans.

Underwritten by Hartford Life and Accident Insurance Company, Hartford, CT 06155.

This document describes how a TRICARE Supplement works with your existing TRICARE coverage. Please note: Check with TRICARE to confirm your actual cost shares and copays. TRICARE benefits are provided here for your convenience, but subject to change by the Defense Health Agency. Visit [www.tricare.mil](http://www.tricare.mil) for more information.

## IMPORTANT INFORMATION

TRICARE Supplement insurance policies AGP-5943, AGP-594301, AGP-594302, AGP-594307 do not have a deductible.

Note: Benefits are payable for covered cost share amounts up to the TRICARE Catastrophic Cap. The Catastrophic Cap is the maximum out-of-pocket amount you will pay each calendar year (January 1 – December 31) for TRICARE-covered service.

This is not Medicare Supplement Insurance.

## TRICARE SELECT WITH SUPPLEMENT

Benefit	Benefit Payment	Insured Pays
TRICARE Deductible	100% of TRICARE Deductible	\$0
Inpatient and Outpatient Benefits, including Outpatient Surgery Services	100% of the Co-pays and Cost Share remaining after TRICARE pays, after Supplement Plan Deductible is met, until TRICARE Catastrophic Cap is reached	\$0
Excess Benefit	100% of all Covered Expenses in excess of the TRICARE allowed amount, not to exceed the Legal Limit	\$0
Pharmacy Reimbursement Benefit	100% of the Co-pays and Cost Share remaining, not to exceed any TRICARE allowed or negotiated amount after the Supplement Plan Deductible is met until the TRICARE Catastrophic Cap is reached	\$0

## TRICARE PRIME WITH SUPPLEMENT

Benefit	Benefit Payment	Insured Pays
TRICARE Deductible	50% of TRICARE Prime POS Deductible	50% of TRICARE Prime POS Deductible
Inpatient and Outpatient Benefits, including Outpatient Surgery Services	100% of the Co-pays and Cost Share remaining after TRICARE pays, after Supplement Plan Deductible is met, until TRICARE Catastrophic Cap is reached	\$0
Excess Benefit	100% of all Covered Expenses in excess of the TRICARE allowed amount, not to exceed the Legal Limit	\$0
Pharmacy Reimbursement Benefit	100% of the Co-pays and Cost Share remaining, not to exceed any TRICARE allowed or negotiated amount after the Supplement Plan Deductible is met until the TRICARE Catastrophic Cap is reached	\$0

## TRICARE RETIRED RESERVES WITH SUPPLEMENT

Benefit	Benefit Payment	Insured Pays
TRICARE Deductible	100% of TRICARE Deductible	\$0
Inpatient and Outpatient Benefits, including Outpatient Surgery Services	100% of the Co-pays and Cost Share remaining after TRICARE pays, after Supplement Plan Deductible is met, until TRICARE Catastrophic Cap is reached	\$0

Excess Benefit	100% of all Covered Expenses in excess of the TRICARE allowed amount, not to exceed the Legal Limit	\$0
Pharmacy Reimbursement Benefit	100% of the Co-pays and Cost Share remaining, not to exceed any TRICARE allowed or negotiated amount after the Supplement Plan Deductible is met until the TRICARE Catastrophic Cap is reached	\$0

## CONTACT

**Mail:** Attn: TRICARE Supplement Insurance Plan

SelmanCo

One Integrity Parkway

Cleveland, OH 44143-1500

**Fax:** 1-833-731-2125

**Email:** [memberservices@selmanco.com](mailto:memberservices@selmanco.com)

**Call:** 1-800-638-2610, option 1

9:00am - 7:00pm ET, Monday-Friday

This brochure explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this brochure and the policy, the terms of the policy apply. All benefits are subject to the terms and conditions of the policy. Policies underwritten by Hartford Life and Accident Insurance Company detail exclusions, limitations, and terms under which the policy may be continued in full or discontinued. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy issued to the policyholder. This program may vary and may not be available to residents of all states.

See *Brochure for Employees* for eligibility, termination, definitions, exclusions, and limitations.

The TRICARE Supplement Plans are administered by SelmanCo and underwritten by Hartford Life and Accident Insurance Company, One Hartford Plaza, Hartford, CT 06155. The Hartford® is The Hartford Financial Services Group, Inc., and its subsidiaries, including issuing company Hartford Life and Accident Insurance Company.

NOT AVAILABLE IN ALL STATES.

TRICARE Form Series includes GBD-3000 (2017), GBD-3100 (2017), or state equivalent. SelmanCo is compensated for the placement of insurance and for the services it provides to customers on behalf of the insurance company.

AGP-5943

Photo Credit DoD: The appearance of U.S. Department of Defense (DoD) visual information does not imply or constitute DoD endorsement.