

# RAO Newsletter 2021-8 - TRICARE Fees For Calendar Year 2022

## Annual Enrollment Fees and Annual Deductibles

Retirees, their family members, and most others must pay an annual enrollment fee for their coverage. If you have [TRICARE Prime](#), there's no annual deductible. If you have [TRICARE Select](#), you must spend your deductible before TRICARE cost-sharing begins.

TRICARE [beneficiaries fall into one of two groups](#): Group A or Group B. What group you're in determines your enrollment fees or premiums and any other per service out-of-pocket costs that you may have with your TRICARE plan. See your group below:

- You're in **Group A** if your initial enlistment or appointment or that of your uniformed service sponsor began before Jan. 1, 2018.
- You're in **Group B** if your initial enlistment or appointment or that of your uniformed service sponsor began on or after Jan. 1, 2018.

The Table below shows the annual enrollment fee and annual deductible for retirees, their family members, and others enrolled in TRICARE Select or TRICARE Prime. Changes from 2021 costs are in bold.

**Table 2: Calendar Year 2022 TRICARE Prime and TRICARE Select Out-of-Pocket Costs: Retired Service Members, Their Families, and Others**

Out-of-pocket Cost		TRICARE Select		TRICARE Prime	
		Group A	Group B	Group A	Group B
<b>Annual enrollment fee</b>	Individual	<b>\$158</b>	<b>\$504</b>	<b>\$323</b>	<b>\$392</b>
	Family	<b>\$317</b>	<b>\$1,008</b>	<b>\$647</b>	<b>\$784</b>
<b>Annual deductible</b>	Individual	\$150	Network: <b>\$168</b> Out-of-Network: <b>\$336</b>	\$0	\$0
	Family	\$300	Network: <b>\$336</b> Out-of-Network: <b>\$672</b>	\$0	\$0

The Table below shows TRICARE Select and TRICARE Prime network and out-of-network out-of-pocket costs for retirees, their families, and all others. Network means a provider in the TRICARE network. Out-of-network means a TRICARE-authorized provider not in the TRICARE network. Changes from 2021 costs are in bold.

**Table 4: Calendar Year 2022 TRICARE Prime and TRICARE Select Out-of-Pocket Costs: Retirees, their Families, and all Others**

Out-of-pocket Cost	TRICARE Select		TRICARE Prime	
	Group A	Group B	Group A	Group B
<b>Annual catastrophic cap</b>	<b>\$3,706</b>	<b>\$3,921</b>	\$3,000	<b>\$3,921</b>
<b>Preventive care visit</b>	\$0	\$0	\$0	\$0

<b>Primary care</b>		Network: <b>\$32</b> Out-of- Network: 25%	Network: <b>\$28</b> Out-of- Network: 25%	<b>\$22</b>	<b>\$22</b>
<b>Specialty care</b>		Network: <b>\$50</b> Out-of- Network: 25%	Network: <b>\$44</b> Out-of- Network: 25%	<b>\$33</b>	<b>\$33</b>
<b>Emergency room visit</b>		Network: <b>\$133</b> Out-of- Network: 25%	Network: <b>\$89</b> Out-of- Network: 25%	<b>\$67</b>	<b>\$67</b>
<b>Urgent care center visit</b>		Network: <b>\$32</b> Out-of- Network: 25%	Network: <b>\$44</b> Out-of- Network: 25%	<b>\$33</b>	<b>\$33</b>
<b>Ambulatory surgery</b>		Network: 20% Out-of- Network: 25%	Network: <b>\$106</b> Out-of- Network: 25%	<b>\$67</b>	<b>\$67</b>
<b>Ambulance, outpatient ground</b>		Network: <b>\$99</b> Out-of- Network: 25%	Network: <b>\$67</b> Out-of- Network: 25%	<b>\$44</b>	<b>\$44</b>
<b>Ambulance, outpatient air</b>		Network and Out-of- Network: 25%	Network and Out-of- Network: 25%	<b>\$20</b>	<b>\$20</b>
<b>Durable medical equipment</b>		Network: 20% Out-of- Network: 25%	Network: 20% Out-of- Network: 25%	20%	20%
<b>Inpatient admission</b>	Network	\$250/day up to 25% of hospital charges, plus 20% of separately billed services	<b>\$196</b> per admission	<b>\$168</b> per admission	<b>\$168</b> per admission
	Out-of- Network	≠ \$1,034/day up to 25% of hospital charges, plus 25% of separately billed services	25%	<b>\$168</b> per admission	<b>\$168</b> per admission
<b>Inpatient skilled nursing facility/rehab facility</b>		Network: \$250/day up to 25% of hospital charges, plus	Network: \$56 per day; Out-of-	<b>\$33</b> per day	<b>\$33</b> per day

	20% of separately billed services; Out-of-Network: 25%	Network: lesser of \$336 per day or 20%		
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‡ This is the 2021 rate. The 2022 out-of-pocket expense will be available mid-December once the diagnosis-related group payment rates are calculated.

Note: The costs for maternity (delivery and inpatient) are the same costs for inpatient admission. The costs for mental health (inpatient) are the same costs for inpatient admission. Mental health (primary care) follow the same costs as for primary care. Mental health (specialty care) follow the same costs as for specialty care.

### Premiums

When enrolled in a premium-based health plan (TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult Prime, TRICARE Young Adult Select, or Continued Health Care Benefit Program), you pay a monthly or quarterly premium.

Table 5 shows the monthly premium for TRICARE Reserve Select, TRICARE Retired Reserve, TRICARE Young Adult Prime, and TRICARE Young Adult Select. Changes from 2021 costs are in bold.

**Table 5: Calendar Year 2022 TRICARE Premium-Based Health Plans Monthly Premiums**

Premium-based health plan	Member Only	Member and Family
TRICARE Reserve Select	<b>\$46.70</b>	<b>\$229.99</b>
TRICARE Retired Reserve	<b>\$502.32</b>	<b>\$1,206.99</b>
TRICARE Young Adult Prime	<b>\$512</b>	Not available
TRICARE Young Adult Select	<b>\$265</b>	Not available

If you have the Continued Health Care Benefit Program, you pay a quarterly premium.

**Table 6: Fiscal Year 2022 TRICARE Premium-Based Health Plans Quarterly Premiums (Oct. 1, 2021–Sept. 30, 2022)**

Premium-based health plan	Member Only	Member and Family
Continued Health Care Benefit Program	\$1,654	\$4,079

SOURCE: Excerpts from TRICARE Communications Bulletin (Published Nov. 5, 2021)