





Up-to-the-minute information for TRICARE® providers in the East Region ISSUE #1 | 2026



What to include when submitting medical documentation

When PGBA requests medical documentation for a claim, please ensure all requested documents are included. Returning all required documentation ensures your claims are processed quickly and correctly while avoiding delays. Make sure to utilize the letter from PGBA as the coversheet when submitting the medical documentation. If the letter is not available, the submitted records must include the following:

- · Beneficiary name
- Beneficiary Sponsor ID
- Beneficiary claim number
- Date(s) of service
- · Procedure/service performed

See the <u>Electronic Data Interchange (EDI) Provider</u> <u>Trading Partner Agreement</u>, for more information.

Benefits of using Electronic Funds Transfer (EFT)

Simplify your claims filing and sign up to use EFT for faster payment!

Filing electronic TRICARE claims offers:

- · Faster claims processing
- Reduction of payment and data entry errors
- · Immediate verification of claims received
- Ease of use and support to assist with Electronic Data Interface (EDI) transactions.

Sign up for EFT today!





2026 pharmacy copayment changes

2026 TRICARE pharmacy copayment changes

On January 1, 2026, most TRICARE beneficiaries saw updated, increased copayment amounts for prescription medications. This applies to all beneficiaries except Active Duty Service Members (ADSM), dependent survivors of ADSMs and medically-retired service members and their dependents. These changes are mandated by the National Defense Authorization Act for Fiscal Year 2018 (NDAA FY2018).

What you need to know

All copayment updates will be automatically reflected in the system. You do not need to make any changes to billing or claims processes.

Key messages for your conversations with beneficiaries

As mandated by Congress, changes to TRICARE pharmacy copayments will occur at:

- TRICARE Home Delivery, which includes the specialty pharmacy Accredo, to provide expanded clinical services for patients with complex and chronic health conditions
- · Retail network pharmacies
- Retail non-network pharmacies
- Military pharmacies will continue to offer a \$0 copay for all formulary drugs.
- To learn more about the coverage and cost of medication, visit the TRICARE Formulary Search Tool (FST). The FST will reflect 2026-2027 copayments on January 1, 2026.



Copayment changes overview

Pharmacy type	Drug tier	2025 copay	2026 copay
Retail (up to 30-day supply)	Generic formulary	\$16	\$16
Retail (up to 30-day supply)	Brand-name formulary	\$43	\$48
Retail (up to 30-day supply)	Non- formulary	\$76	\$85
Home delivery (up to 90-day supply)	Generic formulary	\$13	\$14
Home delivery (up to 90-day supply)	Brand-name formulary	\$38	\$44
Home delivery (up to 90-day supply)	Non- formulary	\$76	\$85
Military pharmacy	All formulary drugs	\$0	\$0

Additional information

- If beneficiaries ask about the copayment changes, please explain these updates are mandated by law and that there is no impact to their access to pharmacy services.
- Encourage beneficiaries to utilize the TRICARE FST to confirm the applicable coverage rules and review the coverage details for all three points of service (military pharmacies, home delivery and retail pharmacies).
- Remind beneficiaries that military pharmacies continue to offer \$0 copays for formulary drugs.

Provider support

For beneficiary-related questions or assistance, you can contact Express Scripts at (877) 363-1303 or visit the Express Scripts Healthcare Providers page.







We're committed to the accuracy of your claims!

Humana Military uses ClaimsXten code editing software in the claim process. The use of code editing software is required by the TRICARE Reimbursement Manual (TRM) Ch. 1, Sec. 3, 1.0, which states, "The contractor shall use a claims auditing software (Claimcheck® or equivalent) to ensure correct coding on all claims. It is the contractor's responsibility to obtain the materials necessary to use the software, including any updates. Claims processed under the Outpatient Prospective Payment System (OPPS) are not subject to this software."

Humana Military currently employs multiple edits to ensure claims are being paid by correct coding principles. The edits, or rules, are divided into three groups:

- Select rules based on CMS and NCCI coding guidelines
- Fraud, waste and abuse a set of rules that look for excessive utilization and upcoding/creative billing
- **Policy management module** a separate application that allows for custom configuration of rules

Code editing rules are applied during prepayment. While most rules will apply a denial at the code level, some rules (for example, rules that place limits on units or rules that look for appropriate modifiers) will deny the code and add a new line with the appropriate coding. Application of rules in this manner reduces the need for claims resubmissions.

For more information on code auditing, please visit the <u>audit section of the Claims page</u>.

If you suspect fraud or abuse, <u>make a report online</u> or by phone at (800) 333-1620.

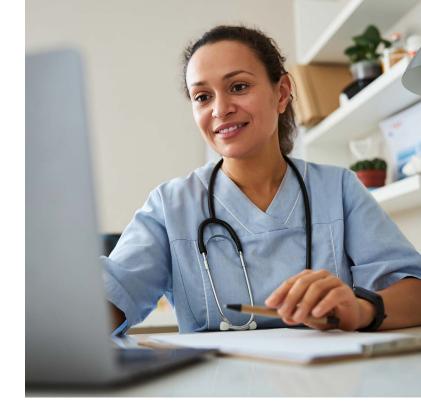
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Be sure to follow us on Facebook to get all the latest from <u>Humana Military</u>.







Keep your information accurate!

Keeping your information up-to-date in our directory helps ensure TRICARE beneficiaries can easily find you and your practice. Accurate data also guarantees that claims payments reach you and that referrals can be assigned to you appropriately. The Defense Health Agency (DHA) requires providers to update their data at least every six months. Providers who do not update their data, are required to be removed from the directory.

Our eShare tool was created for the purpose of easier and more streamlined demographic data submissions by roster. The eShare platform allows for:

- Controlling how your data appears in Humana Military's directory
- Designating only those staff members you want to have access to the account
- Obtaining instant confirmation that your submission has been accepted and receiving alerts and instructions if additional information is needed.

Most updates are completed in 48 hours!

If you would like to sign up for eShare and schedule a demonstration, contact your TRICARE representative in provider self-service. <u>Create a self-service account</u> or <u>view webinars and other resources</u>.