

§ 1076d. TRICARE program: TRICARE Standard coverage for members of the Selected Reserve

(a) Eligibility.—(1) Except as provided in paragraph (2), a member of the Selected Reserve of the Ready Reserve of a reserve component of the armed forces is eligible for health benefits under TRICARE Standard as provided in this section.

(2) Paragraph (1) does not apply to a member who is enrolled, or is eligible to enroll, in a health benefits plan under chapter 89 of title 5.

(b) Termination of Eligibility Upon Termination of Service.—Eligibility for TRICARE Standard coverage of a member under this section shall terminate upon the termination of the member's service in the Selected Reserve.

(c) Family Members.—While a member of a reserve component is covered by TRICARE Standard under the section, the members of the immediate family of such member are eligible for TRICARE Standard coverage as dependents of the member. If a member of a reserve component dies while in a period of coverage under this section, the eligibility of the members of the immediate family of such member for TRICARE Standard coverage shall continue for six months beyond the date of death of the member.

(d) Premiums.—(1) A member of a reserve component covered by TRICARE Standard under this section shall pay a premium for that coverage.

(2) The Secretary of Defense shall prescribe for the purposes of this section one premium for TRICARE Standard coverage of members without dependents and one premium for TRICARE Standard coverage of members with dependents referred to in subsection (f)(1). The premium prescribed for a coverage shall apply uniformly to all covered members of the reserve components.

(3)(A) The monthly amount of the premium in effect for a month for TRICARE Standard coverage under this section shall be the amount equal to 28 percent of the total monthly amount determined on an appropriate actuarial basis as being reasonable for that coverage.

(B) The appropriate actuarial basis for purposes of subparagraph (A) shall be determined, for each calendar year after calendar year 2009, by utilizing the actual cost of providing benefits under this section to members and their dependents during the calendar years preceding such calendar year.

(4) The premiums payable by a member of a reserve component under this subsection may be deducted and withheld from basic pay payable to the member under section 204 of title 37 or from compensation payable to the member under section 206 of such title. The Secretary shall prescribe the requirements and procedures applicable to the payment of premiums.

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(5) Amounts collected as premiums under this subsection shall be credited to the appropriation available for the Defense Health Program Account under section 1100 of this title, shall be merged with sums in such Account that are available for the fiscal year in which collected, and shall be available under subsection (b) of such section for such fiscal year.

(e) Regulations.—The Secretary of Defense, in consultation with the other administering Secretaries, shall prescribe regulations for the administration of this section.

(f) Definitions.—In this section:

(1) The term “immediate family”, with respect to a member of a reserve component, means all of the member’s dependents described in subparagraphs (A), (D), and (I) of section 1072(2) of this title.

(2) The term “TRICARE Standard” means—

(A) medical care to which a dependent described in section 1076(a)(2) of this title is entitled; and

(B) health benefits contracted for under the authority of section 1079(a) of this title and subject to the same rates and conditions as apply to persons covered under that section.

NOTES

Source

(Added Pub. L. 108-375, div. A, title VII, Sec. 701(a)(1), Oct. 28, 2004, 118 Stat. 1980; amended Pub. L. 109-163, div. A, title VII, Sec. 701(a)-(f)(1), Jan. 6, 2006, 119 Stat. 3339, 3340; Pub. L. 109-364, div. A, title VII, Secs. 704(c), 706(a)-(c), Oct. 17, 2006, 120 Stat. 2280, 2282; **Pub. L. 110-181, div. A, title VII, Sec. 701(c), Jan. 28, 2008, 122 Stat. 188; Pub. L. 110-417, [div. A], title VII, Sec. 704(a), Oct. 14, 2008, 122 Stat. 4498; Pub. L. 111-84, div. A, title X, Sec. 1073(a)(11), Oct. 28, 2009, 123 Stat. 2473.**)

Amendments

2009—Pub. L. 111-84 substituted “Standard” for “standard” in section catchline.

2008—Subsec. (d)(3). Pub. L. 110-417 designated existing provisions as subpar. (A), substituted “determined” for “that the Secretary determines”, struck out at end “During the period beginning on April 1, 2006, and ending on September 30, 2008, the monthly amount of the premium may not be increased above the amount in effect for the month of March 2006.”, and added subpar. (B). Pub. L. 110-181 substituted “September 30, 2008” for “September 30, 2007”.

2006—Pub. L. 109-364, Sec. 706(c)(2), substituted “TRICARE standard coverage for members of the Selected Reserve” for “coverage for members of reserve components who commit to continued service in the Selected Reserve after release from active duty in support of a contingency operation” in section catchline.

Pub. L. 109-163, Sec. 701(f)(1), substituted “active duty in support of a contingency operation” for “active duty” in section catchline.

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Subsec. (a). Pub. L. 109-364, Sec. 706(a), designated introductory provisions as par. (1), substituted “Except as provided in paragraph (2), a member” for “A member”; substituted period at end for “after the member completes service on active duty to which the member was called or ordered for a period of more than 30 days on or after September 11, 2001, under a provision of law referred to in section 101(a)(13)(B), if the member—”; added par. (2), and struck out former pars. (1) and (2) which read as follows:

“(1) served continuously on active duty for 90 or more days pursuant to such call or order; and
“(2) not later than 90 days after release from such active-duty service, entered into an agreement with the Secretary concerned to serve continuously in the Selected Reserve for a period of one or more whole years following such date.”

Subsec. (a)(2). Pub. L. 109-163, Sec. 701(d), substituted “not later than 90 days after release” for “on or before the date of the release”.

Subsec. (b). Pub. L. 109-364, Sec. 706(b), substituted “Termination of Eligibility Upon Termination of Service” for “Period of Coverage” in heading, struck out “(4)” before “Eligibility”, and struck out pars. (1) to (3) and (5), which related to beginning of period of coverage, length of coverage period, period of coverage in the case of a member recalled to active duty, and coverage for a member of the Individual Ready Reserve.

Subsec. (b)(2). Pub. L. 109-163, Sec. 701(a)(2), substituted “Subject to paragraph (3) and unless earlier terminated under paragraph (4)” for “Unless earlier terminated under paragraph (3)”.

Subsec. (b)(3), (4). Pub. L. 109-163, Sec. 701(a)(1), added par. (3) and redesignated former par. (3) as (4).

Subsec. (b)(5). Pub. L. 109-163, Sec. 701(b), added par. (5).

Subsec. (c). Pub. L. 109-163, Sec. 701(c), inserted at end “If a member of a reserve component dies while in a period of coverage under this section, the eligibility of the members of the immediate family of such member for TRICARE Standard coverage shall continue for six months beyond the date of death of the member.”

Subsec. (d)(3). Pub. L. 109-364, Sec. 704(c), inserted at end “During the period beginning on April 1, 2006, and ending on September 30, 2007, the monthly amount of the premium may not be increased above the amount in effect for the month of March 2006.”

Subsec. (e). Pub. L. 109-364, Sec. 706(c)(1)(A), (B), redesignated subsec. (g) as (e) and struck out heading and text of former subsec. (e). Text read as follows: “The service agreement required of a member of a reserve component under subsection (a)(2) is separate from any other form of commitment of the member to a period of obligated service in that reserve component and may cover any part or all of the same period that is covered by another commitment of the member to a period of obligated service in that reserve component.”

Subsec. (f)(2). Pub. L. 109-163, Sec. 701(e), amended par. (2) generally. Prior to amendment, par. (2) read as follows: “The term ‘TRICARE Standard’ means the Civilian Health and Medical Program of the Uniformed Services option under the TRICARE program.”

Subsec. (f)(3). Pub. L. 109-364, Sec. 706(c)(1)(C), struck out par. (3) which read as follows: “The term ‘member recalled to active duty’ means, with respect to a member who is eligible for coverage under this section based on a period of active duty service, a member who is called or ordered to active duty for an additional period of active duty subsequent to the period of active duty on which that eligibility is based.”

Pub. L. 109-163, Sec. 701(a)(3), added par. (3).

Subsec. (g). Pub. L. 109-364, Sec. 706(c)(1)(B), redesignated subsec. (g) as (e).

Effective Date Of 2008 Amendment

Pub. L. 110-417, [div. A], title VII, Sec. 704(c), Oct. 14, 2008, 122 Stat. 4499, provided that: “The amendments made by this section [amending this section] shall take effect as of October 1, 2008.”

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Effective Date Of 2006 Amendment

Pub. L. 109-364, div. A, title VII, Sec. 706(g), Oct. 17, 2006, 120 Stat. 2282, provided that: "The Secretary of Defense shall ensure that health care under TRICARE Standard is provided under section 1076d of title 10, United States Code, as amended by this section, beginning not later than October 1, 2007."

Savings Provision

Pub. L. 109-364, div. A, title VII, Sec. 706(f), Oct. 17, 2006, 120 Stat. 2282, **as amended by Pub. L. 110-181, div. A, title VII, Sec. 706(a), Jan. 28, 2008, 122 Stat. 189**, provided that:

"(1) Except as provided in paragraph (2), enrollments in TRICARE Standard that are in effect on the day before the date of the enactment of this Act [Oct. 17, 2006] under section 1076d of title 10, United States Code, as in effect on such day, shall be continued until terminated after such day under such section 1076d as amended by this section."

"(2) The enrollment of a member in TRICARE Standard that is in effect on the day before health care under TRICARE Standard is provided pursuant to the effective date in subsection (g) [set out as an Effective Date of 2006 Amendment note above] shall not be terminated by operation of the exclusion of eligibility under subsection (a)(2) of such section 1076d, as so amended, for the duration of the eligibility of the member under TRICARE Standard as in effect on October 16, 2006."

[Pub. L. 110-181, div. A, title VII, Sec. 706(b), Jan. 28, 2008, 122 Stat. 189, provided that: "The amendments made by subsection (a) [amending section 706(f) of Pub. L. 109-364, set out above] shall take effect on October 1, 2007."]

Implementation

Pub. L. 108-375, div. A, title VII, Sec. 701(b), Oct. 28, 2004, 118 Stat. 1981, provided that:

"(1) The Secretary of Defense shall implement section 1076d of title 10, United States Code, not later than 180 days after the date of the enactment of this Act [Oct. 28, 2004].

"(2)(A) A member of a reserve component of the Armed Forces who performed active-duty service described in subsection (a) of section 1076d of title 10, United States Code, for a period beginning on or after September 11, 2001, and was released from that active-duty service before the date of the enactment of this Act, or is released from that active-duty service on or within 180 days after the date of the enactment of this Act, may, for the purpose of paragraph (2) of such subsection, enter into an agreement described in such paragraph not later than one year after the date of the enactment of this Act. TRICARE Standard coverage (under such section 1076d) of a member who enters into such an agreement under this paragraph shall begin on the later of—

"(i) the date applicable to the member under subsection (b) of such section; or

"(ii) the date of the agreement.

"(B) The Secretary of Defense shall take such action as is necessary to ensure, to the maximum extent practicable, that members of the reserve components eligible to enter into an agreement as provided in subparagraph (A) actually receive information on the opportunity and procedures for entering into such an agreement together with a clear explanation of the benefits that the members are eligible to receive as a result of entering into such an agreement under section 1076d of title 10, United States Code."

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