

**TRICARE DENTAL PROGRAM**

<b>(a) General provisions--</b> .....	1
(1) Purpose. ....	1
(2) Applicability.--.....	1
(i) Geographic scope. ....	1
(ii) Agency. ....	1
(iii) Exclusion of benefit services performed in military dental care facilities. ....	2
(iv) <b>Exception to the exclusion of services performed in military dental care facilities.</b> .....	<b>2</b>
(3) Authority and responsibility.-- .....	2
(i) Legislative authority.-- .....	2
(A) Joint regulations. ....	2
(B) Administration. ....	2
(ii) Organizational delegations and assignments--.....	2
(A) Assistant Secretary of Defense (Health Affairs) (ASD(HA)). ....	2
(B) Evidence of eligibility.....	3
(4) Preemption of State and local laws. ....	3
(5) Plan funds-- .....	3
(i) Funding sources. ....	3
(ii) Disposition of funds.....	3
(iii) Plan.....	3
(iv) Contracting out.....	4
(6) Role of Health Benefits Advisor (HBA). ....	4
(7) Right to information.....	4
(8) Utilization review and quality assurance.....	5
<b>(b) Definitions.....</b>	<b>5</b>
(1) Assignment of benefits. ....	5
(2) Authorized provider. ....	5
(3) Beneficiary.....	5
(4) Beneficiary liability. ....	5
(5) By report. ....	6
(6) Contingency operation. ....	6
(7) Cost-share. ....	6
(8) Defense Enrollment Eligibility Reporting System (DEERS). ....	6
(9) Dental hygienist. ....	6
(10) Dentist. ....	6
(11) Diagnostic services.....	6
(12) Endodontics.....	6
(13) Initial determination. ....	7
(14) Nonparticipating provider. ....	7
(15) Oral and maxillofacial surgery.....	7
(16) Orthodontics.....	7
(17) Participating provider. ....	7
(18) Party to the initial determination.....	7
(19) Periodontics.....	7

TMA Version - April 2005

TMA Version - April 2005

- (20) Preventive services. . . . . 7
- (21) Prosthodontics. . . . . 8
- (22) Provider. . . . . 8
- (23) Restorative services. . . . . 8
- (24) Sealants. . . . . 8
  
- (c) Eligibility and enrollment-- . . . . . 8**
  - (1) General. . . . . 8
  - (2) Eligibility-- . . . . . 8
    - (i) Persons eligible. . . . . 8
      - (1) Spouse. . . . . 8
      - (2) Child. . . . . 8
    - (ii) Determination of eligibility status and evidence of eligibility-- . . . . . 9
      - (A) Eligibility determination responsibility of the Uniformed Services. . . . . 9
      - (B) Procedures for determination of eligibility. . . . . 9
      - (C) Evidence of eligibility required. . . . . 9
  - (3) Enrollment-- . . . . . 9
    - (i) Previous plans-- . . . . . 9
      - (A) Basic Active Duty Dependents Dental Benefit Plan. . . . . 9
      - (B) Expanded Active Duty Dependents Dental Benefit Plan. . . . . 9
    - (ii) TRICARE Dental Program (TDP)-- . . . . . 9
      - (A) Election of coverage. . . . . 9
      - (B) Premiums-- . . . . . 10
        - (i) Single premium. . . . . 10
        - (ii) Family premium. . . . . 10
      - (2) Exceptions. . . . . 10
      - (C) Enrollment period-- . . . . . 10
        - (1) General. . . . . 10
        - (2) Special enrollment period for Reserve component members ordered to active duty in support of contingency operations. . . . . 10
        - (3) Continuation of enrollment from Expanded Active Duty Dependents Dental Benefit Plan. . . . . 11
        - (4) Continuation of enrollment from TRICARE Selected Reserve Dental Program. . . . . 11
      - (D) Beginning dates of eligibility. . . . . 11
      - (E) Changes in and termination of enrollment. . . . . 11
        - (1) Changes in status of active duty, Selected Reserve or Individual Ready Reserve member. . . . . 11
        - (2) Continuation of eligibility. . . . . 12
        - (3) Changes in status of dependent.-- . . . . . 12
          - (i) Divorce. . . . . 12
          - (ii) Annulment. . . . . 12
          - (iii) Adoption. . . . . 12
          - (iv) Marriage of child. . . . . 13
          - (v) Disabling illness or injury of child age 21 or 22 who has eligibility based on his or her student status. . . . . 13
  - (4) Other.-- . . . . . 13
    - (i) Disenrollment because of no eligible beneficiaries. . . . . 13
    - (ii) Option to disenroll as a result of a change in active duty station. . . . . 13
    - (iii) Option to disenroll due to transfer to OCONUS service area. . . . . 13

(iv) Option to disenroll after an initial one (1) year enrollment. . . . . 14

**(d) Premium sharing--** . . . . . 14

(1) General. . . . . 14

(i) Members required to pay a portion of the premium cost. . . . . 14

(ii) Members required to pay the full premium cost. . . . . 14

(2) Proportion of premium share. . . . . 15

(3) Provision for increases in active duty, Selected Reserve and Individual Ready Reserve member’s premium share. . . . . 15

(4) Reduction of premium share for enlisted members. . . . . 15

(5) Reduction of cost-shares for enlisted members. . . . . 15

(6) Premium payment method. . . . . 15

(7) Annual notification of premium rates. . . . . 15

**(e) Plan benefits--** . . . . . 16

(1) General.-- . . . . 16

(i) Scope of benefits. . . . . 16

(ii) Authority to act for the plan. . . . . 16

(iii) Dental benefits brochure.-- . . . . 16

(A) Content. . . . . 16

(B) Distribution. . . . . 16

(iv) Alternative course of treatment policy. . . . . 16

(2) Benefits. . . . . 16

(i) Diagnostic and preventive services. . . . . 17

(A) Diagnostic services. . . . . 17

(B) Preventive services. . . . . 17

(ii) General services and services “by report”. . . . . 17

(iii) Restorative services. . . . . 17

(iv) Endodontic services. . . . . 18

(v) Periodontic services. . . . . 18

(vi) Prosthodontic services. . . . . 18

(vii) Orthodontic services. . . . . 19

(viii) Oral and maxillofacial surgery services. . . . . 19

(ix) Exclusion of adjunctive dental care. . . . . 20

(x) Benefit limitations and exclusions. . . . . 20

(xi) Limitation on reduction of benefits. . . . . 20

(3) Cost-shares, liability and maximum coverage.-- . . . . 20

(i) Cost-shares. . . . . 20

(ii) Dental plan contractor liability. . . . . 21

(iii) Maximum coverage amounts. . . . . 21

**(f) Authorized providers--** . . . . . 21

(1) General. . . . . 21

(2) Authorized provider status does not guarantee payment of benefits. . . . . 21

(3) Utilization review and quality assurance. . . . . 22

(4) Provider required. . . . . 22

(5) Participating provider. . . . . 22

(6) Nonparticipating provider. . . . . 22

(i) Assignment of benefits. . . . . 22

(ii) No assignment of benefits. . . . . 22

TMA Version - April 2005

TMA Version - April 2005

- (7) Alternative delivery system-- ..... 23
  - (i) General..... 23
  - (ii) Defined. .... 23
  - (iii) Elective or exclusive arrangement..... 23
  - (iv) Provider election of participation. .... 23
  - (v) Limitation on authorized providers. .... 23
  - (vi) Charge agreements. .... 23
  
- (g) Benefit payment-- ..... 23**
  - (1) General. .... 23
  - (2) Benefit payment. .... 23
  - (3) Fraud, abuse, and conflict of interest. .... 24
  
- (h) Appeal and hearing procedures. .... 24**
  - (1) General. .... 24
    - (i) Initial determination-- ..... 24
      - (A) Notice of initial determination and right to appeal. .... 24
      - (B) Effect of initial determination..... 24
    - (ii) Participation in an appeal..... 24
      - (A) Parties to the initial determination. .... 24
      - (B) Representative. .... 25
    - (iii) Burden of proof. .... 25
    - (iv) Evidence in appeal and hearing cases. .... 25
    - (v) Late filing. .... 25
    - (vi) Appealable issue. .... 25
    - (vii) Amount in dispute-- ..... 26
      - (A) General..... 26
      - (B) Calculated amount..... 26
    - (viii) Levels of appeal. .... 26
    - (ix) Appeal decision. .... 26
  - (2) Reconsideration. .... 26
  - (3) Formal review. .... 26
  - (4) Hearing-- ..... 26
    - (i) General..... 26
    - (ii) Authority of the hearing officer..... 26
  - (5) Final decision. .... 26
  
- (i) Implementing Instructions. .... 26**