

## Part 199.13

### TRICARE Dental Program

Revision:

Rule:

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**(a) General provisions--**

- (1) Purpose.
- (2) Applicability.--
  - (i) Geographic scope.
  - (ii) Agency.
  - (iii) Exclusion of benefit services performed in military dental care facilities.
  - (iv) Exception to the exclusion of services performed in military dental care facilities.
- (3) Authority and responsibility.--
  - (i) Legislative authority.--
    - (A) Joint regulations.
    - (B) Administration.
  - (ii) Organizational delegations and assignments--
    - (A) Assistant Secretary of Defense (Health Affairs) (ASD(HA)).
    - (B) Evidence of eligibility.
- (4) Preemption of State and local laws.
- (5) Plan funds--
  - (i) Funding sources.
  - (ii) Disposition of funds.
  - (iii) Plan.
  - (iv) Contracting out.
- (6) Role of Health Benefits Advisor (HBA).
- (7) Right to information.
- (8) Utilization review and quality assurance.

**(b) Definitions.**

- (1) Assignment of benefits.
- (2) Authorized provider.
- (3) Beneficiary.
- (4) Beneficiary liability.
- (5) By report.
- (6) Contingency operation.
- (7) Cost-share.
- (8) Defense Enrollment Eligibility Reporting System (DEERS).
- (9) Dental hygienist.
- (10) Dentist.
- (11) Diagnostic services.
- (12) Endodontics.
- (13) Initial determination.
- (14) Nonparticipating provider.

- (15) Oral and maxillofacial surgery.
- (16) Orthodontics.
- (17) Participating provider.
- (18) Party to the initial determination.
- (19) Periodontics.
- (20) Preventive services.
- (21) Prosthodontics.
- (22) Provider.
- (23) Restorative services.

**(c) Eligibility and enrollment--**

- (1) General.
- (2) Eligibility--
  - (i) Persons eligible.
  - (ii) Determination of eligibility status and evidence of eligibility--
    - (A) Eligibility determination responsibility of the Uniformed Services.
    - (B) Procedures for determination of eligibility.
    - (C) Evidence of eligibility required.
- (3) Enrollment--
  - (i) Previous plans--
    - (A) Basic Active Duty Dependents Dental Benefit Plan.
    - (B) Expanded Active Duty Dependents Dental Benefit Plan.
  - (ii) TRICARE Dental Program (TDP)--
    - (A) Election of coverage.
    - (B) Premiums--
    - (C) Enrollment period--
    - (D) Beginning dates of eligibility.
    - (E) Changes in and termination of enrollment.

**(d) Premium sharing--**

- (1) General.
  - (i) Members required to pay a portion of the premium cost.
  - (ii) Members required to pay the full premium cost.
- (2) Proportion of premium share.
- (3) Provision for increases in active duty, Selected Reserve and Individual Ready Reserve member's premium share.
- (4) Reduction of premium share for enlisted members.
- (5) Reduction of cost-shares for enlisted members.
- (6) Premium payment method.
- (7) Annual notification of premium rates.

**(e) Plan benefits--**

- (1) General.--
  - (i) Scope of benefits.
  - (ii) Authority to act for the plan.
  - (iii) Dental benefits brochure.--
    - (A) Content.
    - (B) Distribution.
  - (iv) Alternative course of treatment policy.

- (2) Benefits.
  - (i) Diagnostic and preventive services.
    - (A) Diagnostic services.
    - (B) Preventive services.
  - (ii) General services and services "by report".
  - (iii) Restorative services.
  - (iv) Endodontic services.
  - (v) Periodontic services.
  - (vi) Prosthodontic services.
  - (vii) Orthodontic services.
  - (viii) Oral and maxillofacial surgery services.
  - (ix) Exclusion of adjunctive dental care.
  - (x) Benefit limitations and exclusions.
  - (xi) Limitation on reduction of benefits.
- (3) Cost-shares, liability and maximum coverage.--
  - (i) Cost-shares.
  - (ii) Dental plan contractor liability.
  - (iii) Maximum coverage amounts.

**(f) Authorized providers--**

- (1) General.
- (2) Authorized provider status does not guarantee payment of benefits.
- (3) Utilization review and quality assurance.
- (4) Provider required.
- (5) Participating provider.
- (6) Nonparticipating provider.
  - (i) Assignment of benefits.
  - (ii) No assignment of benefits.
- (7) Alternative delivery system--
  - (i) General.
  - (ii) Defined.
  - (iii) Elective or exclusive arrangement.
  - (iv) Provider election of participation.
  - (v) Limitation on authorized providers.
  - (vi) Charge agreements.

**(g) Benefit payment--**

- (1) General.
- (2) Benefit payment.
- (3) Fraud, abuse, and conflict of interest.

**(h) Appeal and hearing procedures.**

- (1) General.
  - (i) Initial determination--
    - (A) Notice of initial determination and right to appeal.
    - (B) Effect of initial determination.
  - (ii) Participation in an appeal.
    - (A) Parties to the initial determination.
    - (B) Representative.
  - (iii) Burden of proof.

- (iv) Evidence in appeal and hearing cases.
- (v) Late filing.
- (vi) Appealable issue.
- (vii) Amount in dispute--
  - (A) General.
  - (B) Calculated amount.
- (viii) Levels of appeal.
- (ix) Appeal decision.
- (2) Reconsideration.
- (3) Formal review.
- (4) Hearing--
  - (i) General.
  - (ii) Authority of the hearing officer.
- (5) Final decision.

**(i) Implementing Instructions.**