

## 7700 ARLINGTON BOULEVARD, SUITE 5101 FALLS CHURCH, VIRGINIA 22042-5101

January 31, 2025

To Our Military and Veteran Service Organizations,

I appreciate your continued advocacy on behalf of the military beneficiaries that we are both privileged to serve. I'm also grateful for the candor and thoughtfulness you shared with us at the Defense Health Agency this week in discussing the challenges that our military families have experienced in the TRICARE West region and the transition of managed care responsibilities to the incoming contractor, TriWest Healthcare Alliance.

Our overriding focus is on our beneficiaries. We are taking a series of actions to ensure our beneficiaries are insulated as much as possible from any adverse effects from these performance issues detailed below; we are putting in place corrective actions to ensure shortcomings are fixed for the long-term, and we are working closely with TriWest to ensure we deliver on the contractual requirements to meet our beneficiaries' health care needs.

First and foremost, we are ensuring that every beneficiary can access the healthcare they need. I issued a blanket waiver last week that allows all TRICARE Prime beneficiaries referred for outpatient specialty care by their primary care manager to proceed with the needed care without requiring a TriWest approval. Patients may continue to use their existing providers, regardless of whether the provider has joined the TriWest network. Individuals who need healthcare should get that care regardless of TriWest's ability to manage this process. This waiver is effective through March 31, 2025. If the process for managing referrals has not been fixed by March 31st, I will ensure beneficiaries can continue to access specialty care.

Furthermore, beneficiaries who have referrals for care from the previous contractor, HealthNet Federal Services, will be honored through June 30, 2025, or the last date on the authorization, whichever comes first. These referrals are covered by the same approval waiver as described in the preceding paragraph.

Second, I have also issued an extension for beneficiaries to set up new premium payment processes with TriWest until February 28, 2025. My promise is this – no beneficiaries will lose their healthcare coverage due to challenges with transferring their premium payments from the previous contractor to TriWest. We will exhaust all options to reach every beneficiary by email, mail, text and phone and ensure they understand the process for setting up these payments. TriWest has improved the web portal challenges for processing these payments, so individuals can also go to <a href="https://tricare-bene.triwest.com/signin">https://tricare-bene.triwest.com/signin</a> to set these payments up.

Third, the call center hold times remain unacceptably high with frustrated individual callers hanging up before having their problems resolved. The referral waiver and premium payment extensions should reduce some call volume. In addition, TriWest has established a callback capability, and they are onboarding additional staff now. Our DHA team is monitoring call center performance daily, and continuing to explore additional avenues to get beneficiaries' questions answered.

We have implemented daily synchronization meetings, which include representatives from TriWest and across the Department, to ensure solutions are implemented in a timely and coordinated fashion. I will not rest until I am confident that we are delivering on all of our obligations so that beneficiaries can access their healthcare information quickly and easily.

I have asked our TRICARE Team to set up bi-weekly telephone calls with all of you to keep you apprised of this progress and address any issues that you want to bring to us.

As always, you are welcome to reach out to me directly if needed.

I am deeply appreciative of your support for the people we serve – and for the Military Health System.

Sincerely,

TELITA CROSLAND

LTG, USA Director