Overseas Healthcare

What is Overseas Healthcare?

Effective February 12, 2016, emergency healthcare costs, including but not limited to the costs of medical evacuation and/or the costs associated with medical treatment at a local health care facility abroad, for a Department of Defense (DoD) civilian employee and authorized dependents may be prepaid by the Component. (memorandum attached)

Civilian employees and their family members are granted, on a space available basis, access to U.S. military medical treatment facilities (MTFs). National (non U.S.) or NATO-run medical facilities are not included unless a reciprocal agreement or some other type of understanding is in place. If no such agreement exists, use of such facilities must ultimately be reimbursed by Workers Compensation insurance, a private medical insurance provider, or the employee. When U.S. or coalition medical facilities are unavailable, health care providers located within local host country facilities are to be utilized. These facilities may require a cash payment prior to treatment or release.

For additional information regarding overseas healthcare please visit: https://www.opm.gov/healthcare-insurance/healthcare/plan-information/important-facts-aboutoverseas-coverage/

Eligibility

The regulations and procedures prescribed herein are applicable to DoD employees paid from both appropriated and non-appropriated (NAF) funds who are performing authorized official duty on behalf of DOD.

Payment for the cost of treatment of an emergency illness, injury, or medical condition, including obstetrical care, of an eligible employee or family member shall be based on the following conditions:

- 1. The individual must be a U.S. citizen and a DoD employee, or an eligible family of a DoD employee.
- 2. An employee and/or family member shall have completed any prescribed medical examinations and have received a medical clearance, or received an administrative waiver prior to overseas assignment.
- 3. Each newly acquired family member, whether acquired through birth, adoption, marriage, or legal guardianship, initially becomes eligible for benefits under this program upon becoming a family member. Continuation of these benefits beyond 90 days is subject to each new family member completing any prescribed medical examination or receiving administrative waiver of clearance within that period of time. Failure to undergo this examination or obtain the waiver within 90 days may disqualify the family member for further medical benefits until the examination is completed and a medical clearance or an administrative waiver issued.

- 4. The emergency illness, injury, or medical condition, including obstetrical care that requires hospitalization based on standards for treatment in a hospital as an inpatient or emergency care patient.
- 5. The emergency illness, injury, or medical condition including obstetrical care was incurred, caused, or materially aggravated while the employee or family member was located or stationed abroad.
- 6. Employees who are performing authorized official duty on behalf of DOD and their family members are strongly encouraged to maintain enrollment in the Federal Employees Health Benefits Program and/or any similar type of comprehensive major medical health insurance.
- 7. If the employee qualifies under Title 10 and TRICARE, the treatment of an illness, injury, or medical condition, including obstetrical care, for eligible employees and their family members stationed abroad, will be treated like any other TRICARE health plan benefit to which the employee and family members are eligible.
- 8. Prior to receiving medical services, employees must sign an authorization to transfer all rights to health insurance provider reimbursement(s) for covered medical expenses to the relevant installation or activity, or a document acknowledging indebtedness to the government for treatment and/or MEDEVAC services rendered.

Debt Acknowledgement and Prepayment Authority

All employees accepting overseas assignments or designated travel duty to overseas locations should receive the DoD Overseas Healthcare Fact Sheet and the Overseas Healthcare Checklist. The Checklist should be signed indicating that you are aware, understand and have considered the information in the stated item.

Prior to receiving medical services, employees must sign an authorization to transfer all rights to health insurance provider reimbursement(s). The debt acknowledgment and repayment agreement will provide for the reimbursement, through payroll deduction from the employee's future DoD civilian pay to Component operation and maintenance accounts, of all costs prepaid by the Component on behalf of the employee or the employee's dependents. The debt acknowledgment and repayment agreement will further provide that such repayments may be made by a third-party insurer and that reflect the employee's agreement to assign and transfer to the DoD Component any amounts received by the employee from such an insurer, up to and including the total costs prepaid by the Component.

What should I do prior to departing on an overseas assignment?

- 1. Receive, review, and understand the Overseas Healthcare Fact Sheet (INSERT)
- 2. Complete the Overseas Healthcare Checklist when travel orders are issued (INSERT Checklists- TDY ALSO)
- 3. It is recommended to set several thousands of dollars aside to cover a medical emergency
- 4. Learn what medical services your health insurance will cover overseas
- 5. Carry your insurance policy identity card and a claim form
- 6. Consider Travel Insurance

What are the steps I need to take should I need Overseas Healthcare?

- 1. If you experience a medical emergency while overseas, see the Overseas Health Care Program Guidance for the Decision Logic Table (INSERT APPENDIX B)
- 2. Complete the Authorization for Medical Services for Employee and/or Family Member (INSERT APPENDIX A)
- 3. The agency will pay the healthcare provider directly
- 4. You are responsible for the debt reimbursement not covered

For eligible employees traveling overseas, refer to the helpful links below:

- DoD Overseas Healthcare Fact Sheet (*Enclosure 4*)
- Overseas Healthcare Checklist (*Enclosure 5*)
- Overseas Healthcare Checklist-TDY Version
- Reporting of Illness or Injury
- Payment of Expenses
- Processing Payments
- Funding

To select an overseas healthcare plan, go to <u>https://www.opm.gov/healthcare-</u> <u>insurance/healthcare/plan-information/plans/2017</u> and review the nationwide plans available. Clicking on the Plan Brochure will allow you to see available overseas coverages.

If you have questions, please contact the DLA Benefits team at https://employees.hr.dla.mil/contactus/default.asp