Position Statement
on
TRICARE Contract and Billing Issues Limit Access to Dermatologic Services
(Approved by the Board of Directors: April 21, 2007;
Revised March 6, 2017)

The U.S. Department of Defense’s TRICARE program furnishes health care programs for active duty and retired uniformed service personnel and their families. TRICARE consists of three options: TRICARE Prime (managed care), TRICARE Extra (preferred provider), and TRICARE Standard (fee-for-service). Since 2001, TRICARE for Life is available to Medicare-eligible beneficiaries age 65 years and older. While TRICARE payments for physician services are based on the Medicare Part B physician fee schedule, it is often the case that TRICARE payment is less than the Medicare maximum allowable rate (MAC) for a locale. This situation, coupled with the complexity of the TRICARE billing claims system, is exacerbating the shortage of providers willing to accept and treat TRICARE patients and jeopardizing access to dermatologic services.

The Academy urges the US Department of Defense to assure that all TRICARE programs pay dermatologists at the level of Medicare maximum allowable charges (MAC) for a particular locale. The Academy also urges the DOD to raise the MAC that are presently below the Medicare allowable charges to be at least equivalent to Medicare levels.

The Academy urges its members to continue to serve TRICARE beneficiaries, out of respect for their dedicated service to the United States.