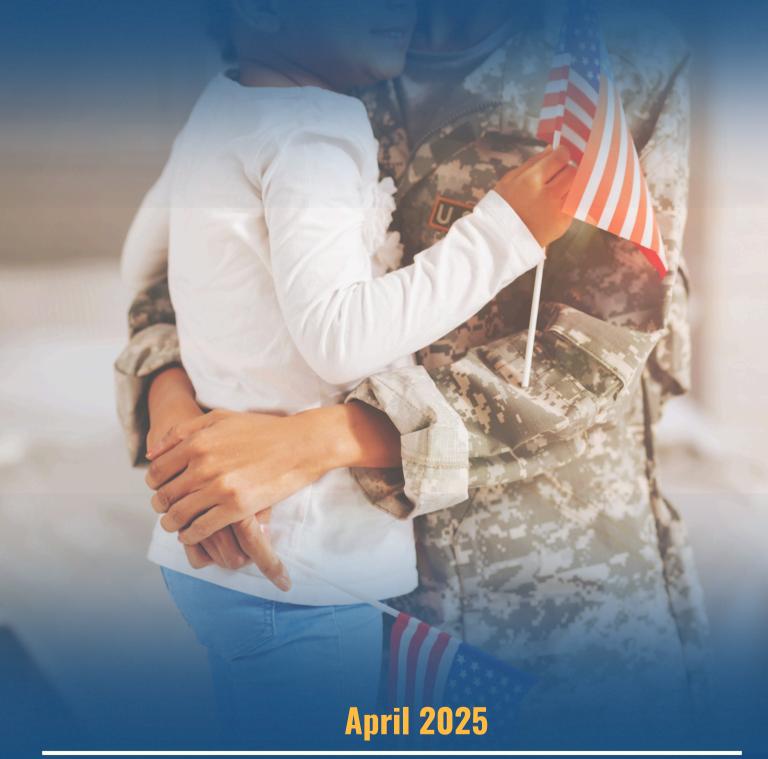
TRICARE Family Survey



Presented By:



About the Survey

On January 1, 2025, TRICARE— the essential health care benefit serving millions of service members, retirees, and their families—entered a new cycle of contracts for managing the military's healthcare system.

The TRICARE East contracting company, Humana Military, transitioned from Wisconsin Physicians Services (WPS) Health Solutions to a new fiscal intermediary/claims processor, Palmetto Government Business Administrators (PGBA). The TRICARE West region contract transitioned from Health Net Federal Services (HNFS) to TriWest Healthcare Alliance.

Both TRICARE contractors reassured healthcare providers and beneficiaries the transition would be seamless and there would be no service interruptions.

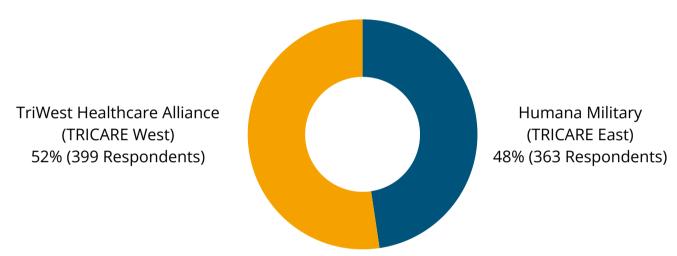
However, the transition has been marked by serious complications with many beneficiaries reporting barriers to receiving appropriate medical services and extra financial costs.

This survey was developed as a grassroots effort to determine effects to the beneficiaries' access to healthcare services. It is not intended to be used for research purposes, but to serve as an indicator for potential larger issues within the military healthcare system.

Survey Demographics

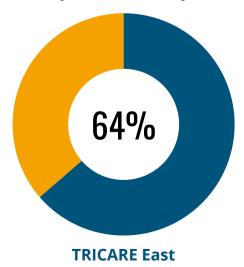
The data was collected March 26, 2025 to April 5, 2025, and 762 respondents completed the survey. The survey was shared publicly on social media and respondents answered anonymously. The first survey question asked respondents if TRICARE was their primary insurance. If the respondent answered "no" to the first question, they were unable to continue the survey.

Question 2: In which region do you receive TRICARE medical benefits?

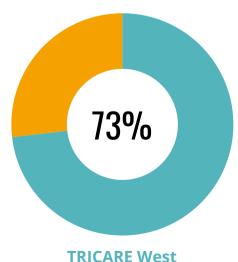


Impact to the Beneficiary's Access to Care

Question 3: Since January 1, 2025, have you been informed by a medical provider that you could experience a disruption in services?

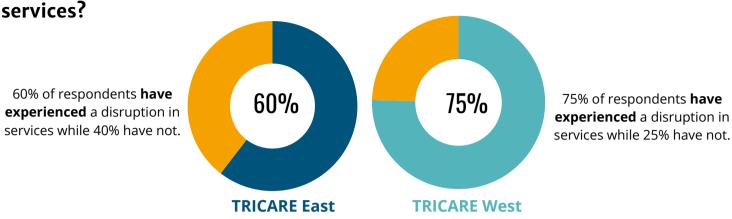


64% of respondents **have been** informed of a potential disruption in services while 36% have not.

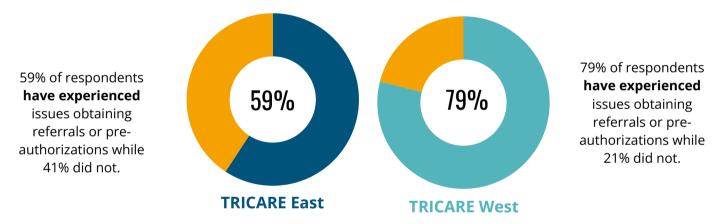


73% of respondents **have been** informed of a potential disruption in services while 27% have not.

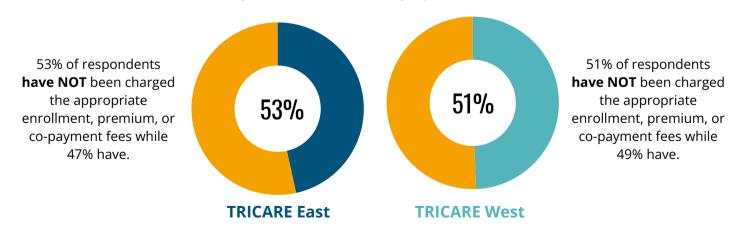
Question 4: Since January 1, 2025, have you experienced a disruption in



Question 5: Since January 1, 2025, have you experienced issues with obtaining referrals or pre-authorizations?



Question 6: Since January 1, 2025, have you been charged the appropriate amount for enrollment, premium, or co-payment fees?



What Families Had To Say About the 2025 TRICARE Contract Transition

Question 7: (Optional) Please provide any comments about your experience with TRICARE since 1 January 2025.

This was an open answer text box to allow families to describe their personal experiences and concerns. The survey collected 506 family comments, and all comments may be viewed in the attached addendum titled "TRICARE Family Survey Comments".

"My childrens' PT, OT, and speech clinic can't even get a claim to be accepted. They aren't being paid, which means they are drowning with all their Tricare patients. They can't continue to see us. I have paid well over my catastrophic cap because my claims aren't being processed. Large networks have dropped us and it's becoming impossible to find specialists who accept Tricare."

"All of my tricare claims for 2025 have been rejected. I have had to call for every single claim to get it reprocessed several times to get it approved. Someone with tricare "accidentally" put a clerical error on my account stating I had other health insurance. I do not have any other insurance. The other insurance they had on file for me under a note on my account became active in 1988. I wasn't even born until 1996..."

"My husband, who is the service member had to stop mental health services because TRICARE was not paying his therapist who is in network due to the shift to TRICARE West."

"I have a medical need to get a colonoscopy every 3 years. Due to military orders we were living overseas where I could not get a colonoscopy within my regular 3 year timeframe. Upon returning stateside I immediately tried scheduling the procedure. The first problem was finding a provider to take Tricare and a reasonable wait time. I waited over 6 months to get into a clinic and get a colonoscopy scheduled for late March 2025. My colonoscopy is now overdue by over year and the clinic called early March to cancel all procedures for patients with Tricare. I'm now back to the beginning of searching for a provider who will perform a colonoscopy and there is a real possibility that they will find colon cancer due to this huge gap in care."

"I have been dealing with severe postpartum depression with suicidal ideations. Because of TRICARE, I have not been able to see my providers and therapist since early February. This has been detrimental in my mental health status."

Conclusion

Since the launch of the new TRICARE contracts on January 1, 2025, families across the country have experienced a catastrophic disruption in care. Sixty-percent of survey respondents in TRICARE East and seventy-five percent in TRICARE West reported a disruption in medical services.

Obtaining prior authorizations and referrals was a barrier encountered by the majority of survey respondents in both TRICARE regions. This remains a prevalent barrier despite the Defense Health Agency issuing a waiver to allow specialty care referrals without a prior authorization for TRICARE prime beneficiaries. A theme in the military family comments was that providers would not honor the waiver due to lack of trust that TRICARE would later pay for the services provided.

The source of these failures lies not only with the regional contractors—Humana Military (East) and TriWest Healthcare Alliance (West)—but with the Defense Health Agency (DHA), which bears full responsibility for contract oversight and system accountability.

The Defense Health Agency's implementation and oversight of the transition to new managed care organizations has been fraught with problems that have had severe adverse effects on TRICARE beneficiaries as well as providers.

In order to minimize harm to TRICARE beneficiaries, we urge Congress and the Department of Defense to quickly remedy these issues and take steps to ensure the highest quality healthcare for our men and women serving in uniform as well as their families. Failure to do so will result in decreased readiness, resilience, and retention for our armed forces.

Contact your senator or representative, sharing this survey and write an email describing your family's experience receiving medical services since January 1st.

Request Congress and the Department of Defense to quickly remove the barriers preventing beneficiaries from accessing medical services such as delayed provider reimbursements and prior authorizations for procedures and specialty care

Request Congress and the Department of Defense to create policies to protect beneficiaries from unexpected fees incurred due to the mismanagement of the TRICARE contract transition.

Further Information

You can find the TRICARE Healthcare Provider Survey and the ABA Provider Surveys as well as over 500 TRICARE Family Survey Comments at www.missionalphadvocacy.com

We extend our deepest gratitude to the military families who courageously shared their stories. Your authentic voice is a catalyst for change - a force so compelling that it can not be ignored.

Contact Mission Alpha Advocacy

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