



# Health Services Support Brief OUTCAN US

Reviewed August 2025

Presented By:

Maj Gerren Martin

CFMLO

Capt Teigen Rook

Staff Officer Health Administration



# To Be Covered.....

- Support Team Intro
- Entitlements and Accessing Care in OUTCAN US
- CAF Administration Requirements
- Dependant Care and Claims
- Additional Resources



# Health Services Support Team

## Cdr Iain Beck, MD. – Health Services Attaché

### - Key Functions:

- Advise CAF Surgeon General, Commander CDLS(W) and Deputy Commander NORAD on any health matters of concern to them
- Ensure strategic level agreements are in place wrt care of CAF members and their dependants
- Work at the strategic level under Office of Assistant Secretary Defense (Health Affairs) to facilitate CFHS/US Military Health System engagement
- Enable and optimize collaboration, interoperability and integration in health care delivery, research and education
- Accomplished by facilitating combined research, training, exercises, and missions
- Role of Regional Surgeon for CFHS Det Washington

### Contact Information:

Email: [iain.beck@forces.gc.ca](mailto:iain.beck@forces.gc.ca)

Office: 202-682-7772





# Health Services Support Team

## Maj Gerren Martin, MD – Canadian Forces Medical Liaison Officer

- Key Functions:

- Base/Wing Surgeon – TCATs, coordination with D Med Pol, Sick Leave, Approval of expenditures against DGHS healthcare funding.
- Medical Screening – Final authority for medical screening of all extensions/cross posting within the U.S.
- Advisor to members/families/CoC/D Med Pol on risks and resources that are present at specific postings in the USA and serves as liaison with US DoD Health Assets when required.
- Operational/Occupational Medicine SME (Flight, Dive, and Exercises) for the OUTCAN USA Community.
- Provide guidance to individual members when required

### Contact Information:

Email: [gerren.martin@forces.gc.ca](mailto:gerren.martin@forces.gc.ca)

Office: 202-448-6210





# Health Services Support Team

## Capt Teigen Rook – SO Health Admin

### – Key Functions:

- SME for CAF and Dependant health benefits and relevant policy.
- Providing guidance on application and coordination of DoD, CAF, and Public Service entitlements in the US OUTCAN environment.
- Financial Authority for processing of Blue Cross and Foreign Service claims.
- Production and distribution of informational resources for navigating healthcare related processes, in collaboration with CoCs and CFMWS.

### Contact Information:

Email: [teigen.rook@forces.gc.ca](mailto:teigen.rook@forces.gc.ca)

Office: 202-448-6559





# Health Services Support Team

## MCpl Kevin Ramkishore – HS Coordinator/ Medic QL5

- Key functions:
  - Initial POC to remainder of Team – available for all HS/ Med related Questions, Concerns, issues; to include PHA's, Screenings/ Extensions, Immunizations, PRV's, Med Categories...
  - Initial POC to troubleshoot access to care/ billing issues for MTF's and Tricare, with limited support to Dependents.
  - Work closely with Med Records and Med Claims.

Email: [kevin.ramkishore@forces.gc.ca](mailto:kevin.ramkishore@forces.gc.ca) (unclas)

Tel: (202) 448-6282





# Health Services Support Team

- Med Records – Ms. Natalia Pela

Responsible for managing and maintaining service members and medical records, ensuring accuracy and confidentiality, complying with legal and regulatory requirements.

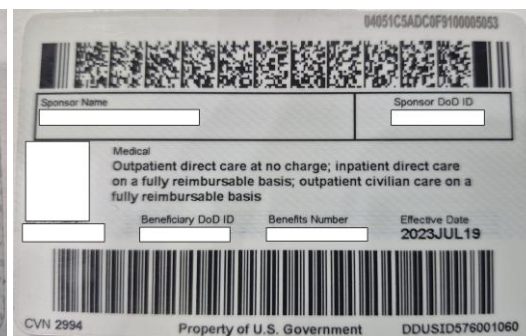
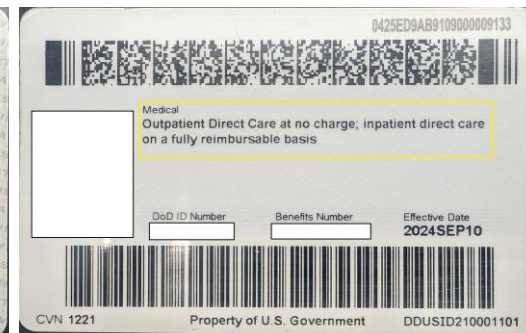
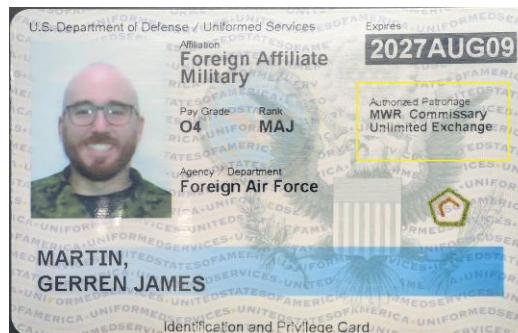
Please contact when you need to have your medical category updated, schedule social and immunization work interviews during cross/isolated posting/extensions and releases.





# Registering for DoD Benefits

- **Visiting DoD ID/CAC office**
  - Completed DD Form 1172
  - Passports
  - Posting Msg
  - Marriage licences
  - Birth certificates
- **Defense Enrollment Eligibility Reporting System (DEERS)**
  - Key is to ensure appropriate Health Care Delivery Program (HCDP) Codes
    - CAF Members: 011
    - Dependants: 012
    - Your card will say Foreign Military
- **Visiting Military Treatment Facility (MTF) Patient Admin**
  - Confirm eligibility status for family
  - Reconcile any TIN
  - Hand carry records required for ongoing care continuity





# What Is TRICARE?

TRICARE is the health care program for the U.S. Department of Defense

It consists of

- Direct care
- Private Sector Care

TRICARE® is the brand name for the U.S. Military Health System



## Eligible CAF Members:

- TRICARE Prime “type” Plan Benefits

## Eligible CAF Dependants:

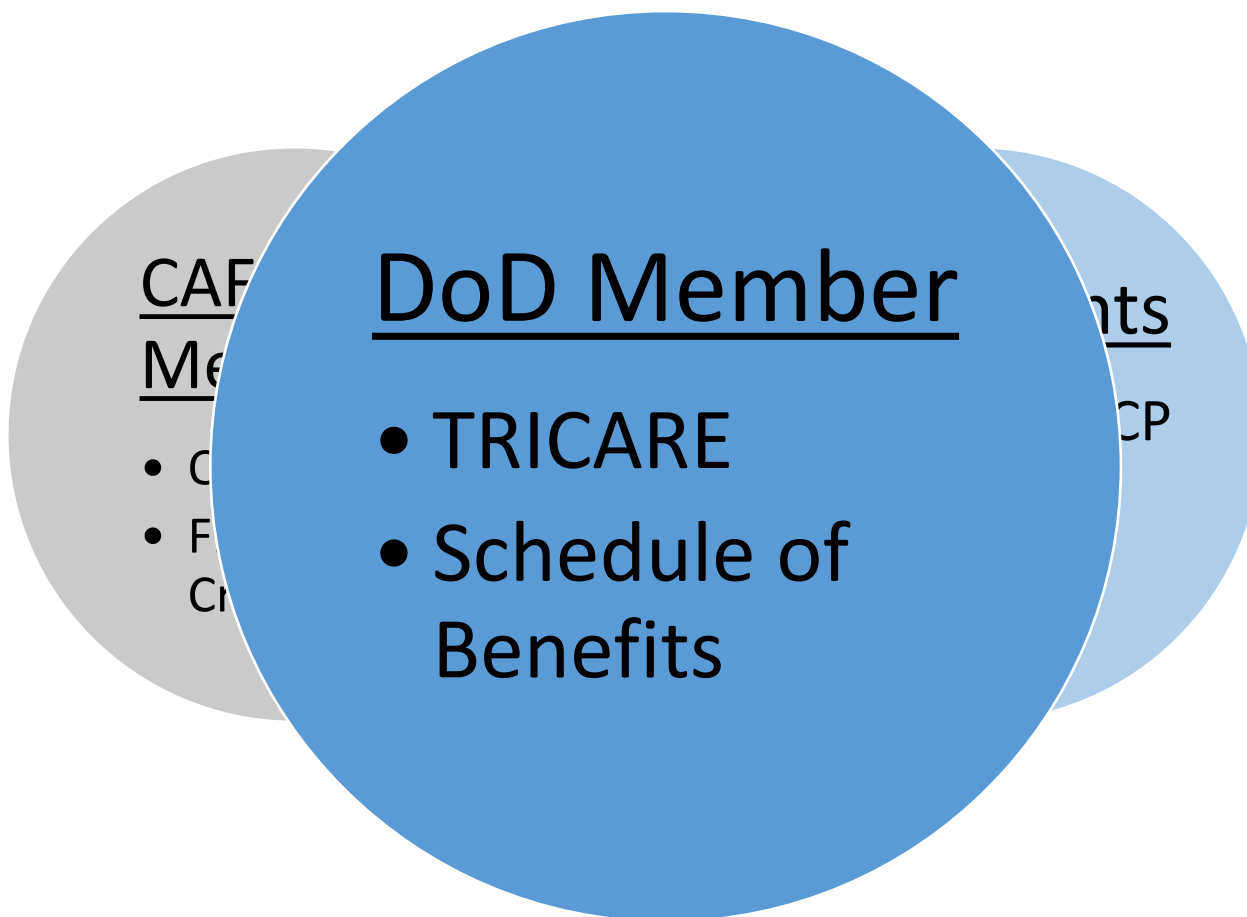
-TRICARE Select “type” Plan Benefits

\*Effective date of sponsorship  
on DD1172



# Governing Policy for Healthcare Entitlements in the US

NATO SOFA  
RHCA  
DODI 6015





# Entitlement to Care

States included: Washington, California, Hawaii, Texas, Marland, Virginia, and D.C.

Table. Care for FMP and Their Dependents†

Foreign Force		NATO Countries and Countries Subject to the PFP SOFA	RHCA	USG Invitation	Uniformed Services Facility			Civilian Health Care Facility	
Military Member	Dependent				Inpatient Care	Outpatient Care	Dental Care	Inpatient	Outpatient
X		X	X	X	No Cost*	No Cost	No Cost	1	3
	X	X	X	X	No Cost*	No Cost	No Cost***	1, 2	2
X		X		X	Full Reimbursement Rate**	No Cost	No Cost	Not Eligible for Care at DoD Expense	3
	X	X		X	Full Reimbursement Rate	No Cost	No Cost***	Not Eligible for Care at DoD Expense	2

† Additional information on Foreign Military Personnel and their families is available at: <http://www.tricare.mil/Welcome/Eligibility/FFMandFamilies.aspx/>.

1 Only if MTF maintains clinical responsibilities; see Reference (g).

2 TRICARE Standard/CHAMPUS coverage for FMP dependents.

3 FMP outpatient care at a civilian facility may only be paid if there was an appropriate referral for care; see paragraph 1.d.2. in Enclosure 3.

\* Applicable subsistence charges may apply.

\*\* Eligibility and coverage for all IMSs and their dependents are found in the student's invitational travel orders as well as AR 12-15/SECNAVINST 4950.4B/Air Force Instruction 16-105 (Reference (h)).

\*\*\* Dependent access is to the same extent that dental care is available to dependents of U.S. Service members.



# TRICARE Regional Contractors

## TRICARE Stateside Regions

Starting on Jan. 1, 2025

**Humana**  
Military





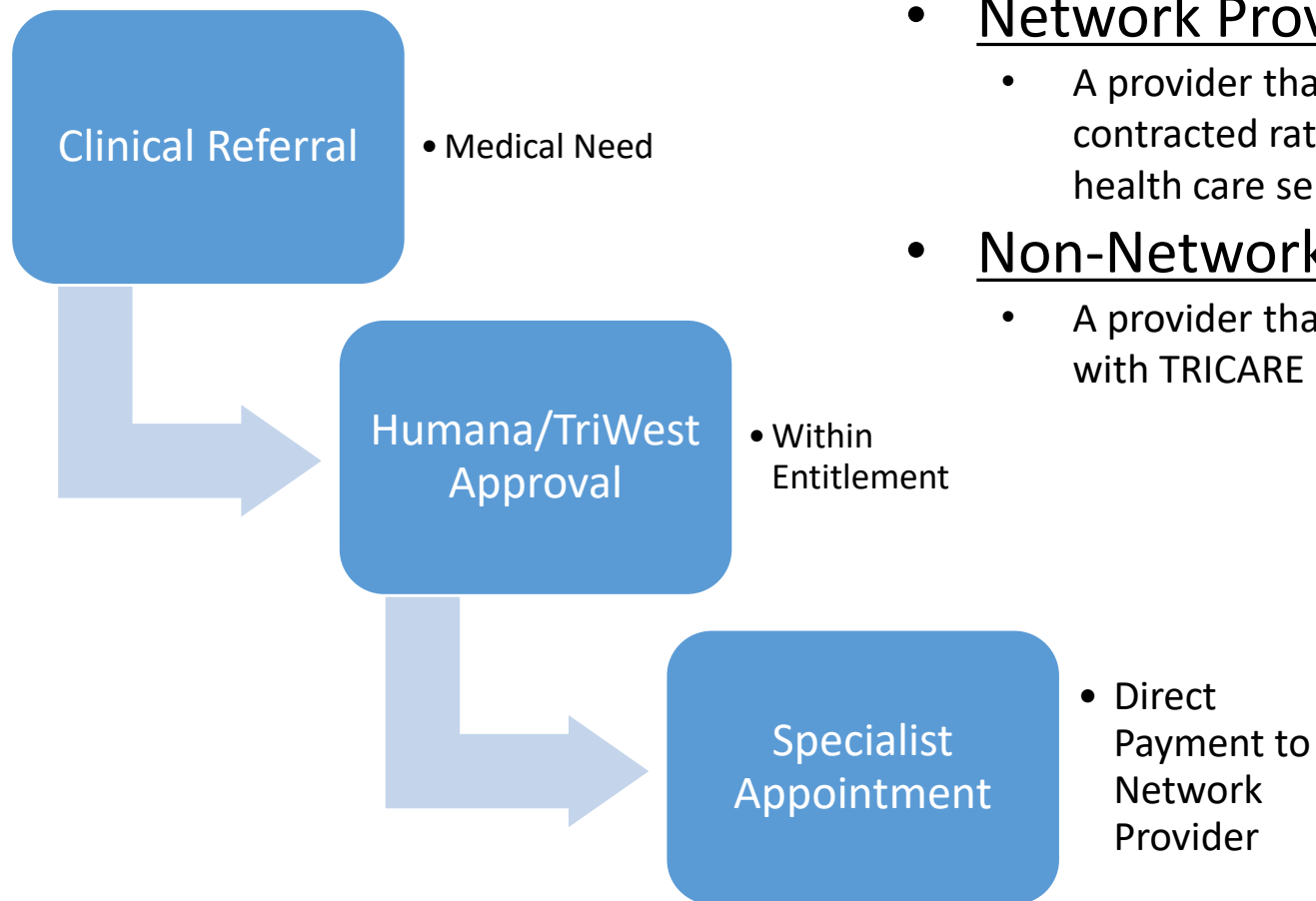
# Accessing TRICARE Services

## Direct Care = On Base Care

- Available to CAF and dependants No Cost
- Outpatient Services (varies):
  - Routine, primary, urgent, and preventive care/immunizations
  - Maternity and pediatrics
  - Laboratory tests, X-rays
  - Physical or occupational therapy
  - Vision exams
  - Pharmacy (fills off base Rx)
- Inpatient, ER, and specialists available at select MTFs
- Scheduling Appointments
  - Centralized local apt. line
  - Call clinic/dep front desk
  - MHS Genesis Online Scheduling
- Limitations:
  - No Primary Care Manager (PCM)
  - Specialty care & diagnostics requires referral/order from Primary Care



# TRICARE Referrals and Network Providers



- Network Providers

- A provider that has agreed to accept the contracted rate as payment in full for covered health care services and files claims for you.

- Non-Network Providers

- A provider that doesn't have an agreement with TRICARE and may not file claims for you.

**\*ONLY\*** Dependants may seek routine off base care without referral or preapproval.



# CAF Member Coordination of Benefits

- **US DoD will pay for:**
  - Spectrum of Care Treatment received on base (in & outpatient)
    - Off-base outpatient care must be coordinated by MTF
    - Off-base inpatient care must be transferred to MTF
  - MTF referred (or approved off-base care)
  - Prescriptions filled on base (even if written off-base)
- **CAF will reimburse:**
  - Inpatient Subsistence Fees
  - Medically necessary travel
  - Care outside US SoC but within CAF SoC
    - Entitlement limits per Medavie Blue Cross (FHCPS)
    - Requires preapproval by CFMLO
    - Claimed through HS Det Washington

**\*This applies to CAF not eligible for TRICARE benefits\***

**\*Contact Beneficiary Counseling and Assistance Coordinator (BCAC) to assist with any manual TRICARE claims or benefits issues\***



## **KEY POINT**

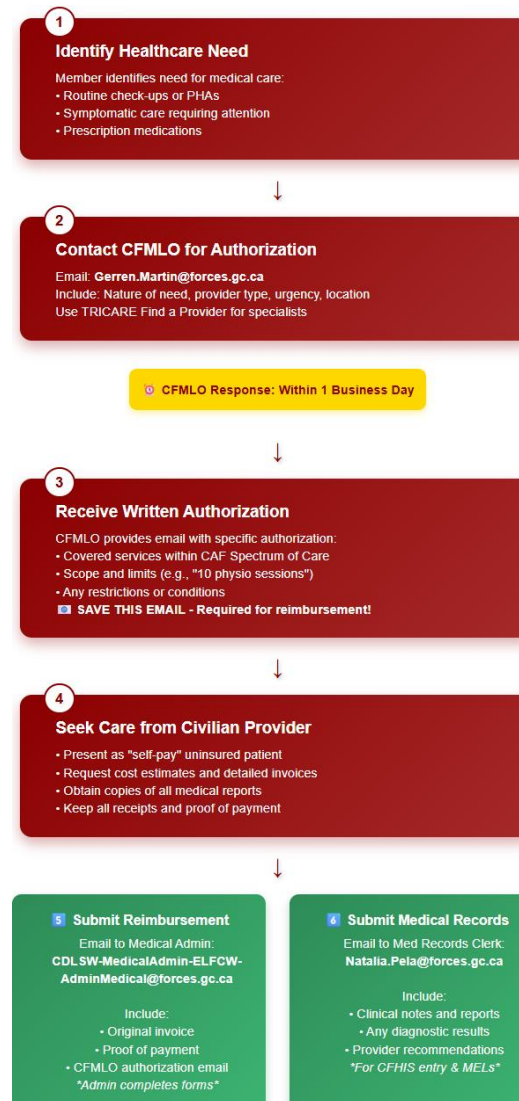
**CAF Members use TRICARE and CF H Svcs  
HQ det Washington for Blue Cross  
Dependents use TRICARE and  
MSH Intl./Canada Life**

CAF members in the USA are not participants in the PSHCP,  
so should never claim anything through Canada Life/MSH,  
even if you are on LWOP or SSEP programs.



# Coverage for CAF Members Under Spectrum of Care

- While OUTCAN members still have coverage under Blue Cross for items that are defined under the Spectrum of Care. This typically applies for:
  - CAF Members without access to DoD facilities (Military Sales, Civilian University Students, PRMNY)
  - CAF Members who require care outside of Tricare coverages (hospital admissions to civilian institutions)
  - Glasses
- These coverages are subject to Sect 32, 33, 34 regulations and the limitations of the Spectrum of Care
  - No coverage for medications that are not part of the CAF Drug Benefit List
  - Need pre-authorization prior to expense
- Can utilize tools like Tricare Network Provider search to find care providers





# Emergency Care



## Emergency Action Steps

1

### Secure immediate medical care

Call 911 or go directly to the nearest emergency room. Don't worry about insurance authorization - get treatment first.

2

### Notify TRICARE (if applicable)

If you have TRICARE coverage, call 1-800-TRICARE (1-800-874-2273) as soon as possible to report the emergency visit.

3

### Contact CFMLO for coordination

Contact CFMLO (CAF members) or have your sponsor contact them for coordination assistance.

4

### Collect comprehensive documentation

Keep all medical records, itemized bills with ICD-10/CPT codes, receipts, and treatment summaries. Take photos of documents immediately and get provider contact information.



# Emergency Care



## Post-Emergency Coordination

After medical care is secured, coordinate billing and coverage issues:



### For TRICARE Coverage Issues

1

#### Contact Local BCAC First

Beneficiary Counseling and Assistance Coordinator at your MTF - they handle billing issues, provider education, and coverage disputes.

2

#### Escalate to CDLS(W) Medical Team

If BCAC cannot resolve: CDLSW-MedicalAdmin-ELFCW-AdminMedical@forces.gc.ca

3

#### Contact CFMLO for Complex Issues

Maj G.J. Martin: 202-448-6210 (office),



### Required Documentation



#### Essential Documents

- ✓ All medical records and discharge summaries
- ✓ Itemized bills with ICD-10 and CPT codes
- ✓ Receipts for all payments made
- ✓ Insurance cards and ID copies



#### Documentation Tips

- ✓ Take photos of all documents immediately
- ✓ Get provider contact information
- ✓ Record dates, times, and staff names
- ✓ Request case/reference numbers



## Dental Support for CAF Members

- DoD Positions: Routine Dental on base for those with Tricare access, all other treatment by OUTCAN dentist
- Non-DoD Positions: Routine annual check-up and hygiene approved by CF H Svcs HQ Det Washington, all other treatment by OUTCAN dentist
- No need to send Dental records to CFMLO office – keep these and bring them with you back to Canada and submit to next Dental Unit
- Maj Mary MacDonald
  - 613-901-9733
  - [CMP.DENTAL.OUTCAN@FORCES.GC.CA](mailto:CMP.DENTAL.OUTCAN@FORCES.GC.CA)
  - Any procedures that go beyond annual dental exams/cleaning/Emergencies should go through OUTCAN DentO for their Info/advice



# Medical Advances for CAF Members & Dependents in the US

- **When to Use**

- **Minimum \$400** medical expense causing financial hardship
- **Common scenarios:** Hospital admissions, surgeries, maternity care, dental procedures

- **How to Request**

- **Complete Forms:** 7000-1 + DND 432
- **Get cost estimate** (required for amounts >\$500)
- **Email to:** [CDLSW-MedicalAdmin-ELFCW-AdminMedical@forces.gc.ca](mailto:CDLSW-MedicalAdmin-ELFCW-AdminMedical@forces.gc.ca)
- **Processing time:** 2-4 business days

- **Key Requirements**

- **Repayment:** Expected within 6 months, however status updates for delayed claims through external insurers are appropriate to delay recovery
- **You owe the Crown** until reconciled
- **Contact Med Admin** when MSH processes your claim for reconciliation

**Priority: Get medical care first, handle advance paperwork second**



## **KEY POINT**

**Do NOT Ask for Reimbursement of \$\$  
without prior approval/authorization\***

Medical team cannot legally Pre-Authorize after the fact,  
which means unless in the case of emergency you may end  
up with a bill.

\*Emergency care is covered



# Medical Administration



# Annual Medical Information Submission

## **\*\*NEW PROCESS ALERT\*\***

- As part of the Annual Personnel Readiness Verification members will now need to complete Periodic Health Assessment Questionnaire and an attestation form that indicates the following:
  - If you have received any medical care in the past year that you have submitted ALL medical records from ANY US treatment facility.
  - If you have not sought any care in the past calendar year.
- This will serve as a statutory declaration of annual medical readiness IAW QR&O 19.18
- CFMLO will review all members and respond for follow-up

CAN PROTECTED A

### OUTCAN USA - Periodic Health Assessment (PHA) Attestation Form

#### Member Information

SN-NM	Rank - Grade	Last Name - Nom de Famille	First Name - Prénom
DOB - DDN (yyyy-mm-dd)	Current US Location	Home Unit - Unité d'appartenance	

#### 1. PHA Completion

- ☐ I have completed the DND 4943-E Periodic Health Assessment (PHA) Questionnaire  
☐ The completed PHA form is attached to this attestation

#### 2. US Medical Records

- ☐ I have attached all relevant medical records from US healthcare visits/treatments received in the past 12 months  
☐ I have not received any medical care in the US healthcare system in the past 12 months

#### 3. Annual Personnel Readiness Verification

- ☐ I understand this PHA completion fulfills part of my Annual Personnel Readiness Verification requirements

#### 4. Preferred method for receiving response (check one):

- ☐ DWAN Encrypted Email  
☐ Secure Military Email (Address: \_\_\_\_\_)  
☐ Regular Email (Address: \_\_\_\_\_)  
☐ Phone Call (Number: \_\_\_\_\_)

#### Declaration

I declare that the information provided in this attestation and the attached PHA is true, complete, and accurate. I understand that providing false or incomplete information may result in administrative action and could impact my medical category and deployability status.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

CAN PROTECTED A

# Periodic Health Assessments (Medicals)



The PHA has been inadequately used to determine both operational fitness and health for members, following CANFORGEN 144/23 the PHA is not a requirement on a regular basis unless you are aircrew or diver



The Annual Medical Information Submission will replace the requirement for PHA and allow the CFMLO to ensure members are also meeting required preventative health screening.



Aircrew that are actively flying or in controlling positions are still required to complete their aircrew as per the annual cycle. We will follow the US timeline for submissions on the 2992 Forms.



Required to update your Aircrew Medical Category

Full history and physical exam by a flight surgeon,  
visual acuity and audiogram

Any required investigations\*

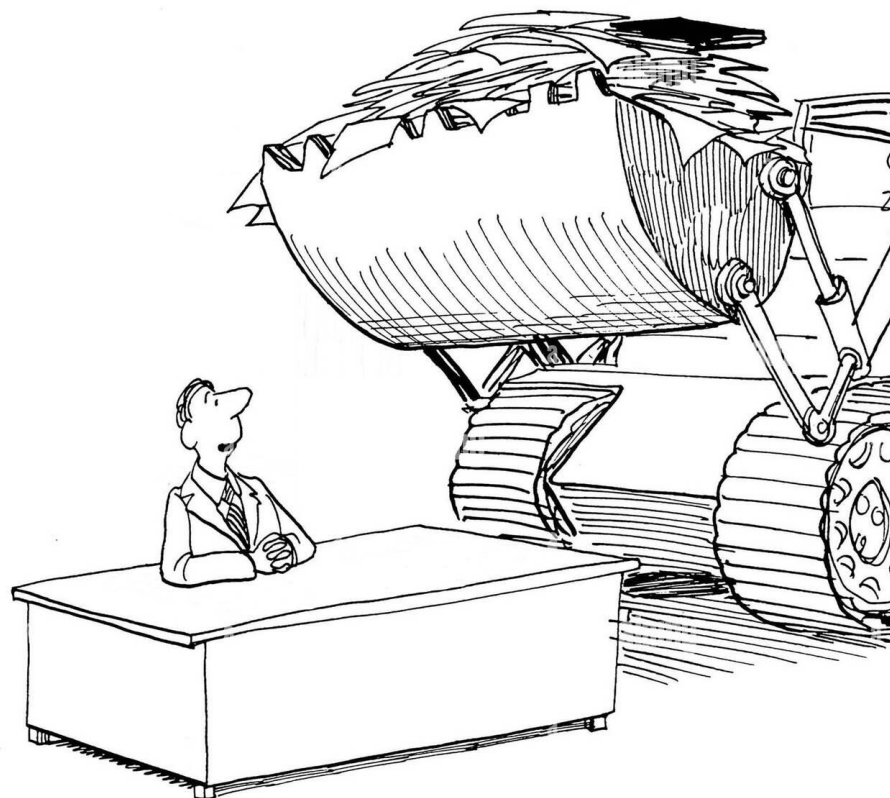
DND 2552 and DND2452 Questionnaires

\*Contact CFMLO for investigations



# Aircrew Medical

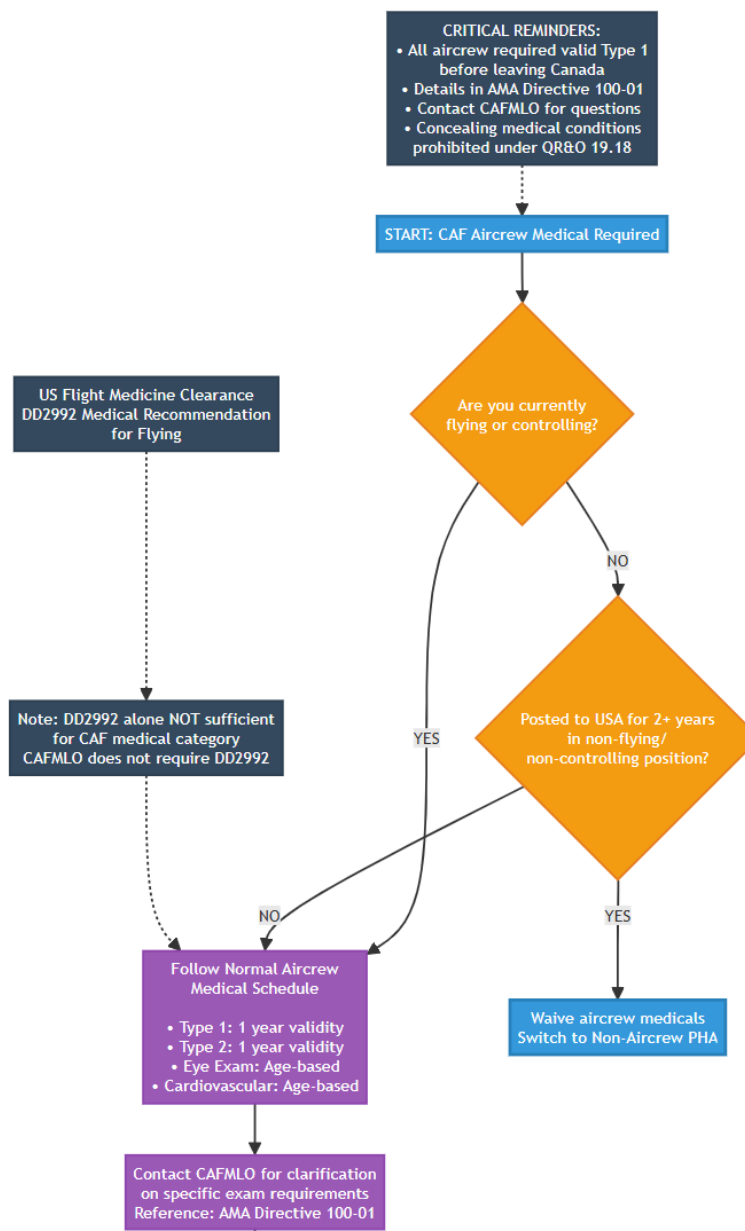
- CAF Members that are in flying/controlling positions, defined by the need for the USAF to provide you a 2992 to do your duty, need to maintain your Canadian Air Factor.
- This can be maintained on the same timeline as the US 2992
- To maintain this you need to complete the following:
  - Complete aviation medical with a flight surgeon (head to toe exam)
  - Visual acuity testing (ideally with documented uncorrected vision and **MANIFEST** refraction)
  - Audiogram
  - Complete the 2452 and 2552 questionnaires
  - Send clinical notes and questionnaires to Natalia Pela

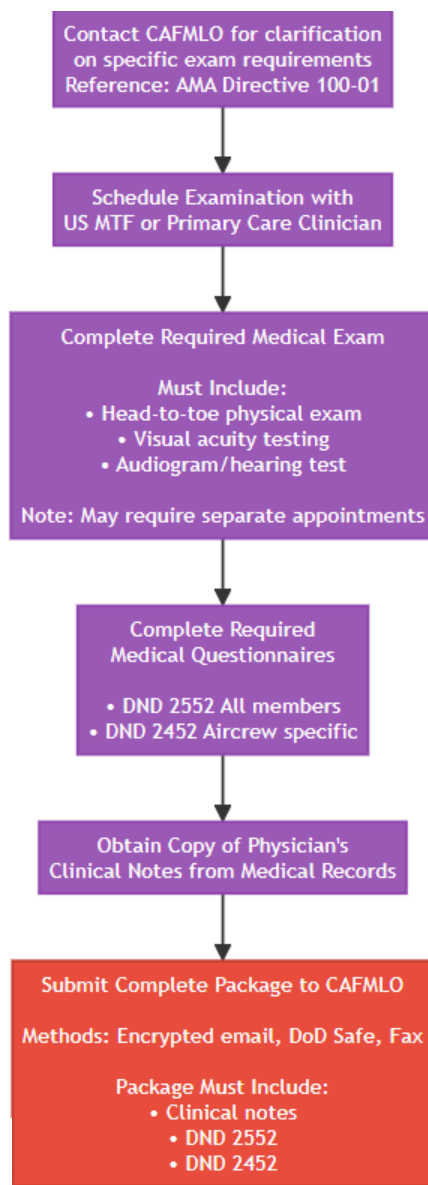


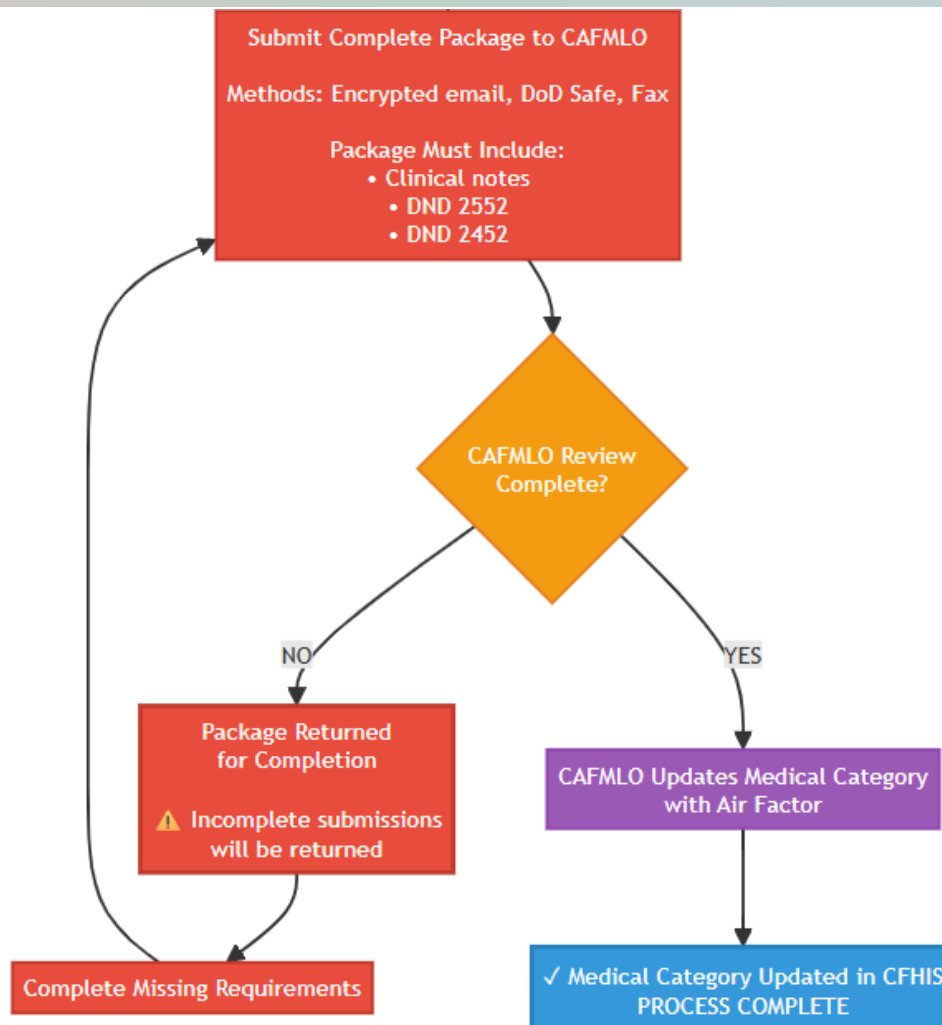
“I’m in a paperwork mood, let ‘er rip.”



## CAF Aircrew Medical Completion Flowchart





**Legend:**

Start/End Points

Decision Points

Process Steps

Action Required

Notes/Reminders



# When to Report to the CFMLO

## • Medical Conditions

- New medical diagnosis
- Any condition requiring ongoing medication
- Any condition requiring ongoing psychological support
- Non-self-limiting conditions, for example not a cough/cold/diarrhea or minor muscle injury
- Anything that you may want to have on file for VAC

## • Injuries or Physical Issues

- Discussions about surgery
- Service-related injuries
- Unable to perform your job duties

## • Tests and Procedures

- Blood work or lab tests
- Any diagnostic imaging (x-ray, ultrasound, MRI, etc)
- Screening procedures (colonoscopy, mammogram, PAP test)

## Critical Reporting Requirements

### MUST Report to CAFMLO

- Any illness/injury requiring >7 days limitations
- Sick Leave/MELs >7 days
- Any condition affecting work performance
- It is an offense to conceal illness/injury




# What does the CFMLO do with this info

- Review all US records to ensure appropriate care, identify any health issues that are not being addressed, and determine if there are any follow-up issues that you need to engage with your US providers on.
- Assess for occupational fitness for any medical conditions that require Medical Employment Limitations or Medical Category changes
- Review for any follow-up requirements based upon info in CFHIS
- Review preventative care for required screening and age-appropriate testing
- Answer any questions you have about your health, healthcare, and operational health (aircrew/divers)
- Actions taken by the CF H Svcs Gp HQ Det Washington Team:
  - Update CFHIS with all info, review and provide a summary of significant findings and medical recommendations
  - Communicate with member **if** there are concerns, issues, or changes to their operational fitness
  - Provide any additional medical recommendations to the member
  - Complete any medical limitations and send to the member to inform their CoC. Limitations will automatically be updated in Monitor Mass
  - Given opportunity for members to follow-up via phone, Teams, or email on any medical issues.
  - Engage with members if there are any outstanding administrative/financial issues because of the care they have received.



# Medical Screening for Extension/Cross Posting

- Staying in/Moving Within US
  - **CFMLO Approval**
  - Copy of screening message
  - Social work screening (Canadian SW only)
  - Annex B form
  - DND 4342 for dependents (parts 1 & 2 only)
  - All medical records since last submission
    - With full medical record submission a PHA **may not be** required. CFMLO will determine if further information is needed.
    - Aircrew in active flying/controlling positions require valid Aircrew Medical
- **NOT Required:** Dental screening, Immunization review
-  Moving Outside US
  - **D Med Pol Approval**
  - All items from US moves PLUS:
    - Immunization screening
    - Dependent family physician review (completed DND 4342)
    - Full dental screening



## Critical Requirement

**CAF members must provide their entire US Medical Record to CAFMLO for review. Failure to do so may negatively impact your cross-posting.**



## **KEY POINT**

**If you don't keep us informed, we cannot help you!**

This can affect occupational determinations, applications for benefits in the future, or future OUTCAN opportunities.

We can also guide you earlier with issues with coverages for dependents.

Emails, provide situation/ background & context – 5w's;  
UN, NASA, DoD, DoJ, Dependants.



# Dependent Care



# Dependant Health Benefits Coordination

## PSHCP

- Secondary Insurer if with Tricare
- Administered by Canada Life
  - MSH Intl OUTCAN Admin
- Gaining HRAs to action PSHCP switch from Supplemental to Comprehensive on arrival
  - **Additional MSH Online Claims portal registration required.**
- No Direct Billing Available
  - Pay up front, claim for reimbursement
- Hospital admission, Tricare copays, pharmaceuticals
  - **Or when not eligible for TRICARE**

## MSH International

- Confirm Med + Dent Comprehensive coverage in place via Canada Life profile.
  - Entitlements back-dated to beginning of month of COS
- <https://pshcp-msh.ca/a/register>
- Verify personal info is correct
- Dependants may not be listed on profile until first claim processed for them.
- Medical claims and supporting docs submitted online.



# Dependant Claims – Through Insurer

1. If in doubt, confirm coverage
  1. <https://www.tricare.mil/CoveredServices>
  2. <https://pshcp.ca/coverage/comprehensive-coverage/>
2. For Tricare confirm network and arrange direct billing
  1. <https://www.tricare.mil/GettingCare/FindDoctor>
  2. <https://www.tricare.mil/Costs/Compare>
  3. NO DIRECT BILLING THROUGH MSH Intl.
3. Submit invoice and claim to insurer
  1. <https://www.tricare.mil/FormsClaims/Claims>
  2. Eastern Region: [Humana](#)
  3. Western Region: TriWest
  4. <https://pshcp-msh.ca/a/comp>
4. Request an advance if needed
  1. [CDLSW-MedicalAdmin-ELFCW-AdminMedical@forces.gc.ca](mailto:CDLSW-MedicalAdmin-ELFCW-AdminMedical@forces.gc.ca)
  2. [CFSUCSPSSOR-SvcAdminUSFCCS@forces.gc.ca](mailto:CFSUCSPSSOR-SvcAdminUSFCCS@forces.gc.ca)



# Submitting a Claim to MSH International

- Tips:
  - Multiple providers may direct bill at the same time, so you may receive numerous invoices for remaining amounts
  - Providers have 30 days to bill for services
  - Reach out to MSH International early and take screenshots of correspondence as it deletes after 30 days
  - You can connect MSH International with the billing department of the hospital/doctor. While direct billing is not part of the MSH International contract for large bills they will assist with the hospital.
  - You can request an advance for any cumulative amount over \$400 to cover costs.

**All claims to MSH International need to be submitted on the online portal.**

**Prior to submission ensure you have all documentation:**

Provider invoice that includes both diagnosis (ICD-10) code and procedure (CPT) code.

Proof of payment in form of receipt or credit card statement.

Any Explanations of Benefits (EOBs) from Tricare that shows total costs and costs being claimed.



# Dependant Dental

- All dental services are claimed directly through Canada Life (no TRICARE or MSH)
- Verify PSDCP entitlements for serives
- Ask / Shop Around
- Submit a treatment plan for pre-determination if in doubt



# Dependant Foreign Service Claims Through CFSU(CS) FSS or CDLS(W) Med Admin

## Costs > 3 x OHIP Rates (R70 Codes)

IAW MFSI and DCBA policy, CAF to cover expenses not reimbursed by PSHCP identified on EOB as amount in excess of 3 x OHIP Schedule Rate (formerly coded R70 by Allianz)

## Dependent Immunizations

Required immunizations are covered as prescriptions under the PSHCP at 80%. You can claim the remaining 20% through the CAF

## Excess Dental

Difference between what you were out-of-pocket and what you would have been out-of-pocket in Ontario. Await letter from Canada Life.

## Interpreter fees

Directly associated with accessing medical treatment

## Medical Travel

Not for routine appointments or elective procedures. Reimbursed IAW gov travel kilometric rates.

## Registered Nurse Anethetist

Expenses not covered under PSHCP due to profession not recognized by Health Canada.

## Psychologist fees

When psychiatrist is unavailable.



# Dependant Care Claims Through CFSU(CS) FSS or CDLS(W) Med Admin

To File your claim under FSI you need to provide:

Proof of Payment / Invoice

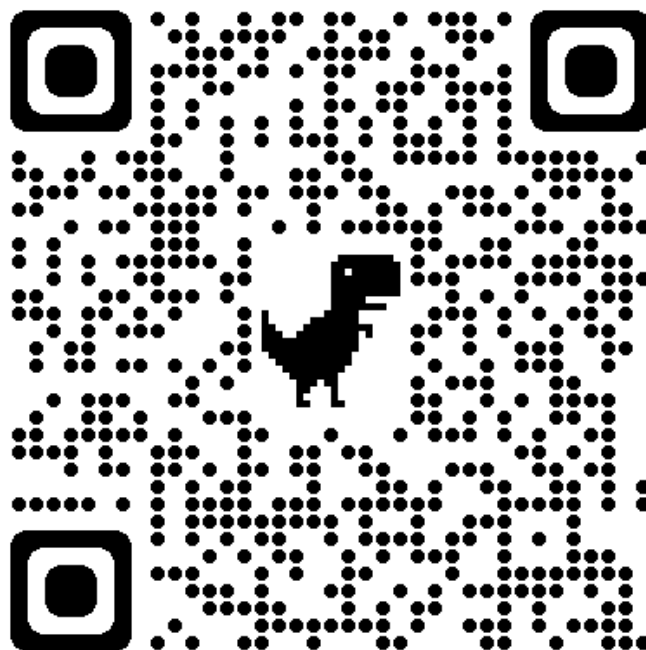
Explanation of Benefits or Excess Dental Letter:

- MSH Intl
- TRICARE



# The MFSWS HealthCare Site

<https://cfmws.ca/united-states/healthcare-in-the-us>



Created

ces HQ





# **KEY POINT**

## **Our website is accessible from any network!**

This is a great place to bookmark to look at if you are having questions or concerns. It also provides resources/links to US partner sites.



# Mental Health – Psychosocial Concerns

- Canadian Forces Member Assistance Program (CFMAP)
  - 1-800-268-7708
  - <https://www.canada.ca/en/department-national-defence/services/guide/programs-canadian-forces/cfmap.html>
- MFSUS Social Worker
  - Services offered solely to CAF Families posted to the US
  - Marion Hall
  - <https://cfmws.ca/united-states/connect-contact/family-mental-health>

## Mental Health Crisis

**SOS**

### Immediate Crisis Support

**CFMAP 24/7:** 1-800-268-7708 (CAF members and families)

**US Crisis Line:** 988 (Suicide Prevention Lifeline)

**Crisis Text:** Text HOME to 741741



### Family Information Line

**1-800-866-4546 (Available 24/7)**

Any time, any reason! FIL is a free, confidential, bilingual service offering information, support, referrals and more to the military community.



# Need to Knows



## **KEY POINT**

**CAF Members use TRICARE and CF H Svcs  
HQ det Washington for Blue Cross  
Dependents use TRICARE and  
MSH Intl./Canada Life**

CAF members in the USA are not participants in the PSHCP,  
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UN, NASA, DoD, DoJ, Dependants.



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# Contacts

Cdr Iain Beck, MD - CFHSA

[Iain.Beck@forces.gc.ca](mailto:Iain.Beck@forces.gc.ca)

Maj Gerren Martin - CFMLO

[Gerren.Martin@forces.gc.ca](mailto:Gerren.Martin@forces.gc.ca)

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