

2011 Military Health System Conference

Transition to T3: Lessons Learned in North Region

The Quadruple Aim: Working Together, Achieving Success

Mr. Douglas Williams

January 25, 2011



TRICARE Management Activity/TRO North

Report Documentation Page

Form Approved
OMB No. 0704-0188

Public reporting burden for the collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to a penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

1. REPORT DATE 25 JAN 2011		2. REPORT TYPE		3. DATES COVERED 00-00-2011 to 00-00-2011	
4. TITLE AND SUBTITLE Transition to T3: Lessons Learned in North Region				5a. CONTRACT NUMBER	
				5b. GRANT NUMBER	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S)				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Military Health System,TRICARE Management Activity/TRO North,5111 Leesburg Pike, Skyline 5,Falls Church,VA,22041				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES presented at the 2011 Military Health System Conference, January 24-27, National Harbor, Maryland					
14. ABSTRACT					
15. SUBJECT TERMS					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT Same as Report (SAR)	18. NUMBER OF PAGES 17	19a. NAME OF RESPONSIBLE PERSON
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified			

TRICARE - Who We Are



- 9.6 million beneficiaries (**3.1 million North**)
 - 3.7 million TRICARE Prime enrollees
Direct care system (**1.08 million North**)
 - 1.6 million TRICARE Prime enrollees
Contractor networks (**520,000 North**)
 - Remainder
 - TRICARE Standard/Extra
 - TRICARE for Life
 - TRICARE Reserve Select
- Military Treatment Facilities (MTFs)
 - 59 Hospitals & Medical Centers (**12 North**)
 - 364 Health Clinics (**106 North**)
- Over 380,000 network providers
- Over 60,000 retail pharmacies

T-3 North Region Health Care Support Contract



- Awarded to Health Net Federal Services
 - Contract Award: 13 May 2010
 - 10-month transition (HCD 1 April 2011)
 - Asynchronous transition to T-3
 - Fort Campbell
 - Prime Service Areas
 - Clearly Legible Reports
 - North Region Unique Issues:
 - National Capital Area BRAC (JTF CAPMED)
 - Federal Health Care Center (Great Lakes)
 - Major Deployment Platforms
 - Ft Bragg, Ft Campbell, Ft Drum, Camp Lejeune

Transition Lessons Learned Prior to Award – Be Prepared



- Continuity for Transition Team
 - Reconfirm/Assign Transition Manager and Deputy, and SMEs with longevity
- Responsibilities
 - Transition Process is the responsibility of the Purchased Care Transition Management Team
 - Contract Requirements established with Service SGs concurrence in 2007

Transition Lessons Learned Contract Award



- Post Award Orientation Conference (PAOC)
 - Do not assume Contractors fully understand all aspects of TRICARE Manuals
 - Line by Line contract review
 - Limit to CO/COR/TM/key SMEs
- Kick-Off/Transition Specifications Meeting
 - High level of interest/Set the tone early

Transition Lessons Learned Incumbent vs. Non-Incumbent



- Non-Incumbent Awarded Contract
 - Transition Specs Meeting – Both Contractors agree on key activities, establish dates, etc.
 - Anticipate ‘escorting’ Contractor to all key Posts, introduce and orient – TRO Boots on Ground
 - DIACAP/Claims – Start from Scratch
- Incumbent Awarded Contract
 - Transition Specs Meeting takes on different function/Contractor is Established, in the field
 - DIACAP already certified, just need to update
 - Claims Processing – no change

Transition Lessons Learned

Trans Spec Meetings



- Required Interfaces
 - DIACAP
 - Systems Integration
 - Records Management
 - TMA Communications and Customer Service
 - Privacy
 - Personnel Security
 - Pre-Benchmark
 - Others
 - MMSO (Not required but highly recommended)
 - DFAS/USCG/etc

Transition Lessons Learned

Trans Spec Meetings



- With Incumbent - Over 900 Questions and Clarifications in initial and follow up meetings
 - DOCUMENT/DOCUMENT/DOCUMENT
 - Review TRO North Q&As
 - Capture Issues
 - Track centrally
 - Expect conflicting responses
 - Continuously Follow Up

Transition Lessons Learned

General Observations



- Readiness/Continuity of Care Top Priority
- Need Clear Understanding of Contract Awarded including Enhancement
 - Are they appropriately incorporated? Trackable?
 - Understand differences between T-Nex and T-3
- Government “speaking with one voice”
 - Ensure the Government agencies fully understand and agree among themselves with requirements/ policy before meeting with Contractor on issues
- Contractor Performance – Set Expectation

Transition Lessons Learned

General Observations



- CLRs (Consult Tracking)
- Clinical Support Agreements
 - All CSAs need to be re-executed under T-3, plan early
- External Resource Sharing Agreements
 - Determine Need/New contractor needs to execute new agreements
- Personnel Security/CACs
 - 1100 CACs for North Region MCSC

Transition Lessons Learned

General Observations



- Prime Service Area Changes
 - T-3 PSA requirements – MTF/BRAC Sites Only?
 - TSCs: Close non-MTF PSA offices
- Necessary Contract Modifications
 - Over 100 Contract Mods to T-NEX since RFP needed to be incorporated
 - Additional North Region Contract Changes
 - Ft Campbell
 - BRAC Sites (Active Base to BRAC)
 - TSCs – Appropriately Listed (BRAC vs. MTF)

MTF Considerations for Transition Success



- Why an MOU?
- Enrollment Plan Current?
- Is Network Adequate?
- Referral and Authorization Process
- Clearly Legible Reports
- TRICARE Service Center
- MCSC Call Center Volume

Transition Lessons Learned Observations for TRO



- Maintain close coordination with TM/CO/COR/SMEs
- Be Prepared to Travel
 - Use T-3 Travel Fund
 - Delegate – Can't be everywhere
 - Multiple Weekly Meetings
- Contract Incentives
 - Need clear understanding
 - What do they mean, how tracked/calculated

Transition Lessons Learned Observations for TRO



- Ensure high risk issues are elevated quickly
 - Program Office
 - Transition Director
 - Transition Oversight Committee
- Maximize use of Interface/Working Meetings
 - Ensure Government/Contractor reviews and understands requirements
 - Ensure transition tasks addressed
- Table Top Exercise with High Risk Transition Changes – ROC Drill on 17 February 2011

Challenges Ahead



- Resolving Protests in South/West
- Asynchronous transition
 - Fort Campbell
 - PSAs
 - CLRAs
- TRICARE Young Adult coverage

We Are All Faces of TRICARE



2011 MHS Conference **Thank You For All Your Efforts**

Focus Areas for T-3 Transition



- TRICARE Prime Availability – “Prime Service Areas”
- Wounded Warrior Programs
- Continuity of Care
- Health Information Exchange
 - Clear and Legible Reports
- National Guard/Reserve
- Clinical Support Agreements and External Resource Sharing Agreements
- Information Security
- Claims Processing
- Provider Relations
- Launch of new program options (TRR, T26)