



6000  
24 Sep 2009

## MEMORANDUM

From: J. G. Allen, LT, Clinic Administrator  
CG ATC

To: CG ATC

Thru: (1) CG ATC (hsd)   
(2) CG ATC (xo)

Subj: PATIENT ADVISORY COMMITTEE MEETING MINUTES FOR 24 SEP 2009

1. The Patient Advisory Committee (PAC) was convened at 1030 on 24 Sep 2009. Attendees present were:

Mrs. Tabatha Dupree (TRICARE Service Center)  
HS1 Shaun Robinson (ATC) SK2 Chad Ball (ATC)  
Mr. Shane Pierce, RN (ATC) OS1 Tomas Tapia (ATC)  
SKCM Lanny Nies (ATC) CDR P. Stewart-Kuhn (ATC)  
AMTCM Jimmy Tatham (ATC) LT John Allen (ATC)  
Mr. Jack Crowley, BMCS (Ret.) AETCM William Spidle (Sector Mobile)  
HSC Derrick Pettis (Sector Mobile)

2. Old Business:

a. Briefly reviewed regular topics to include: available clinic services; the Periodic Health Assessment (PHA) program; clinic staffing; steps to take when receiving a referral. See enclosure (1) for details.

3. New Business:

a. Mrs. Dupre discussed the following TRICARE topics: newborn enrollment to TRICARE Prime; TRICARE Coverage for the flu vaccine; waiver of cost shares for clinical preventive services; Military Treatment Facility (MTF) enrollment by zip code. See enclosure (1) for details.

b. CDR Stewart-Kuhn provided an update on pharmacy services, discussing specifics of the H1N1 vaccine, the current budget impact on the clinic pharmacy, and influenza immunization readiness. See enclosure (1) for discussion details and enclosure (2) for a copy of the June 2009 formulary.

4. The attendance for this meeting was strong, with 12 attendees. The meeting provided an opportunity for attendees to ask several questions that benefited all in attendance as well as the opportunity for attendees to disseminate information back at their respective units and shops.

Subj PATIENT ADVISORY COMMITTEE MEETING  
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5. The next PAC meeting will be scheduled for December 2009.

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Enclosures: (1) PPT for 24 Sep 2009 PAC Meeting agenda  
(2) June 2009 ATC Pharmacy Formulary  
(3) Attendance Roster for 24 Sep 2009

Copy: Patient Advisory Committee

Patient Advisory Committee  
Meeting  
September 24, 2009



## Agenda

- Introduction
- Update on Clinic Staffing
- Patient Responsibility for Referrals Management
- Review of Clinic Services
- Overview of Periodic Health Assessments (PHAs)
- TRICARE News and Updates
- Pharmacy Update
- Beneficiary Feedback, Closing Comments, and Questions



## Update on Clinic Staffing

- LT Bryan Oditt, Physician Assistant, arrived from CGAS Borinquen 01 Jul
- HS arrivals:
  - HSC Gipson arrived July and replaced HSC Cade
  - Three HS1s arrived over the summer

## What To Do When You Receive A Referral

- You will receive a handout from Ms. Jean Lulue (or her substitute) explaining the steps you need to take obtain an appointment for a referral
- This process will not apply to emergent or urgent referrals

## Review of Clinic Services

## Review of Key Clinic Services

- Vasectomy Services
  - Requires two appointments:
    - First appointment is for counseling and obtaining consent
    - Second appointment is for procedure to be performed
  - Requires patient acknowledgement that CG will not pay for a reversal in non-federal facilities



Encl (1)

## Review of Key Clinic Services

- Many patients not aware clinic has after hours duty HS
  - Duty HS available for acute/urgent care: 251-441-6410 or 251-583-1392
  - Has contact with medical officer and other staff members to address after hours issues
- TRICARE On line
  - Can make medical appointments online
  - Requires registration at <http://www.tricareonline.com>
  - Focus is same day appointments



## Review of Key Clinic Services

- Walk in up chit clinic expanded to include Mondays (0720-0800) and Thursdays (1415-1450):
  - Target audiences for the clinic are:
    - Day and night shift personnel who are in need of an up chit.
    - Newly arriving ATC aviation personnel. Note: All personnel checking into ATC must meet with the flight surgeon or aviation physician assistant to obtain an up chit PRIOR to participating in flight duties.
  - Appointments will still be available, but this provides an additional means to obtain an up chit.



## About the PHA

## What is the PHA?

- The Periodic Health Assessment (PHA) is a multi-component process that will ensure service members are ready for deployment, ensure individual medical readiness data is recorded, and deliver evidence-based clinical preventive services
- The PHA is required on an annual basis for all active duty and reserve Coast Guard personnel
- PHAs will be done by birth month
- Beginning 01 Jan 2009, the PHA is mandatory for all CG AD who are enrolled to a CG clinic

## PHA Mandate

- Annual multi-service requirement required by 2005 congressional law
- Ensures service members are ready for deployment,
- Ensures individual medical readiness data is recorded
- Delivers evidence-based clinical preventive services
- DOBMERB, commissioning, enlistment, retirement, confinement, RELAD, aviation, LSO, and dive will still be required
- Routine 5-year physical examinations will no longer be required for active duty and reserve

## PHA Mandate

- Reservist on less than 31 days active duty and active duty personnel not enrolled to a CG clinic will need to call the Reserve Health Readiness Program (RHRP) to make their appointment
  - PHAs will not be performed at a CG clinic for these individuals
- See handout for RHRP process

## TRICARE Update

## Tricare

- Newborn Enrollment into Prime
- Tricare coverage for Flu Vaccine
- Waiver of Cost Shares for Certain Clinical Preventive Services
- MTF Enrollment by Zip Code

## Newborn Enrollment into Prime

- Register Baby in DEERS
- If family member is a Tricare Prime enrollee, baby will be automatically covered under Prime for the first 60 days after birth or adoption
- Enroll Baby in Tricare Prime within the first 60 days of birth or adoption
- If Baby is not registered in DEERS after one year, all Tricare benefits will end

## Tricare coverage for Flu Vaccine

- If unable to obtain the vaccine at an MTF, Tricare will cover the seasonal flu shot, the seasonal nasal spray, and the H1N1 vaccine for qualifying beneficiaries when administered in a Doctors office or network MinuteClinic.
- No Referral needed
- No Cost Share for Standard and Extra
- Nasal Spray vaccine is not covered for ages 50+
- Medicare covers flu vaccine for TFL

## Waiver of Cost Shares for Certain Clinical Preventive Service

- Colorectal Cancer Screening
- Breast Cancer Screening
- Cervical Cancer Screening
- Prostate Cancer Screening
- Immunizations
- Well-child visits for children under six years of age

*Other Clinical services provided during the same visit are subject to appropriate cost-shares and deductibles.*

## MTF Enrollment by Zip Code

- Enrollment for ADSM into Prime is mandatory
- ADSM must enroll in Prime using work zip code
- Tricare Prime Remote – ADSM must live and work more than 50 miles (or approximately an hour's drive) from the closest Military Treatment Facility.
- If AD sponsor is TPR eligible and family members reside with sponsor, they are TPRADFM, as long as DEERS information is correct.

## Pharmacy Update

## ATC Pharmacy Update

- Once available in October, the H1N1 vaccine will be limited to active duty
  - We do not anticipate the H1N1 vaccine will be available for dependents and retirees
- June 2009 Formulary Available
  - Pharmacy funding unavailable until mid-November; will likely impact the availability of some items
  - Active duty personnel have priority for prescriptions. Network pharmacy will be the other option if we are low or out of an item
  - IDHSs will have to wait until Oct for routine supply orders
- As of 23 Sep 2009, Influenza Readiness is 45%
  - Will be unable offer doses to other beneficiaries until active duty personnel are completed



## Closing Comments / Questions

- Beneficiary feedback on clinic services, TRICARE, other topics?

