



Coast Guard HR Flag Voice 90

TRICARE REPORT

TRICARE serves our active duty members and their families, retired military and their families, and survivors world wide, using military health care as the main delivery system, augmented by a civilian network of providers and facilities. It is a massive system, delivering health care to 8.2 million people, filling 1.2 million prescriptions per week, processing 27 million claims a year, and responding to 1.4 million telephone calls each month. Needless to say, implementation of the change to this comprehensive system was not without significant start up problems. Furthermore, initially they did a better job at addressing the large number of service members with access to military treatment facilities, but did not address remotely located units and families (50% of the Coast Guard), as well as retirees. The initial premise that this could be done without an increase in funding was incorrect. This Flag Voice extracts information from TRICARE's latest report to their "stakeholders." Stakeholders include every individual, unit and all of the military services who must rely on TRICARE for health care delivery.

As TRICARE's focus moves from implementation to operation, patient satisfaction continues to increase. Your experience(s) with TRICARE, very dependent upon location, may very well be completely different. However, TRICARE is listening and lists the following as the major issues on their plate:

Improve Access to Care

Make Enrollment/Re-enrollment Easier

Primary Care Managers by Name

Enhance Access for Remote Locations

Expand Access for Retirees Age 65 and Older

Facilitate Management of Complex Cases

Maintain a Strong Civilian Provider Network

Improve Claims Processing

Improve Phone Systems and Phone Support

More specifics on some of these issues:

IMPROVE ACCESS TO CARE

What TRICARE is hearing: "Treatment at the military treatment facility is great, once I can get in."

What they are doing about it:

Implementing uniform standards for telephone answering across the TRICARE system

Simplifying the appointment system to improve accessibility

Improving access to TRICARE Service Centers

Established Access Standards for TRICARE Prime

Urgent Care: 1 Day or Less

Routine Care: 1 Week

Specialty/Wellness Care: 1 Month

Waiting Room Time during Provider's Office Visit: 30 Minutes or Less

Travel Time to Primary Care Provider's Office: 30 Minutes or Less

IMPROVING ACCESS for REMOTE LOCATIONS

What TRICARE is hearing: "I'm 2 hours away from the nearest military treatment facility, how do I get healthcare for my family and me?"

What they are doing about it:

Implemented a new program called TRICARE Prime Remote for Active Duty members In October 1999

Provides a common benefit for ALL military personnel living in remote areas of the United States

Makes accessing civilian health care easier

Offers a 24-hour, 7-day a week hotline for Active Duty members 1-888-647-6676

Simplifies claims processing

Now exploring ways to extend this program to family members of Active Duty

MAKING ENROLLMENT and RE-ENROLLMENT EASIER

What TRICARE is hearing: "Why do I have to re-enroll every year?" "Why do I need to re-enroll every time I move?"

What they are doing about it:

Beneficiaries don't need to re-enroll anymore

Implemented automatic re-enrollment in June 1999

Beneficiaries now receive a notice that they have been automatically re-enrolled each year; to dis-enroll, simply reply to the notice

Implementing a common "Universal Enrollment Card" across the system

In 2000, planning to simplify the transfer of enrollment (usually due to PCS) by eliminating administrative delays

KEEPING PROVIDERS in the NETWORK and IMPROVING CLAIMS PROCESSING

What TRICARE is hearing: "My doctor still hasn't been paid and I received the bill!" "My doctor says: 'TRICARE = slow pay plus low pay.'"

What they are doing about it:

Matched provider payment rates to the Medicare standard in February 1999

Centralized Active Duty claims payment and implemented stricter processing standards in

October 1999

Special units have been, or soon will be, dedicated at Lead Agents and Managed Care Support Contractors to help solve claims problems

Incentives for future managed care support contracts will be based on satisfaction of beneficiaries, providers, and medical commanders

Ongoing process to improve claims processing

Current processing standards: 95% of the claims paid within 30 days; 100% paid within 60 days.

PRIMARY CARE MANAGER by NAME

What TRICARE is hearing: "Exactly who is my 'doctor'?"

What they are doing about it:

On December 3, 1999, the Assistant Secretary of Defense for Health Affairs signed policy requiring that all enrollees have the benefit of a Primary Care Manager (PCM) by name/ supported by a team by September 2000

Beneficiaries will enjoy a professional relationship with one provider for most of their preventive and chronic care needs

PCMs, with the help of new information systems, will be able to better track prevention and chronic conditions for their patients

MANAGING COMPLEX MEDICAL CASES

What TRICARE is hearing: "My child has complex medical needs and nobody can help me navigate through the system(s)"

What they are doing about it: The Case Management Program is designed to provide a continuum of care that coordinates patient care and follow-up through all stages of the complex medical condition

The development of an integrated and enhanced case management program is one of TRICARE's priorities for 2000

Improving the assignment of personal case managers to help coordinate support services

for complex cases

IMPROVING ACCESS to HEALTH CARE for RETIREES AGE 65 and OVER

What TRICARE is hearing: "I'm over 65 -- the military promised me free healthcare for life."

"What they are doing about it: Conducting several demonstrations to determine how to improve access to healthcare for our retirees throughout their lifetime:

In 1998, launched the **TRICARE Senior Prime Demonstration** in six locations to provide accessible, quality care for up to 28,000 Medicare-eligible military retirees and their family members through military treatment facilities

The **Federal Employee Health Benefits Program (FEHBP) Demonstration** (January 2000 - December 2002) will provide medical care for up to 66,000 retired Service members and their dependents in eight test sites

The **TRICARE Senior Supplement Demonstration** (April 2000 - December 2002) will offer TRICARE as supplemental coverage for up to 11,000 Medicare beneficiaries in two locations

The **Pharmacy Redesign Pilot Program** (March 2000) will make network retail and mail order pharmacy benefits available in two locations for approximately 6,000 Medicare-eligible beneficiaries, age 65 and older and who have Medicare Part B

What's available now to retirees Age 65 and over?

Retirees may utilize space available care in the military treatment facilities

Over 400,000 retirees living in areas affected by Base Realignment and Closure (BRAC) are covered by the **BRAC Pharmacy Benefit**

30,000 seniors receive comprehensive coverage by participating in the **Uniformed Services Family Health Plan**

Retirees and their families may participate in the **Retiree TRICARE Dental Plan**

Retirees may participate in several demonstrations currently running in select locations throughout the country

Toll-free health information resources

Clearly, TRICARE has a ways to go before all Coast Guard members and their families will be satisfied with their health care program. However, they understand what their patients are saying and they are working to address our issues.

Regards, FL Ames

For those interested (and with SWSIII), attached is the full report in Power Point. (UNDER CONSTRUCTION: Will be up 6/02) (G-W-1)

[Flag Voice Contents](#)

This page is maintained by [HR Webmaster \(CG-1A\)](#)