

## Regional Directors (RDs)/Military Treatment Facility (MTF) Commanders Interface

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The contractor shall assist the Regional Directors (RDs) and Military Treatment Facility (MTF) Commanders in coordinating health care delivery in their Prime Service Areas (PSAs) and in ensuring the optimal use of MTF capacities. No later than 60 calendar days following contract award, the contractor shall meet with each MTF Commander, Clinic Commander, and the RD to develop a Memorandum of Understanding (MOU) with each facility. The contractor shall prepare and present to each facility a draft MOU No Later Than (NLT) the 75th calendar day prior to the first option period. By the 60th calendar day prior to the start of the first option period, a MOU shall be executed between the contractor, each individual MTF Commander and the RD on these responsibilities. All MOUs shall be approved by the Procuring Contracting Officer (PCO) and the RD. Annually, the MOUs shall be re-executed and approved by the RD and the PCO. A sample MOU is shown in [Addendum A](#). Each MOU shall contain the following provision: "Contract personnel working in the Department of Defense (DoD) MTFs shall comply with all local Employee Health Program (EHP) and Federal Occupational Safety and Health Act (OSHA) Bloodborne Pathogens (BBP) Program requirements." Copies of local program documentation may be obtained through the RD. The contractor shall also execute MOUs with the RD which incorporate the contractor's MOUs with each MTF as attachments. The contractor shall provide copies of each MOU executed to the PCO, TMA, through the RD, within 10 calendar days following the execution of the MOU.

### 1.0 COORDINATION PROCEDURES TO ENSURE BALANCED WORKLOADS

The contractor shall meet with the RD and each MTF Commander to discuss referral patterns and to enter into written agreements to ensure balanced workloads between the military and civilian components of the Military Health System (MHS). These agreements shall provide mechanisms to reallocate workloads, establish priorities for needed network development, and determine Primary Care Manager (PCM) assignment locations for enrollees. The agreements shall also include methods by which the contractor shall ensure that any MTF underutilization is remedied via changes in contractor referral patterns. The agreements may be modified during the year; however, all agreements/modifications shall be concurred upon by the RD prior to implementation. The contractor shall be kept updated on the current status of MTF capabilities through close liaison. The contractor shall be responsible for initiating meetings and/or other actions with the RD and MTF Commanders to assist in remedying problems which can be resolved within the scope of the contractor's responsibility and authority. The contractor shall follow the direction of the MTF Commanders, in consonance with the RD requirements, regarding the priorities for the assignment of enrollees to PCMs. Additionally, the contractor shall respond to requests for meetings initiated by the RD and MTF Commanders. The contractor shall provide appropriate staff to meet with the RD and/or MTF Commanders within two work days of receiving either a verbal or written request.

## **2.0 RD AND MTF INTERFACE FOR PRIMARY CARE MANAGEMENT**

Both civilian and military individual providers may act as PCMs for TRICARE Prime. During the MOU development process, the contractor shall obtain guidelines from the RD and MTF commanders for PCM assignment (by category of beneficiary) or choice for enrollees who reside in the MTFs' PSAs. MTF Commanders will designate whether these enrollees shall have MTF or network PCMs. The contractor shall assign enrollees to PCMs in accordance with the RD and MTF Commanders' determinations.

## **3.0 RD AND MTF INTERFACE FOR SPECIALTY SERVICES**

The contractor shall obtain direction from the RD and the MTF commanders regarding which specific specialty services shall be referred to the MTF. Nonenrollees shall be encouraged to use available MTF specialty services in lieu of civilian providers.

## **4.0 RD/MTF AND CONTRACTOR INTERFACES FOR THE DOD HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY PRIVACY REGULATION**

**4.1** The contractor shall forward initial and annual privacy risk assessments and action plans to the respective RD through the PCO for review and monitoring of compliance. (See [Chapter 19, Section 3](#).)

**4.2** The contractor shall forward all requests for non-routine disclosures through the RD to the TMA Privacy Officer. (See [Chapter 19, Section 3](#).)

**4.3** The contractor shall provide a courtesy copy of all amendment response extensions to the RD. (See [Chapter 19, Section 3](#).)

## **5.0 ADMINISTRATIVE COORDINATION WITH THE RD AND THE MTF**

The contractor shall meet with each MTF Commander or designee monthly and with the RD or designee at least quarterly to facilitate activity coordination between the MTFs and civilian networks. These meetings shall review current contractor activities in quality management, utilization management, marketing, network development, external resource sharing and other activities such as briefings to provider or beneficiary groups or interface with congressional or other Governmental officials. The MTF Commander and/or RD may specify the target audience for any briefing. The frequency of these meetings may be reduced at the discretion of the RD.

## **6.0 RD AND MTF COMMANDER LIAISON**

The contractor shall provide assistance to each RD and MTF Commander and their designees in coordination of TRICARE Prime. The contractor shall ensure that the RD and MTF Commanders have access to contractor personnel to facilitate MTF interface activities and shall ensure that MTF Commanders are kept informed of their program or policy changes which affect the MTF.

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