

## I. LEAD AGENTS/MTF COMMANDERS INTERFACE

The contractor shall assist the Lead Agents and MTF Commanders in coordinating health care delivery in their catchment areas and in ensuring the optimal use of MTF capacities. No later than sixty (60) calendar days following contract award, the contractor shall meet with each MTF Commander, Clinic Commander, and the Lead Agent 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 the seventy-fifth (75th) calendar day prior to the first option period. By the sixtieth (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 Lead Agent on these responsibilities. All MOUs shall be approved by the Contracting Officer and the Lead Agent. Annually, the MOUs shall be re-executed and approved by the Lead Agent and the Contracting Officer. A sample MOU is shown in [Addendum A](#) of this chapter. Each MOU shall contain the following provision: "Contract personnel working in the DoD Medical Treatment Facilities 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 Lead Agent. The contractor shall also execute MOUs with the Lead Agent which incorporate the contractor's MOUs with each MTF as attachments. The contractor shall provide two (2) copies of each MOU executed to the Contracting Officer, [TMA](#), through the Lead Agent, within ten (10) calendar days following the execution of the MOU.

### A. Coordination Procedures to Ensure Balanced Workloads

The contractor shall meet with the Lead Agents 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 MHSS. These agreements shall provide mechanisms to reallocate workloads, establish priorities for needed network development, and determine 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 Lead Agents prior to implementation. The contractor shall be kept updated on the current status of MTF capabilities through close liaison by the contractor's TRICARE Service Center staff ([OPM Part Three, Chapter 4, Section IV.](#)). The contractor shall be responsible for initiating meetings and/or other actions with the Lead Agents 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 [Lead Agent Requirements](#), regarding the priorities for the assignment of enrollees to primary care managers, and the credentialing of resource sharing providers in accordance with the provisions in [Section II.C.6.](#) of this chapter. Additionally, the contractor shall respond to requests for meetings initiated by the Lead Agents and MTF Commanders. The contractor shall provide appropriate staff to meet with the Lead Agents and/or MTF Commanders within two (2) work days of receiving either a verbal or written request.

### **B. Lead Agents and MTFs Interface for Primary Care Management**

Both civilian and military providers *can act as primary care managers (PCMs) for TRICARE Prime. MTF primary care managers (PCMs) shall be assigned by name/ supported by a team. Civilian network PCMs shall be* individual providers. The contractor shall obtain guidelines from the Lead Agents and MTF commanders for PCM assignment (by category of beneficiary) or choice for enrollees who reside in the MTFs' catchment areas. MTF Commanders will designate whether these enrollees shall have MTF or network PCMs. If the designation is an MTF PCM, the designation *shall be* for a specific *assigned PCM by name/ supported by a team*. The contractor shall assign enrollees to PCMs in accordance with the Lead Agents and MTF Commanders' determinations.

### **C. Lead Agents and MTFs Interface for Specialty Services**

The contractor shall obtain direction from the Lead Agents and the MTF commanders regarding which specific specialty services shall be referred to the MTF. Nonavailability of MTF specialty services shall be established prior to referring enrollees to network providers. Nonenrollees shall be encouraged to use available MTF specialty services in lieu of civilian providers.

### **D. Administrative Coordination with the Lead Agents and the MTFs**

The contractor shall meet with each MTF Commander or designee monthly and the contractor shall meet with the Lead Agents or designees at least quarterly to facilitate activity coordination between the MTFs and civilian networks. These meetings shall be initiated by the contractor for the purpose of reviewing current contractor activities in quality management, utilization management, marketing, network development, resource sharing and other activities such as briefings to provider or beneficiary groups or interface with congressional or other governmental officials. The frequency of these meetings may be reduced at the discretion of the Lead Agents.

### **E. Lead Agents and MTF Commander Liaison**

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