Appendix A
List of Questions for Site Visits

QUESTIONS ABOUT SENIOR PRIME:

OVERALL STRATEGY FOR IMPLEMENTATION

What are the goals and overall strategies of this site for Senior Prime? Have they changed since the early phases of planning?
What types of decisions is the site making individually in designing its Senior Prime program?
What Senior Prime design decisions have the sites made collectively?
If the sites are making collective design decisions, for what types of decisions have they found this approach to be useful?
Which individuals at the site actually did the planning for Senior Prime? What were their respective roles?
In your view, what major decisions by DoD or HCFA have driven the implementation process?
Which decisions have been made by DoD or HCFA and which have been made locally by sites?
When designing the Senior Prime program, what views were sought or received from:
  • retiree organizations or beneficiaries
  • MTF physicians and other staff
How are the sites communicating and working with each other in addition to the regular meetings of the sites’ representatives?
How have the experiences of the sites that implemented Senior Prime enrollment earliest been influencing the implementation strategies of other sites?
How is the site’s early experience confirming or modifying implementation strategies?
What features do the sites see as unique to their catchment area and mission that need to be taken into account if Senior Prime were implemented systemwide?

INITIAL VIEWS OF THE SITES

What factors were initially thought to most strongly influence decisions by dual eligibles regarding Senior Prime enrollment and service utilization? What are your views now?
How was Senior Prime expected to affect patient satisfaction for dual eligibles and non-dual eligibles? What are your views now?
What benefits was Senior Prime expected to provide the MTF? What are your views now?
What concerns were there about the potential impact of Senior Prime on the ability of MTFs to serve non-dual eligibles, and the potential impact on access to care and patient satisfaction? What are your views now?
What effect was Senior Prime expected to have on the MTF’s service delivery or overhead costs? What are your views now?
What were views initially about the effect of Senior Prime on the MTF’s overall readiness mission? What are your views now?
COMPLIANCE WITH HCFA CONTRACTUAL REQUIREMENTS

How did the Lead Agent, MTF, and TRICARE contractor coordinate their respective roles in development of mechanisms to achieve compliance with HCFA requirements?

What actions were undertaken to meet the conditions for participation required for Medicare health plans?

What impacts did the actions taken for Medicare compliance have on other aspects of the sites’ operations or health care delivery processes?

Which issues or challenges involved in qualifying as a Medicare health plan were shared by all the sites, and which were unique to individual sites?

What other issues arose during the Medicare health plan application process and how were they resolved?

MANAGEMENT STRUCTURE AND ROLES

What factors were considered in deciding the management structure for the Senior Prime program?

How are the Lead Agent, MTF, and TRICARE contractor coordinating their respective roles in Senior Prime management?

How have management roles changed since preparing the Senior Prime application? Why were changes made, if any?

How do the organizations work together to resolve problems that arise?

How has the MTF approached building a managed care team? How is Senior Prime integrated into other TRICARE managed care activity?

For early experiences, what aspects of Senior Prime management are:

- working especially well
- presenting challenges to resolve

STARTUP TRAINING AND PREPARATION

How are the Lead Agent, MTF, and TRICARE contractor coordinating their respective roles for training personnel for Senior Prime?

What new programs were established specifically to serve the Senior Prime enrollees? How are they working?

What training is being provided to MTF staff for delivering care to Senior Prime enrollees?

What clinical management challenges did providers find in preparing for service delivery?

What changes needed to be made to standard operating procedures for the Lead Agent, MTF, or contractor? How have the new procedures been working?

ENROLLMENT MARKETING AND PROCESS

How are the Lead Agent, MTF, and TRICARE contractor coordinating their respective roles in Senior Prime enrollment?

How was the decision made on the site’s Senior Prime enrollment targets? What factors were considered?

Do you expect to meet those enrollment targets? What does this mean for meeting LOE and financial liability?
What is the overall strategy for marketing Senior Prime to dual-eligible beneficiaries?

How did the site’s enrollment targets influence the approach taken to market Senior Prime to beneficiaries?

What pre-enrollment information is provided for the dual eligibles in addition to the materials prepared by DoD?

What procedures are established to keep the dual eligibles informed about Senior Prime and to address questions or concerns?

To what extent are efforts being made to educate non-dually eligible beneficiaries regarding effects of Senior Prime on their access to care? And to respond to concerns?

What new mechanisms did the TRICARE contractor establish to manage Senior Prime enrollment activity?

Are TRICARE contractor staff and processes adequate to handle enrollment effectively?

Are enrollments being depressed because beneficiaries view the short 2-year life of the demonstration as too risky?

What unexpected delays or problems occurred in starting the enrollment process? How were they managed?

**PROVIDER NETWORKS AND SERVICES**

How are the Lead Agent, MTF, and TRICARE contractor coordinating their respective roles in developing mechanisms to achieve compliance with HCFA requirements?

To ensure the site could provide Medicare-covered services, what adjustments were made in:

- mix of MTF clinical staff
- MTF physical facilities
- MTF equipment
- TRICARE network providers

What options were evaluated for achieving the required provider mix?

What factors were considered regarding use of network providers?

For what services are network providers delivering care for the dual-eligible beneficiaries?

What modifications to existing provider contracts were needed to comply with Medicare requirements?

Does the site anticipate that changes in MTF clinical staffing may lead to inconsistencies with the provider mix required for the MTF’s readiness and training mission?

How important was it to maintain staffing flexibility for Senior Prime due to potential deployments of clinical personnel?

If deployable personnel are an issue, how did the site consider the issue in staffing decisions?

What other impacts, if any, did provider changes have on the MTF’s ability to provide services to non-dual eligible beneficiaries?

What unexpected delays or problems occurred in the start of service delivery to beneficiaries. How were they managed?

How are service coverage decisions made for Senior Prime enrollees as services are being provided? Who is involved in decisions?
What are early experiences in delivering services. Any highlights of areas of success or problems; implications for expansion of Senior Prime systemwide?

QUALITY ASSURANCE

How are the Lead Agent, MTF, and TRICARE contractor coordinating their respective roles in quality assurance planning and monitoring?

What approach has the site taken to respond to HCFA quality assurance requirements?

How was the quality assurance plan for the Senior Prime program developed? Who was involved?

How much was the MTF’s existing QA plan modified to encompass Senior Prime?

How is the Senior Prime QA plan integrated with other QA activities, e.g., ORYX.

How have the QA plan goals or measures been modified since it was first developed?

What quality indicators have been identified as most important to monitor? Why?

What new quality indicators were added specifically for Senior Prime and why?

Are all the sites monitoring a set of common indicators? If so, how was the set chosen?

What data collection and reporting procedures are being used to monitor the quality indicators?

How are service modification decisions made in response to QA findings?

What are the site’s early experiences with beneficiaries in the grievance and appeal process? What issues are surfacing?

How is information on grievances and appeals being reported to site management? What actions have been taken by the site?

What are the site’s early experiences with beneficiaries in the patient relations/customer affairs function? What complaints are being received?

How is information on complaints being reported to Senior Prime management? What actions have been taken by the site?

Is the site performing any customer surveys other than the DoD surveys? If so, what questions are asked, how frequently, and when are results reported?

IMPACTS ON GME/TRAINING

What value, if any, does Senior Prime offer for the hospital’s training mission (if teaching)? What potential negative effects?

How is Senior Prime expected to affect specialty physician caseloads? What are the implications for medical education?

Do the various specialties have differing views regarding the value of Senior Prime for training?

MARKET POSITIONING FOR SENIOR PRIME

How would you characterize the Medicare managed care market dynamics in the service area?

How are local market dynamics influencing the site’s implementation decisions?

Are many dual eligibles in the service area are enrolled in other Medicare health plans?

Do the other Medicare plans view the Senior Prime plan as serious competition?

What actions have you seen the other plans taking in response to entry of Senior Prime?
FINANCIAL CONSIDERATIONS
Is Senior Prime expected to be a financial benefit or liability for the site MTFs?
Does each MTF, and the site as a whole, expect to meet the LOE requirement?
What are the most important new costs being incurred for Senior Prime?
  • Staff and other resource overhead costs
  • Direct costs of delivering care
Which of the organizational and start-up activities, and related costs, that were committed to initiating Senior Prime will continue during ongoing plan operation?
If Senior Prime were extended broadly in the military health system, how would start-up costs compare to those for the demonstration?
Is Senior Prime helping to achieve more efficient use of existing MTF physical plant that had not been fully used before?

EFFECTS ON SENIOR PRIME ORGANIZATIONS
How has Senior Prime changed operating circumstances most significantly for each of the following parties, and how have they responded?
  • the Lead Agent’s office
  • the TRICARE contractor
  • MTF management
  • MTF physicians
  • MTF clinical and support staff
How easy has it been for MTF staff to adjust to a managed care environment?
How has the workload of MTF staff changed with Senior Prime? How have they managed additional time demands, if any?
How has Senior Prime affected civilian provider organizations (e.g., home health)

EFFECTS ON BENEFICIARIES
How are dual eligible beneficiaries adjusting to a managed care environment?
What benefits or problems do beneficiaries expect to see from Senior Prime?
What are the key reasons why beneficiaries are enrolling in Senior Prime?
What specific concerns have the dual eligibles raised about Senior Prime? How has the site handled those concerns?
Are other DoD beneficiaries in the service area concerned about having less ready access to MTF services due to Senior Prime?
What other concerns have other DoD beneficiaries expressed? How are those concerns being handled?

QUESTIONS ABOUT MEDICARE PARTNERS:

INITIAL VIEWS OF THE SITES REGARDING MEDICARE PARTNERS
How likely is it that one or more Medicare health plans will approach the MTF for a Medicare Partners contract?
What benefits might the MTF gain by participating in Medicare Partners?

How might Medicare Partners affect the ability of the MTF to provide services for non-dual eligibles? How will that affect access to care and patient satisfaction?

What effect might Medicare Partners have on the MTF’s direct and indirect costs?

How might Medicare Partners affect the MTF’s overall readiness and training mission?