

# The Soldier and Family Voice

Volume 3, Issue 5

May 2004

## TRICARE Contractor Changes

By Jerry Harben "The Mercury" 2004 (abridged)

More than eight million beneficiaries receive health-care services through TRICARE, many of them from civilian medical providers in networks organized by regional contractors. This year TRICARE is undergoing major reorganization.

The current eleven TRICARE managed-care support regions and seven regional contracts in the United States are being replaced by three regions and three contracts. Awarded to Health Net Federal Services (North Region - current TRICARE Regions 1, 2 and 5), TriWest Healthcare Alliance (West Region - current Regions 7, 8, 9, 10, 11 and 12) and Humana Military Healthcare Services (South Region - current Regions 3, 4 and 6).

The phased turnover of responsibility is to begin in June with the current Region 11 in the Pacific Northwest. Target dates for transition of other regions are July 1 for Regions 2, 5, 9, 10, 12 and Alaska; August 1 for Regions 3 and 4; Sept. 1 for Region 1; Oct. 1 for Regions 7 and 8; and Nov. 1 for Region 6.

"Our new TRICARE contracts will reward superior customer service, simplify administration of TRICARE, and increase the ability of local medical commanders to best serve their local beneficiaries," according to Assistant Secretary of Defense for Health Affairs Dr. William Winkenwerder.

## INSIDE THIS ISSUE

- 1 TRICARE Contractor Changes
- 1 Senioritis and Other Spring Rituals
- 2 When You Don't Like Your Teenager's Friends
- 3 Geriatric Care Managers: Who They Are and How They Can Help
- 3 Raising Happy, Resilient Children

CONTRACTS continued on page 2

## Senioritis and Other Spring Rituals

By Ceridian Corp April 8, 2004 (abridged)

As the weather turns warmer and the end of your child's high school career draws near, he may have trouble focusing at school. Thoughts of how to pack every moment with last-minute fun and bonding with friends before the end of high school and distractions like proms and graduation day make it difficult for many seniors to concentrate on the last few months of school. But late spring is a crucial time for high school seniors who are taking AP exams and getting ready for final exams before graduation.

According to a report released in 2001 by the National Commission on the High School Senior Year, many students are unprepared for college. Up to 40 percent of college freshmen need remedial help when they get to school. This is in part due to persistent senioritis (the belief that once a senior is accepted to a college, he or she can relax for the rest of the year). According to the report, senior year is becoming, "a lost opportunity during which time many students let one-quarter of their high school learning time slip through their fingers." But this tendency to drift or relax can have disastrous results. Colleges do care about second-semester grades, and it's not unusual for a school to withdraw an offer of admission if a student's grades have slipped dramatically during the second half of the year.

You can help your child stay focused this spring by

- Gently reminding her of the importance of spring-semester grades. Try to check in with your child to make sure that she's still engaged in school without nagging.
- Talking to your child about any fears or worries she may be experiencing.

Finally, recognize that your child may be feeling burned out after navigating the college application process. Some teenagers need a little time to recover from the pressure and tension of applying to college, taking the SATs, and waiting to hear back from schools. It's OK to take it easy for a week or two, but it's still vital to stay on top of homework and finals. Remind your child that she has the entire summer to relax and prepare for college. Φ

Medical Command officials emphasize that patients will be entitled to the same health-care benefits as before. There will be no changes to deductibles, enrollment fees, co-payments, catastrophic caps or cost shares. Another thing that will not change is that the military treatment facilities will remain the core of the system.

"There will be fewer regions across which people must travel, only three big areas to which the same standards are applied. We're decreasing variance in how we deliver the health benefit," said COL Christie A. Smith, chief of the TRICARE division at MEDCOM Headquarters.

One major feature of the new contracts is financial incentive for contractors to exceed the contract-required standards. Smith said there will be an awards fee for contractors based on satisfaction of commanders, beneficiary satisfaction, network adequacy, contingency support and performance standards. She added that the standards for the contractors' networks of providers are changing from being based on the number of providers (some of whom may limit how many TRICARE patients they will treat) to a standard for the time to obtain appointments. "We're probably going to have to have more providers in the network to meet these access standards," she said.

The Department of Defense is phasing in a revised financing system for TRICARE beginning with the transition to the new contracts. The military medical treatment facilities (MTF) are being held more accountable for the care they provide to their enrollees - including referred care to the networks - and will also assume more responsibility for functions such as appointments, utilization management, consult management and resource sharing.

"Under revised financing, the region contractor will bill the MTF for care their enrollees receive in the network. Currently, we don't operate under these business rules. Commanders will do some strategic planning to decide what services they want to buy for their enrollees and what services they will want to bring into the MTF. They will have to know their enrolled population's needs for health services very well. It will take tight referral management and case management," Smith said.

Contract language makes clear that medical support can be provided by other federal facilities before the contract network. "The new contracts make collaboration with the (Department of Veterans Affairs) easier. There should no longer be a perception that the VA must be a TRICARE network provider in order to collaborate on clinical services," Smith said.

During the transition to the next generation of TRICARE support contracts, beneficiaries will continue to file claims with their current TRICARE contractor. Claim information will be automatically forwarded to the new contractor when appropriate. Φ

## When You Don't Like Your Teenager's Friends

By Ceridian Corp April 8, 2004 (abridged)

In your teen's world, friends are of the utmost importance. Many teenagers feel their friends are the only ones who understand them, who don't treat them like a child, and who accept them for who they are. This increasing dependence on friendships outside the family is a normal part of becoming an independent person.

While it's important that parents understand how important teenage friendships are, when you don't like or don't trust your teenager's friends that can be difficult. But it's crucial to find a way to encourage your child to seek out other friends rather than discourage a particular friendship.

Try to remember that it's not actually necessary for you to like all of your child's friends. After all, you wouldn't expect her to like all of your friends, would you? Here are some other tips:

- Make your home available and welcoming for your teenager and his friends. This will give you a chance to get to know them -- especially the ones you think you don't like or trust. Give the teenagers their space, but don't be afraid to say hello or talk with them for a few minutes when they come to your home.

- If you're worried that a friend or group of friends is negatively influencing your teenager, make an effort to try to get to know them before you discourage the friendship. Tell your child that you're not comfortable with her spending time with people you don't know, and ask her to invite her friends over for a meal or to hang out so you can get a chance to talk with them.

- Avoid overreacting. Try to understand that teenagers often "try out" friends just as they try out new clothes or hairstyles. This is all part of the process of discovering who they are. If you don't overreact, you may find that your teenager's friendship with someone you don't like doesn't last for long.

- Try to separate emotions or rumors from facts when making judgments about your child's friends. Just because someone has a personal style you don't approve of or comes from a particular background doesn't mean that he is an unsuitable friend for your child. Base your judgment on what you see and what you know. Are your teenager's friends courteous to you? Do they treat your child with respect? Are they involved in safe and appropriate activities?

- Focus on positive conversations about your child's social life in general rather than negative criticism of a particular friend. Your teenager may see criticism of her choice in friends as an attack on her own judgment. Talk about what

## Geriatric Care Managers: Who They Are and How They Can Help

By Ceridian Corp April 8, 2004 (abridged)

A geriatric care manager, or GCM, is a professional, such as a social worker, counselor, nurse, or gerontologist, who specializes in helping older adults and their families by assessing the needs of older adults and creating personalized long-term care plans to maximize an older adult's ability to function independently. They can also

- Screen, arrange, and monitor in-home help or other services.
- Identify problems, clarify needs, and evaluate available options.
- Review financial, legal, or medical issues and offer referrals to geriatric specialists to avoid future problems while conserving financial resources.
- Provide home-safety evaluation.
- Provide crisis intervention.
- Assist with moving an older person to or from a retirement complex, assisted care home, or nursing home by helping locate appropriate facilities, guiding families through paperwork, and managing the transition.
- Provide consumer education and advocacy about services and products designed to help older adults.
- Offer counseling and support to the client as well as family.

Many families find that GCMs can be an invaluable resource, particularly for people who don't live close to their older relatives and are unable to play a daily role in their relative's care. A geriatric care manager can arrange services and care for your older relative, provide progress reports, and alert you to any concerns or problems that may arise. Geriatric care managers are usually familiar with local services and options for your older relative, including transportation, elder care services, social opportunities, meal delivery programs, and more.

Here are some common questions and answers about geriatric care managers:

1. Will a GCM care for my older relative?  
GCMs typically don't provide actual care for older adults. Instead, they arrange and oversee care.
2. What kind of training or background do GCMs have?  
GCMs come from a variety of backgrounds. They might be social workers, gerontologists, nurses, or therapists. They often

kinds of things bring friends together, what kinds of people she's generally attracted to, and how she can reach out to meet new people.

-See if your teenager is interested in starting some part-time work or getting involved in an extracurricular activity. This can help turn his attention to a new direction while taking up time that might otherwise be spent with friends.

If you are worried about your child's safety when she's with certain friends, tell her so without overreacting or being dramatic and without accusing her or her friend of anything. "Dana, I really worry about you when you spend the afternoon at Michelle's house, because her parents aren't home and I know she has an older boyfriend." Then let her know that you understand how important her friendships are: "I know that you and Michelle have become good friends and that you have a lot of fun with her." Finally, ask her to consider some ways to help you be more supportive of the situation. "Maybe you could invite Michelle and her boyfriend over here for dinner this week or you could hang out at our house once in a while."  
Φ

## Raising Happy, Resilient Children

By Ceridian Corp April 8, 2004 (abridged)

There is no exact recipe for raising happy children who will grow into satisfied, successful adults. But according to Dr. Ned Hallowell, the author of *The Childhood Roots of Adult Happiness*, there are five steps you can take as your child grows and learns to help him build the foundation for a happy adulthood. The five steps include:

1. Connect
2. Play
3. Practice
4. Mastery
5. Recognition

Hallowell urges parents to think of the five steps as a continual cycle that can be put into use in just about any situation. A lot of kids are going through their childhoods thinking that if they don't come in first then all is lost." But, says Hallowell, research shows that there is no connection between being number one -- whether it's in terms of grades, test scores, sports, or any other area -- and the kind of life you live as an adult. "What correlates with happiness and success later on are feelings of confidence and optimism, a 'can-do' attitude, an ability to ask for help, an ability to get along with other people, and a sense of initiative and excitement."

Step 1: Connect

Connection is a feeling of being part of something larger than you are. It begins with a parent's unconditional love for a child. From that unconditional love within a family, connection radiates out into other areas, including to friends, community, to activities, sports, or any other interest (driven

have masters' level education and training or extensive experience working with older adults. Any GCM you are considering hiring should also be a member of the National Association of Professional Geriatric Care Managers.

### 3. How are GCM services paid for?

GCMs bill on a fee-for-service basis. Their services are not covered in most insurance policies and are currently not covered under Medicare or Medicaid. It may be possible to bill some services to an insurance carrier depending on the individual circumstances.

### 4. What will a GCM do?

A GCM usually starts with an in-person assessment. He or she will interview your older relative and/or family members about everything from medical issues to hobbies and interests. The GCM will then create a care plan that may include community resources, in-home care, or a transition to a nursing home or assisted living facility depending on your relative's needs. A care plan includes everything from small recommendations, such as suggesting an afternoon walk or adjusting personal routines, to larger recommendations, like a move to a nursing home. The third step a GCM will take is arranging services. This is where a GCM's local knowledge really comes into play. They should know which programs and options work and would be best for your relative. Once services are arranged, the GCM will continue to monitor and re-assess the care plan, making adjustments when needed and keeping you up to date and informed.

### 5. How do I find a GCM?

The National Association of Professional Geriatric Care Managers has a referral network that covers the entire country. You can get a list of current members by calling 520- 881-8008. The association's Web site is [www.caremanager.org](http://www.caremanager.org). You can also find GCMs through your local Area Agency on Aging, hospital discharge planner, or organizations like the Alzheimer's Organization.

### 6. How do I choose a GCM?

Hiring a GCM is like hiring an employee. You want to be sure that you are working with someone who has the skills, knowledge, and personality you and your older relative need. Be sure to interview potential GCMs and ask for references. Also ask for credentials, training, licensing information, fees, how the GCM prefers to communicate with family members, whether the GCM is available on an emergency basis, and how long the individual has been working as a GCM. Also ask if he or she is certified and by whom. Φ

by curiosity and confidence), Children who are happy with who they are usually have healthy connections outside of themselves -- to a friend, pet, parent, nature, or an activity they love.

### Step 2: Play

The child who feels connected naturally wants to move on to play. But play means more than just games or entertainment. According to Hallowell, it means any activity that engages the imagination, whether it's reading, playing soccer, or spending time with friends. You can help your child discover a sense of play by exposing him to many different things until he discovers what really lights up his brain and grabs his imagination.

### Step 3: Practice

When children find something they love, they want to do it over and over again. That's practice. Practice that comes out of play leads to lifetimes habits of discipline and responsibility that's driven by enthusiasm, not fear.

### Step 4: Mastery

As they practice, children naturally get better at whatever they are doing, which is mastery. The feeling of getting better is one of the greatest feelings we can experience as humans. That's the root of the 'can-do attitude that's so important to success and satisfaction throughout life."

### Step 5: Recognition

As children practice and experience mastery, they gain recognition. When children get these signs of recognition they know they are gaining mastery and they feel more confident and enthusiastic. Recognition also has a second purpose -- it encourages moral behavior. Being noticed and recognized connects children to the wider group, to a sense of belonging that feels good and encourages people to continue behaving in ways that sustain that connection to the wider group.

"You should put your energy into steps one and two, connection and play," says Hallowell, "and let the rest follow. What you need for long-term joy and achievement is a solid foundation of connection and play. If you get connection and play -- you will feel there's nothing you can't handle as part of a team. You'll know when to ask for help and where to find it. You'll have this tremendous sense of life as a doable, enjoyable, undertaking." Φ

## GREETINGS

### Questions or Comments

If you have any questions or comments related to anything in this newsletter--Email Tony Raimo at [anthony.raimo@usarec.army.mil](mailto:anthony.raimo@usarec.army.mil)

Don't see something that you would like to see? Let me know!