

**FEDERAL PATIENT CENTERED MEDICAL HOME (PCMH) COLLABORATIVE**  
Catalogue of Federal PCMH Activities *as of October 2012*

**OPERATING DIVISION/DEPARTMENT:**

Department of Defense (DOD)/ TRICARE Management Activity (TMA)/Health Affairs (HA)

**Respondents:**

- John Kugler, MD, Deputy Chief Medical Officer
- Regina Julian, Director, Patient Centered Medical Home  
Primary Care Division

**PRÉCIS:**

The DOD provides healthcare for active duty service members, retired military personnel, and their family members. DOD provides care for its beneficiaries in both the private healthcare sector through TRICARE and in the direct care system at military medical treatment facilities worldwide. The DOD's healthcare vision is to deliver access to high-quality, safe medical care. The DOD sees the Patient Centered Medical Home (PCMH) as the most promising model to deliver this care. DOD has a variety of internal marketing materials, policies and demonstrations that are being used to evaluate its transition to PCMH-based model of healthcare for beneficiaries in the direct care system. In addition, the DOD works closely with the Department of Veterans Affairs (VA) to achieve mutual goals.

**STRATEGIC GOALS OF THE OPERATING DIVISION/DEPARTMENT:**

- *Strategic goals explicitly support advancing the PCMH.* DOD supports the continued transformation of the primary care system into a PCMH model of care in order to improve healthcare quality, access, satisfaction and safety for the nation's military, retired personnel, and their families. The PCMH model has been endorsed by Health Affairs/TRICARE Management Activity (HA/TMA) and the individual Services' senior leadership. The DOD is committed to transforming all primary care product lines, including internal medicine, family medicine, pediatrics and flight/undersea medicine into Patient Centered Medical Homes.

DOD's strategic vision is based on Dr. Don Berwick's "Triple Aim" [Care, Health, and Cost]<sup>1</sup>; the DOD's vision is called the "Quadruple Aim", which adds the important fourth goal of military readiness. The Quadruple Aim vision creates health care value for the military system through 1) optimized population health, 2) patient experience, safety, and quality care, 3) responsible use of resources, and 4) supporting readiness in the medical military mission. The strength of leadership endorsement of PCMH lies in its ability to strongly enhance the success of the Quadruple Aim.

Within the DOD, all three Service branches are implementing the PCMH concept of primary care in all 400+ primary care clinics, including internal medicine, family medicine,

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<sup>1</sup> Berwick, DM. The Triple Aim: Care, Health and Cost. *Health Affairs* 2008; 27( 3): 759-769.

and pediatrics. The Army, Navy, and the Air Force have all codified their processes and guidelines in approved Service instructions. At the HA/TMA level, one of the primary responsibilities of the Office of the Chief Medical Officer is to provide guidance and oversight of the medical home initiative, implementation process and relevant policies and procedures for the military health system. The Patient Centered Medical Home Branch within the Office of the Chief Medical Officer works with other functional experts in HA/TMA and with the Service representatives to operationalize the PCMH policy, coordinate efforts, and provide subject matter expertise across the DOD.

## **AREAS OF PCMH ACTIVITY:**

### **Direct provision of health care services or funding of care**

- *TRICARE.* DOD is responsible for the healthcare of over 9.6 million eligible beneficiaries of the military health system. There are a variety of plan types available to beneficiaries, but most beneficiaries under age 65 are eligible for direct care in the military health system facilities; depending on capacity, some categories of beneficiaries are enrolled on a space-available basis. All active duty personnel are enrolled to direct care military treatment facilities unless they are geographically isolated, in which case they are considered TRICARE Prime Remote. Beneficiaries who are not enrolled to a direct care military treatment facility may access health care in the private healthcare sector by using TRICARE, the military's healthcare insurance. The DOD guidance on the transformation of primary care into a patient centered medical home model is outlined in the HA Policy Memorandum *Implementation of the 'Patient-Centered Medical Home' Model of Primary Care in Military Treatment Facilities (MTFs)*, dated September 18, 2009. This policy memorandum is used in conjunction with ASD(HA) Policy (ASD)/Health Affairs(HA) Policies 11-005, TRICARE Policy for Access to Care, February 23, 2011, which identifies access to care standards for beneficiaries, identifies beneficiaries' right to choose a Primary Care Manager (PCM) and establishes requirements to ensure MTF access standards are the same as those required of the Managed Care Support Contractors (MCSCs) in private sector care. In addition, DOD is examining whether to program funds to support this initiative starting for fiscal years 2012 through 2016 through the Program Objective Memorandum (POM) funding process. In order to determine the return on investment in PCMH, the Military Health System (MHS) will monitor various metrics, correlating the growth in PCMH enrollment to Quadruple Aim performance.

### **Pilot or demonstration programs**

- *MHS Business Planning Pilot:* DOD has identified seven demonstration sites, which will be used to test business planning processes for medical homes to determine whether pay-for-performance (P4P) and sub-capitated payments will improve patient outcomes. The demonstration sites are also evaluating per member per month (PMPM) measures (average of total healthcare costs/resource use for a single member in a plan month), Healthcare Effectiveness Data and Information Set (HEDIS)

measures, and other measures of performance, effectiveness, and healthcare quality.

### **Technical assistance, implementation assistance**

- *Technical Assistance and Program Coordination for PCMH Implementation.* The Patient Center Medical Home Division in the Office of the Chief Medical Officer at DOD provides oversight, coordination, and technical assistance to the Services in their efforts to implement PCMH. All of DOD's 400+ PCMH practices are or will seek formal recognition as PCMHs from the NCQA by meeting the NCQA's PCMH Standards and Guidelines. In 2011, the first year the MHS sought formal recognition, 47 primary care practices were formally recognized by NCQA as Level 2 or 3 PCMHs; in 2012, over 130 family medicine, internal medicine and pediatrics practices are seeking formal recognition. DOD also facilitates PCMH implementation and operations by identifying and coordinating budget, information technology, guidance, training and business policy issues. DOD is also currently developing outcome measures, which correlate growth in PCMH enrollment to Quadruple Aim performance. These outcome measures include but are not limited to those which measure satisfaction, timeliness of care, and PCMH continuity. HA/TMA collaborates and coordinates with the Services through a formal advisory board process. In addition, a working group, consisting of Service representatives, various Subject Matter Experts and HA/TMA personnel, reports to the Advisory Board. The PCMH Working Group acts on Advisory Board recommendations to include guidance and strategic communication, performance measurement, information management, technology and business/clinical intelligence requirements, and other business process issues. In collaboration with the Services, TMA has drafted a PCMH Guide to assist in implementation planning and operations. In addition, TMA has developed an MHS Guide to NCQA Recognition and is developing a centralized strategic communication toolkit as well a guide on per capita cost control for clinical leaders. In order to facilitate communication among PCMH practices and Services, TMA is the administrative lead of an AHRQ-hosted DOD/VA PCMH Collaborative web portal; users can access and upload current documents, see the current implementation status and schedule, and participate in forums on a variety of topics related to PCMH implementation. Finally, HA/TMA business and strategic planning groups as well as PCMH Branch personnel are also visiting PCMH sites to evaluate and assist them in implementation.

### **MATERIALS:**

#### **Seminars and presentations**

- *PCMH in the context of the Military Health System.* Dr. Kugler presented DOD's PCMH initiatives to the PCMH Federal Collaborative on May 19, 2010.
- *Future Directions in Evaluating the PCMH: A Workshop Session.* Ms. Julian updated the PCMH Federal Collaborative on the outcomes being used by the Military Health System (MHS) Patient Centered Medical Home on June 6, 2012.

## Websites

- *Uniformed Services Academy of Family Physicians (USAFP) Website.* The USAFP is one of the chapters of the American Academy of Family Physicians. Their site discusses civilian activities and serves as an informal place for PCMH information. Access the site at <http://www.usafp.org/Patient-Centered-Medical-Home-Page.html>.

## Policies and Guidelines

- *Compendium of Service Policies.* DOD is in the process of developing a guide to aid providers and planners in medical home implementation. The guide will also include DOD's definition of the medical home. The PCMH Guide will be distributed through Service channels and also available on the password-protected DOD VA Federal Collaborative website hosted by the Agency for Healthcare Research and Quality (AHRQ).
- *Marketing Campaign for PCMH users.* DOD is preparing PCMH marketing materials for internal and external stakeholders. Specific marketing materials will be prepared in collaboration with Service representatives for team members, specialists and other military treatment facility personnel, patients, and military installation leaders. Marketing materials will be distributed through Service channels and also available on the password-protected DOD VA Federal Collaborative website hosted by AHRQ.

## Reports and Monographs

- *Advances in Patient Safety: From Research to Implementation.* The 140 articles included in the *Advances in Patient Safety* series cover a wide range of research paradigms, clinical settings, and patient populations. The articles describe what federally funded programs have accomplished in understanding medical errors and implementing programs to improve patient safety over the last 5 years. This compendium is sponsored jointly by the AHRQ and the DOD-Health Affairs. The TMA wrote a piece on quality in medical homes and the development of metrics that will be particularly related to PCMH activities. Access the research at <http://www.ahrq.gov/qual/advances/>.

## ACTIVE PCMH COLLABORATIONS WITH FEDERAL PARTNERS:

- *Veteran's Administration.* DOD and the VA are responsible for the care of some of the same categories of beneficiaries. As a result, the two agencies often collaborate on healthcare issues that pertain to both organizations. The two agencies are collaborating through a working group that is developing guidelines on evidence-based practices critical to the functioning of a medical home. DOD is also working with the VA on quality metrics and process evaluations and is learning about the VA's data system.