

The seal of the Defense Health Board is a circular emblem. It features a central globe with a microscope superimposed over it. The globe is light blue and green, while the microscope is dark grey. The words "DEFENSE" and "HEALTH BOARD" are written in a light blue, serif font along the top and bottom inner edges of the seal, respectively. Two small white stars are positioned on the left and right sides of the seal, flanking the globe.

**Health Care Delivery Subcommittee**  
**Pediatric Clinical Preventive Services**

August 9, 2016  
Defense Health Board



# Overview

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- Membership
- Tasking
- Meetings
- Areas of Interest
- Way Forward



# Membership

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## Health Care Delivery Subcommittee

- Consists of 9 members including the Subcommittee chair



# Tasking

(1 of 6)

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On October 21, 2015, the Under Secretary of Defense for Personnel and Readiness (USD(P&R)) requested the Defense Health Board (DHB) provide recommendations to improve the monitoring and provision of pediatric clinical preventive services in military dependents “to better promote the health of this beneficiary population and potentially realize cost savings for the military health system.”



# Tasking

(2 of 6)

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Specifically, the USD(P&R) requested the Subcommittee:

- Determine what policies, practices, and capabilities the Department of Defense (DoD) should implement to improve monitoring of compliance with pediatric clinical preventive services and immunizations in military dependents; and
- Determine what approaches DoD should take to increase compliance with recommended pediatric clinical preventive services and immunizations in military dependents.



# Tasking

(3 of 6)

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On July 26, 2016, the Acting Assistant Secretary of Defense for Health Affairs (ASD(HA)) requested the DHB “examine opportunities to improve the overall provision of health care and related services for children of members of the Armed Forces.” This request replaced and expanded the scope of the October 21, 2015 request regarding pediatric clinical preventive services.



# Tasking

(4 of 6)

Specifically, the ASD(HA) expanded the scope to also include the following requests:

- Identify the extent to which children receive developmentally appropriate and age appropriate health care services, including clinical preventive services, in both the direct care and purchased care components.
- Identify the degree to which the Military Health System delivers clinical preventive services that align with standards, guidelines, and recommendations established by the Patient Protection and Affordable Care Act; the Early and Periodic Screening, Diagnosis, and Treatment program; and organizations that specialize in pediatrics, such as the American Academy of Pediatrics and the American Pediatric Surgical Association.



# Tasking

(5 of 6)

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- Evaluate whether children have ready access to primary and specialty pediatric care.
- Address any issues associated with the TRICARE definition of "medical necessity" as it might specifically pertain to children and determine if the requirement for TRICARE to comply with Medicare standards disadvantages children from receiving needed health care.
- Measure the impact of permanent changes of station and other service-related relocations on the continuity of health care services received by children who have special medical or behavioral health needs.





# Tasking

(6 of 6)

- Assess certification requirements for residential treatment centers of the Department to expand the access of children of members of the Armed Forces to services at such centers.
- Evaluate the quality of and access to behavioral health care under the TRICARE program for children, including intensive outpatient and partial hospitalization services.
- Assess other issues related to the evaluation and general improvement of health care for children within the MHS, including:
  - Data collection, data utilization, and data analysis that could improve pediatric care and related services, including the availability and maturity of pediatric specific outcome measures.
  - Best practices for coordination of pediatric care.



# Meetings Since Last Board Meeting

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- June 14, 2016
  - Review of pediatric preventive care metrics and quality improvement processes
- July 14, 2016
  - Review of draft report sections



# Areas of Interest

(1 of 2)

- Monitoring pediatric preventive services
  - Challenges
    - Multiple, non-interoperable data sources
    - Direct care vs purchased care data challenges
  - Tools
    - Tri-Service Workflow Forms
    - MHS Population Health Portal capabilities
    - MHS GENESIS functionality
- Evolution of Military Health System quality improvement process and governance



# Areas of Interest

(2 of 2)

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- Comparing covered services in TRICARE to:
    - Affordable Care Act
    - Medicaid’s Early and Periodic Screening, Diagnostic, and Treatment program
    - National recommendations and guidelines
  - Challenges tracking TRICARE Standard beneficiary care
  - Impact of vaccine exemptions & refusals



# Way Forward

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- Continue teleconferences and meetings
- Information gathering through spring 2017
- Develop and refine findings and recommendations through summer 2017
- Present draft report at August 2017 Board meeting



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Questions?