

# Defense Health Agency in Transition

October 30, 2018





# Secretary Priorities






A photograph of Secretary of Defense Lloyd Austin, wearing a dark blue suit and tie, speaking into a microphone. He is standing in front of a large, dense crowd of soldiers in camouflage uniforms and berets, who are seated and listening attentively. The scene is outdoors, likely at a military base or training area.

- Restore Readiness and Lethality
- Strengthen Alliances
- Bring Business Reforms to DoD



# Business Case for an Enterprise Approach

## Current State: 39 Separate Quality of Care Policies

| DoD/OSD  | Army   | Air Force  | Navy  | NCR  |
|--|--|--|---|--|
|  A document cover for the Department of Defense (DoD) and Office of the Secretary of Defense (OSD). The title is 'MANEAM' (Military and Naval Enterprise Approach to Medical and Health Services). It includes a logo and several paragraphs of text. |  A document cover for the Army titled 'Clinical Quality Management'. It features a logo and a central box with the text 'Quality Action Report (QAR) Issue Date: 17 May 2014'. The word 'UNCLASSIFIED' is visible at the bottom. |  A document cover for the Air Force. It includes a logo and several paragraphs of text, likely detailing a policy or instruction. |  A document cover for the Navy. It includes a logo and several paragraphs of text, likely detailing a policy or instruction. |  A document cover for the National Center for Health Services (NCR). It includes a logo and several paragraphs of text, likely detailing a policy or instruction. |
| 15   | 7  | 11   | 5   | 1  |

## Future State: 1 Overarching Policy Instruction for Quality of Care across MHS

# Business Case for an Enterprise Approach

## Outcomes & Experience of Care

**Improve** processing time between appointment referrals and appointment scheduling

**Increase** patients satisfied with getting care when they need it

## Safety & Quality

**Improve** critical patient safety measures

↳ Unintended Retained Foreign Objects, Wrong Site Surgery, Hospital Infections

↳ Transparency of performance at MHS and MTF levels

## Readiness

**Reduce** the proportion of Service members that are non-deployable due to preventable medical reasons

**Strengthen** the capability of the deployable medical force

## Efficiencies

**Streamline** overhead staffing through the consolidation of headquarters functions

**Standardize** business, clinical and administrative policies and processes



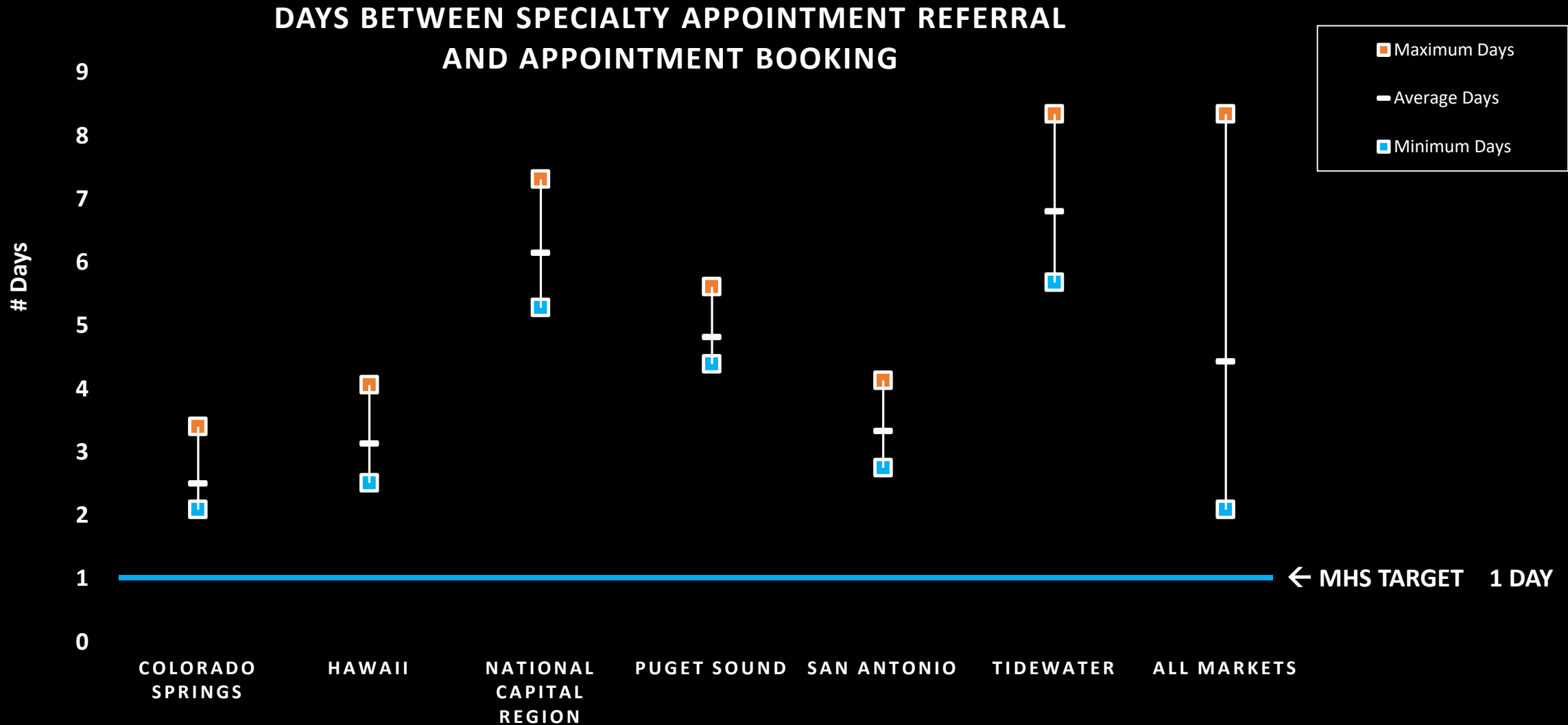
**Bolster** medical networks and Cyber standards

Cybersecurity

**Eliminate** duplicative IT Systems

# Business Case for an Enterprise Approach

## Process Variability

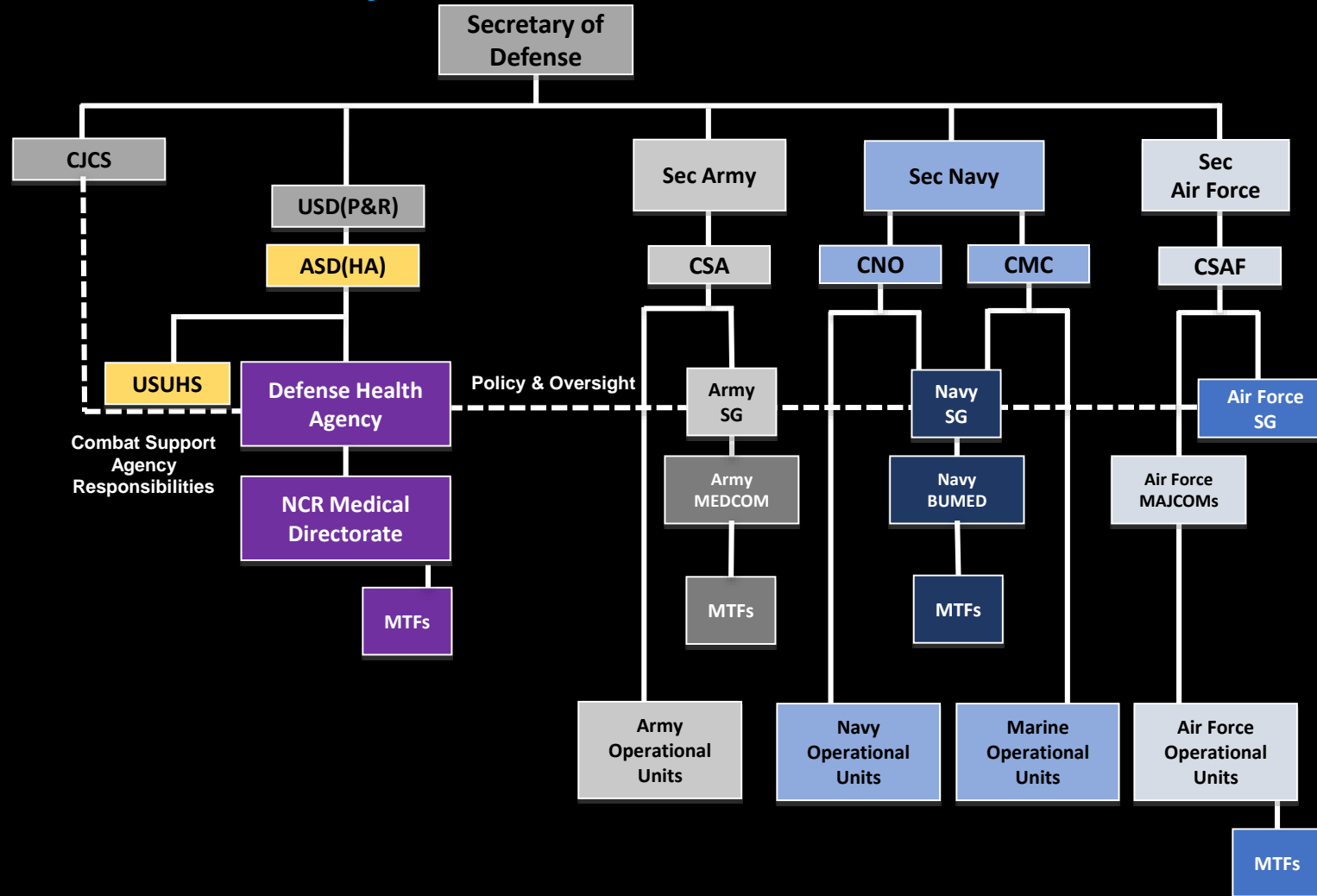


# Enterprise Activities (EAs) Supporting Readiness

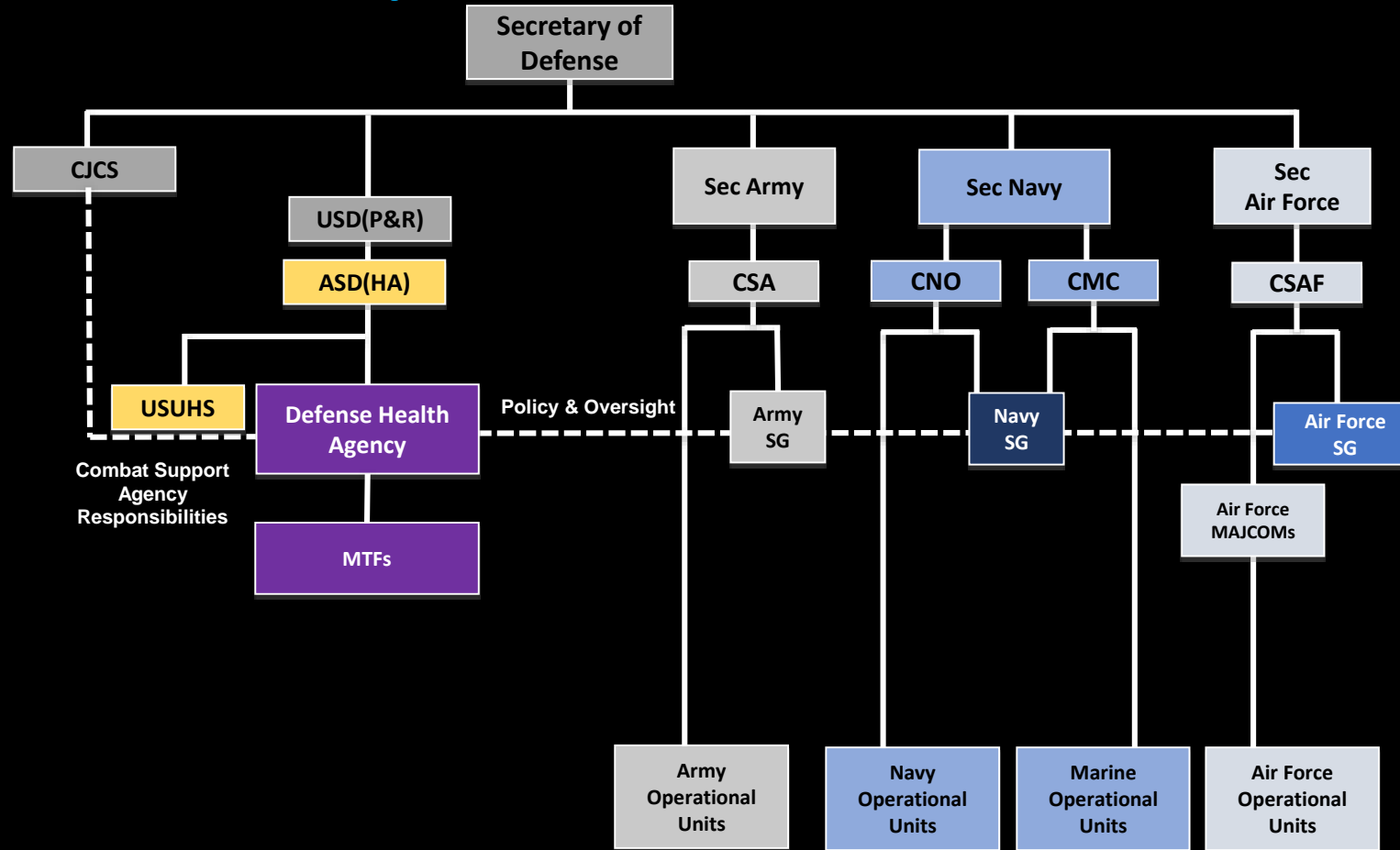
|   |   |
|---|---|
|  <p><b>Pharmacy Programs</b></p>                 |  <p><b>Facilities</b></p>                              |
|  <p><b>TRICARE Health Plan</b></p>               |  <p><b>Procurement /Contracting</b></p>                |
|  <p><b>Health Information Technology</b></p>     |  <p><b>Research, Development &amp; Acquisition</b></p> |
|  <p><b>Budget &amp; Resource Management</b></p> |  <p><b>Public Health</b></p>                          |
|  <p><b>Medical Logistics</b></p>               |  <p><b>Education and Training</b></p>                |

- **Force Provider:** “All in” – regardless of Service; responsive to COCOM needs
- **Training Platform:** Medical Education and Training Center (METC) ensure we train to the same standard; advance external certification (EMT, PT, etc.)
- **Medical Logistics:** Standardized, interoperable surgical equipment sets for war and peacetime
- **Health Information Technology:** Common infrastructure, common systems, common cybersecurity
- **Family Readiness:** Ensuring a comprehensive integrated TRICARE benefit back home

# Military Health System – Before FY 2019



# Military Health System – October 1, 2018 Forward

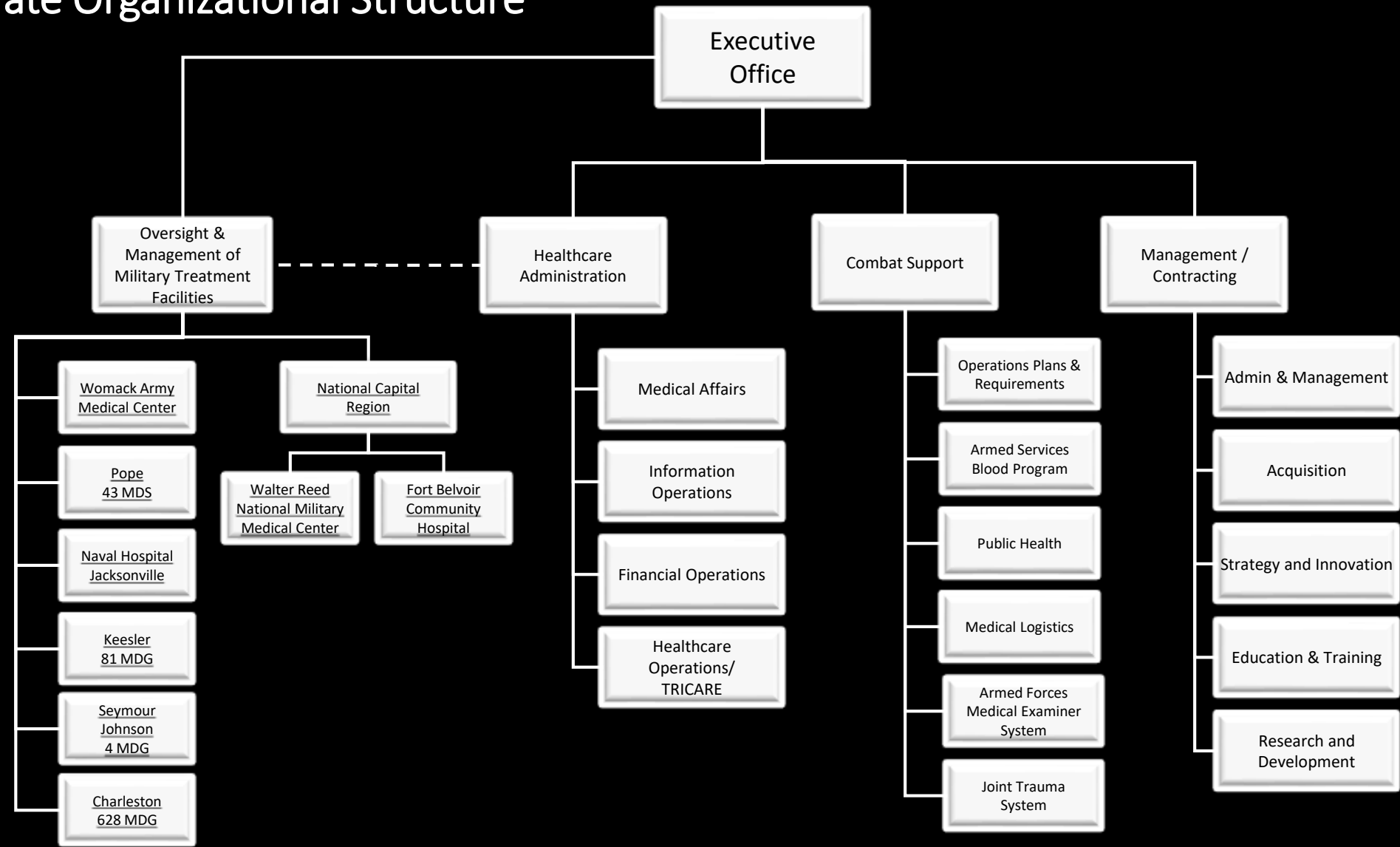




# Defense Health Agency



## Corporate Organizational Structure



# Military Health System Consolidation

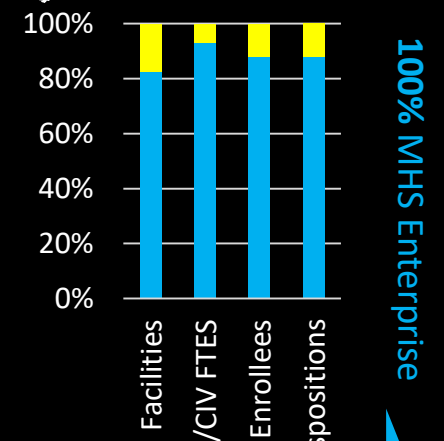
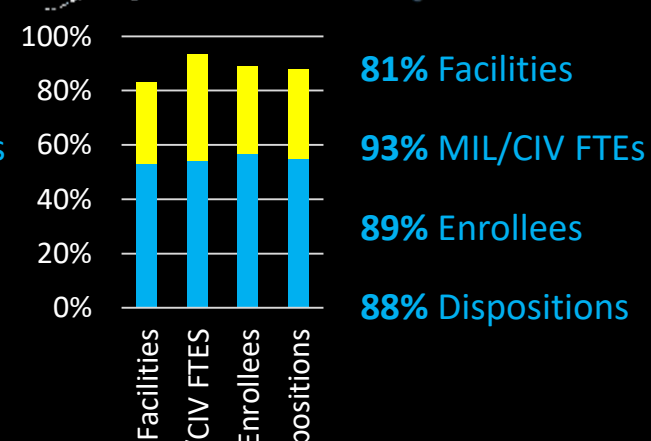
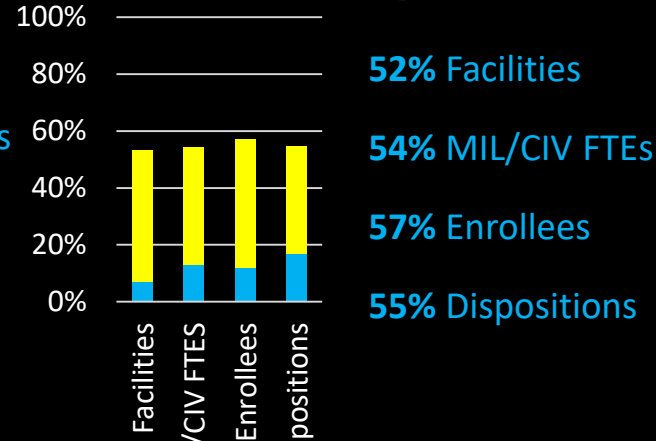
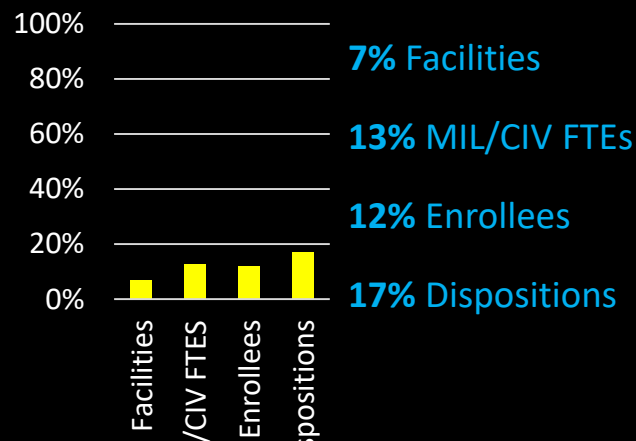
**1 OCT 2018**

**1 OCT 2019**

**1 OCT 2020**

**1 OCT 2021**

■ Previously transferred  
 ■ Transferring within phase



100% MHS Enterprise

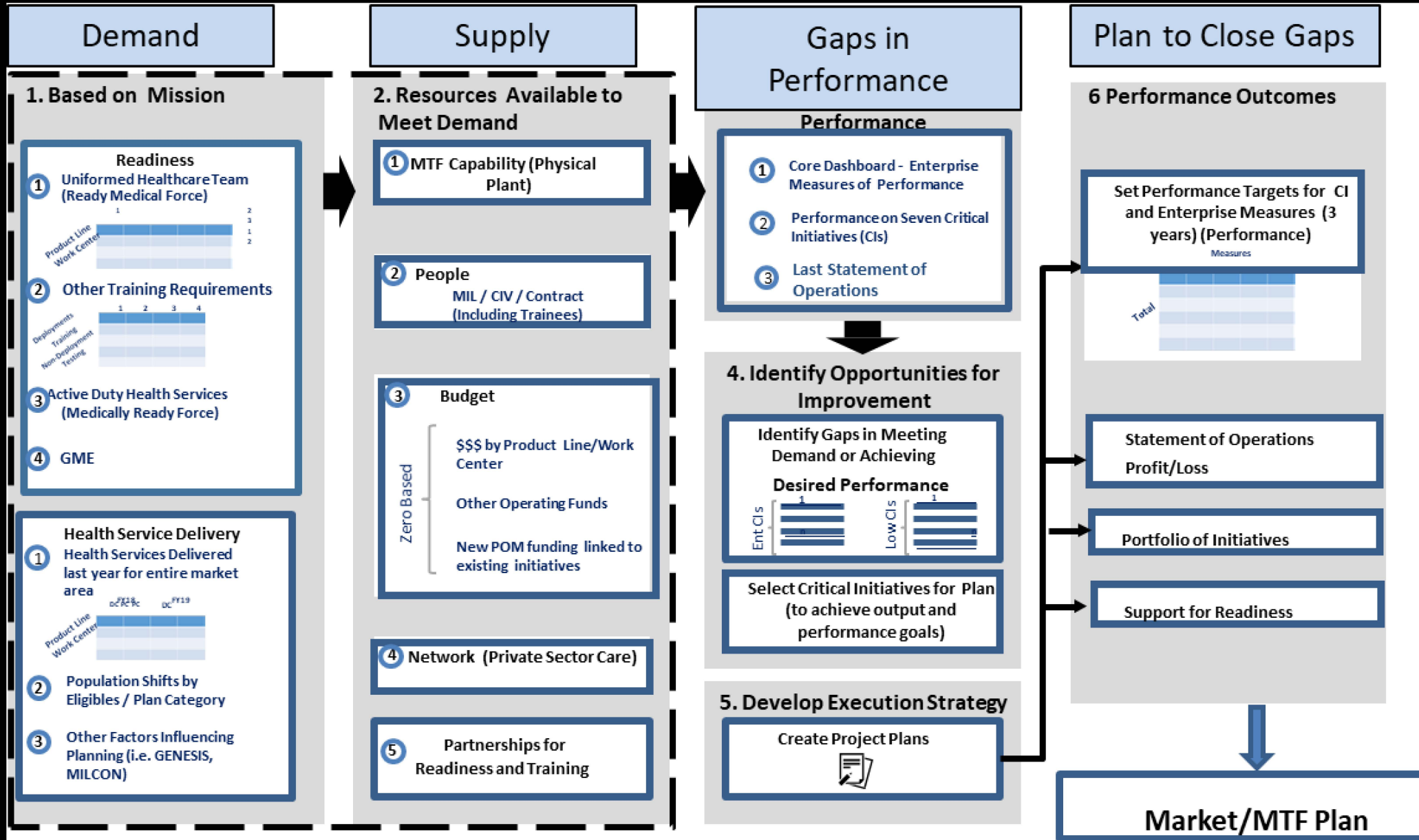
Full Authority to Standardize Policies for all MTFs

Health Plan, Pharmacy & Quadruple Aim Performance Plan (QPP) Functional Capabilities

Facilities, MEDLOG & Acquisition Functional Capabilities

All other Functional Capabilities

# Quadruple Aim Performance Process Model



# Follow Us & Join the Conversation



Follow Mr. Tom McCaffery, Principal Deputy Assistant Secretary of Defense for Health Affairs.



[www.twitter.com/DoDHealth](http://www.twitter.com/DoDHealth)



Follow Vice Adm. Raquel Bono, Defense Health Agency Director



[www.twitter.com/DHADirector](http://www.twitter.com/DHADirector)



**Military Health:** *Learn about initiatives, programs and people from across the entire Military Health System.*



[www.facebook.com/MilitaryHealth](http://www.facebook.com/MilitaryHealth)

[www.twitter.com/MilitaryHealth](http://www.twitter.com/MilitaryHealth)



**Defense Health Agency:** *Learn about Defense Health Agency initiatives, programs and people.*



[www.facebook.com/DefenseHealthAgency](http://www.facebook.com/DefenseHealthAgency)

[www.twitter.com/DoD\\_DHA](http://www.twitter.com/DoD_DHA)



**TRICARE:** *Get the latest news and updates about TRICARE and the delivery of health care.*



[www.facebook.com/TRICARE](http://www.facebook.com/TRICARE)

[www.twitter.com/TRICARE](http://www.twitter.com/TRICARE)