

# ***Headquarters U.S. Air Force***

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## ***Air Force Medical Service Best Practices***



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**Maj Gen C. Bruce Green  
Deputy Surgeon General  
United States Air Force  
28 Jan 09**



# *Best Practice Overview*

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- **Currency Platform Development**
- **Family Health Initiative (FHI)**
- **Behavioral Health Optimization Program (BHOP)**
- **Clinical Optimization for Military Provider AHLTA Satisfaction Strategy (COMPASS)**
- **Preventive Health Assessment (PHA) + Individual Medical Readiness (PIMR)**
  - **Stratified Assignment Limitation Codes**



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# ***Air Force Best Practice Points of Contact***

## **CURRENCY:**

**Alan.murdock@lackland.af.mil**

## **FAMILY HEALTH INITIATIVE (FHI):**

**Timothy.Kosmatka@lackland.af.mil**

## **BEHAVIORAL HEALTH OPTIMIZATION PROGRAM (BHOP):**

**Robert.vanecek@lackland.af.mil**

## **CLINICAL OPTIMIZATION FOR MILITARY PROVIDER AHLTA SATISFACTION STRATEGEY (COMPASS):**

**Jose.Ibanez-Pabon@pentagon.af.mil**

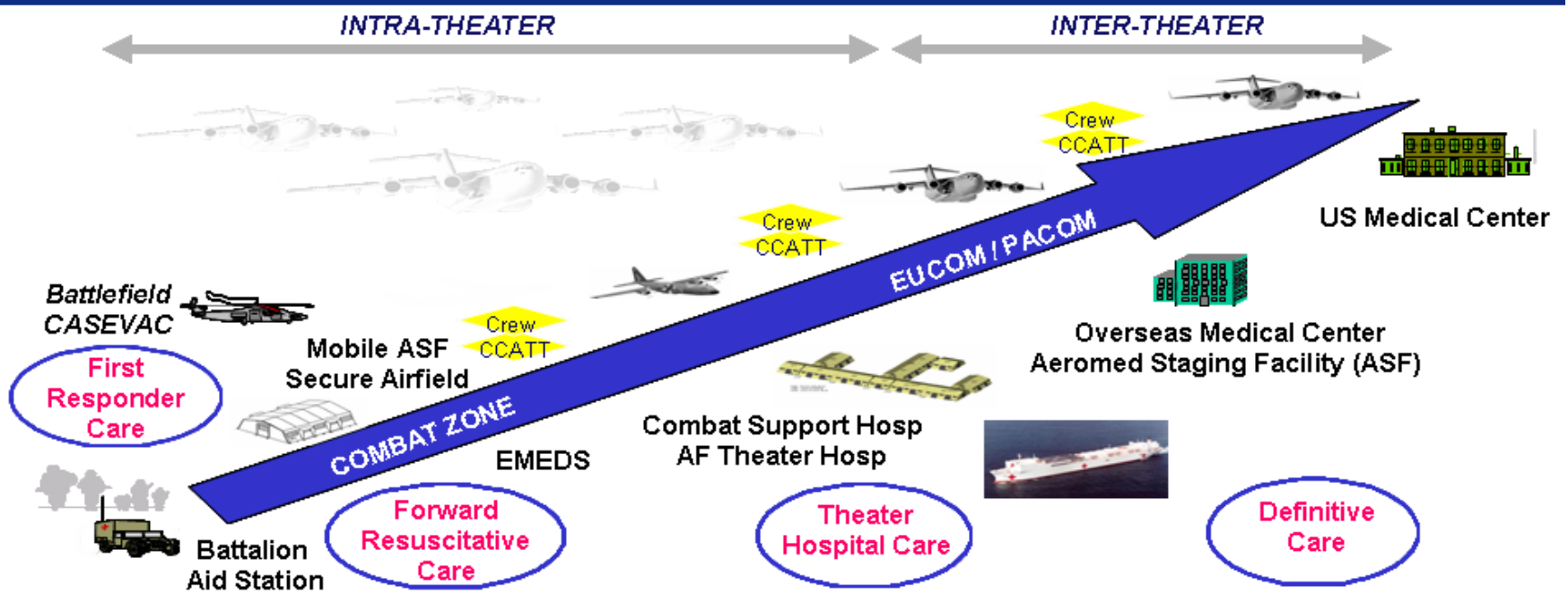
## **PREVENTIVE HEALTH ASSESSMENT (PHA) + INDIVIDUAL MEDICAL READINESS (PIMR):**

**Lowell.sensintaffar@pentagon.af.mil**



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# Enroute Care: Critical Care...Right Place...Right Time



*Readiness is Job # 1:*

We exist to deploy clinically current medics and keep AF personnel deployable!

*Delivering Health Benefit Underpins Readiness*

Peacetime health system maintains clinical skills to do Job #1

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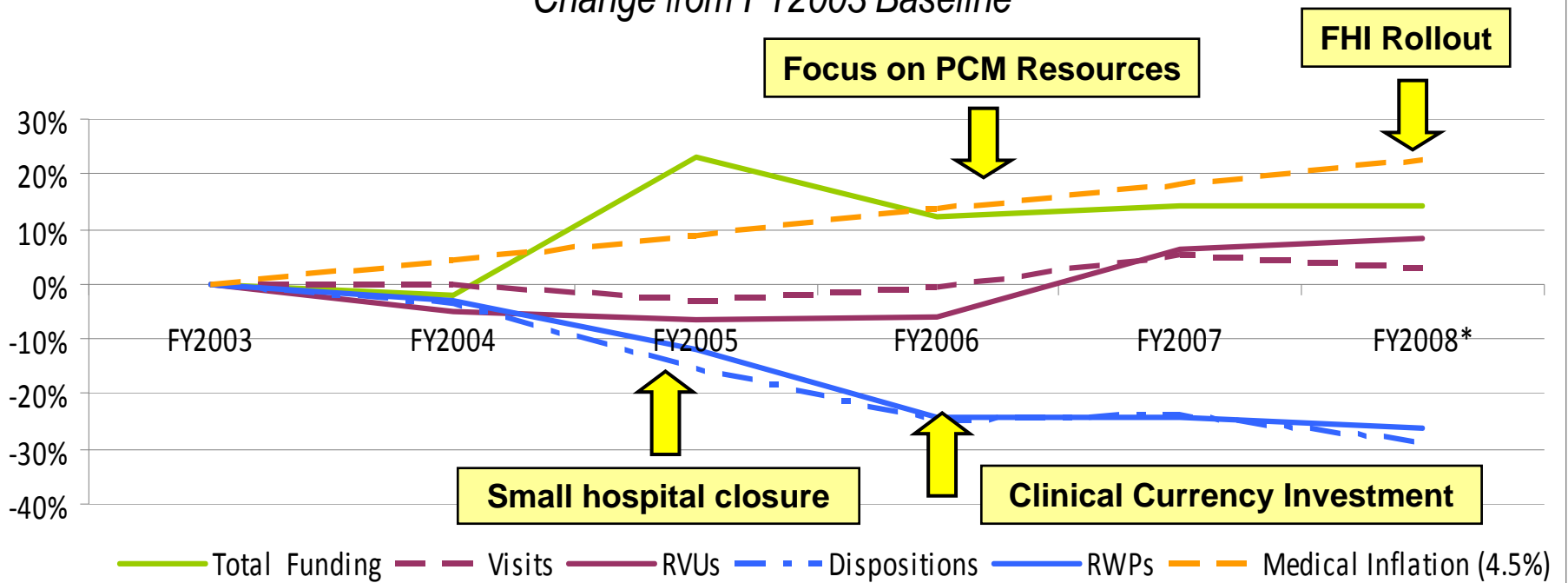


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# Improving Output... Investing In Currency

## Total Funding vs. Workload - Air Force

Change from FY2003 Baseline



Total Funding = DHP O&M (including Private Sector Care), Procurement, RDT&E and Medical MilCON final FAD amounts plus budgeted MILPERS: Workload = M2 data as of 20Oct2008



# 11 Critical Care Currency Platforms

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MTF	Enrolled	Eligible	ICU Beds
59 <sup>th</sup> Med Wing	61K	92K	30
79 <sup>th</sup> Med Wing	29K	86K	0
Travis	41K	80K	12
Eglin	35K	85K	8
Wright-Patterson	37K	56K	8
Nellis	42K	73K	14
Elmendorf	37K	51K	10
Keesler	27K	48K	4
Langley	28K	111K	0
Landstuhl	10K	55K	2
Lakenheath	18K	21K	3



**Other 5 Hospitals are Geographically Isolated Sites:**

**Aviano, Misawa, Mtn Home, Osan, and Yakota**

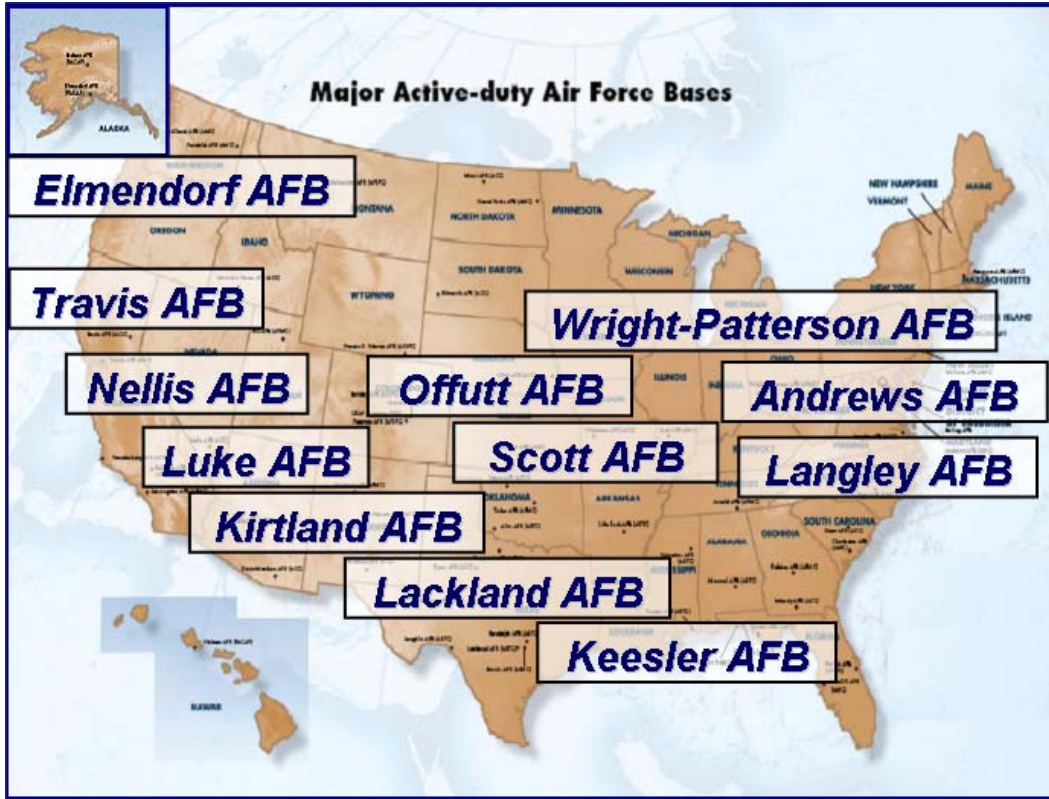
**POM 2008 Invested in Hospital Currency Capability (CDM Sites)**

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# Leveraging Strategic Partnerships

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Hospital	GME	Level 1 Trauma
Andrews / NCR	X	X
Keesler	X	
Lackland	X	X
Langley	X	
Nellis	X	X
Travis	X	X
Wright-Patterson	X	

Clinic	GME	Level 1 Trauma
Luke		X
Offutt	X	
Scott	X	X





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# ***Nurse Transition Program... Civilian Collaboration***

- **AFMS has 10 military NTP sites**
- **FY 08 trained 166 nurses**
- **Cincinnati, University Hospital, Ohio**
  - **1<sup>st</sup> class started 29 Sep 08**
- **Scottsdale Healthcare, Arizona**
  - **Pending approval...Potential throughput of 60-92 students/yr**



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# **STARS-P**

## **Sustaining Trauma And Resuscitation Skills - Program**

### **■ Locations**

- Travis and UC Davis Medical Center
- Wright-Patterson and Miami Valley Hospital
- Luke and Scottsdale Healthcare & Maricopa County
- Nellis and University Medical Center
- Lackland +/- UTHSCSA and BAMC

### **■ Involved AF medics**

- Surgeons (general surgeons and orthopedics)
- Critical care physicians & Internists
- Emergency physicians
- Critical care & Ward nurses
- Medical technicians including respiratory techs





# Surgical Optimization

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- Clinic appointment availability is good and non-limiting.
- ROFR rate remains excellent at 88.9%
- Inpatient surgical product line RWPs for October were 152% of FY 2008 averages
  - 4% increase in TFL admissions, and about a third of the patients were ER admissions

General Surgery Clinic(BBA) Productivity

	Q1 FY2009	Q1-Q4 FY2008
RVUs/day	26.42	24.16
RVUs/encounter	1.99	1.89
Encounters/day	13.3	12.8
Relative # of TFL patients	128%	100%

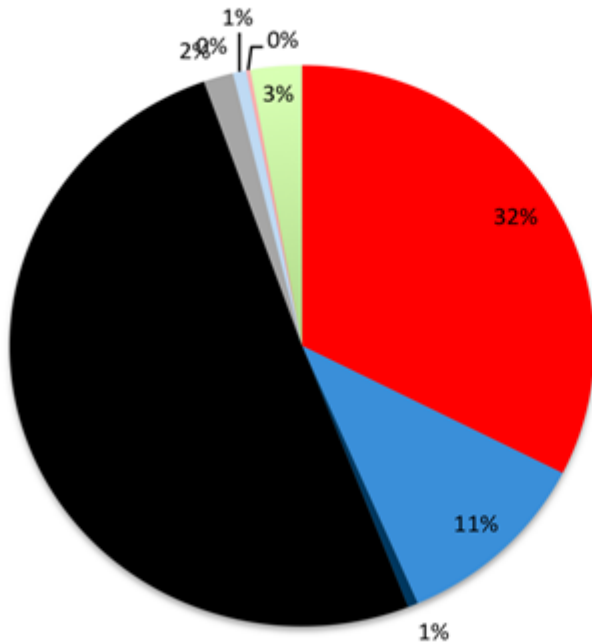


# Surgical Recapture

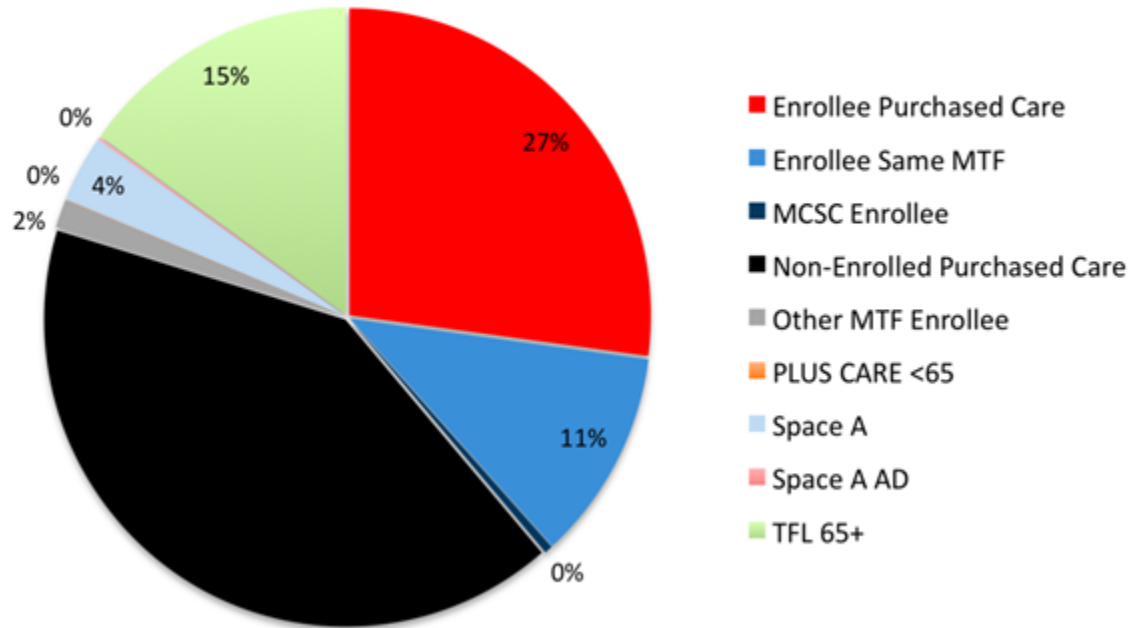
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There has been a clear shift of patients back into the MTF over the two fiscal years for which data are complete. Due to aggressive recapture campaign beginning in mid-2008 and continuing.

### Travis FY2007 Currency CPT Occurences



### Travis FY2008 Currency CPT Occurences



- Enrollee Purchased Care
- Enrollee Same MTF
- MCSC Enrollee
- Non-Enrolled Purchased Care
- Other MTF Enrollee
- PLUS CARE <65
- Space A
- Space A AD
- TFL 65+



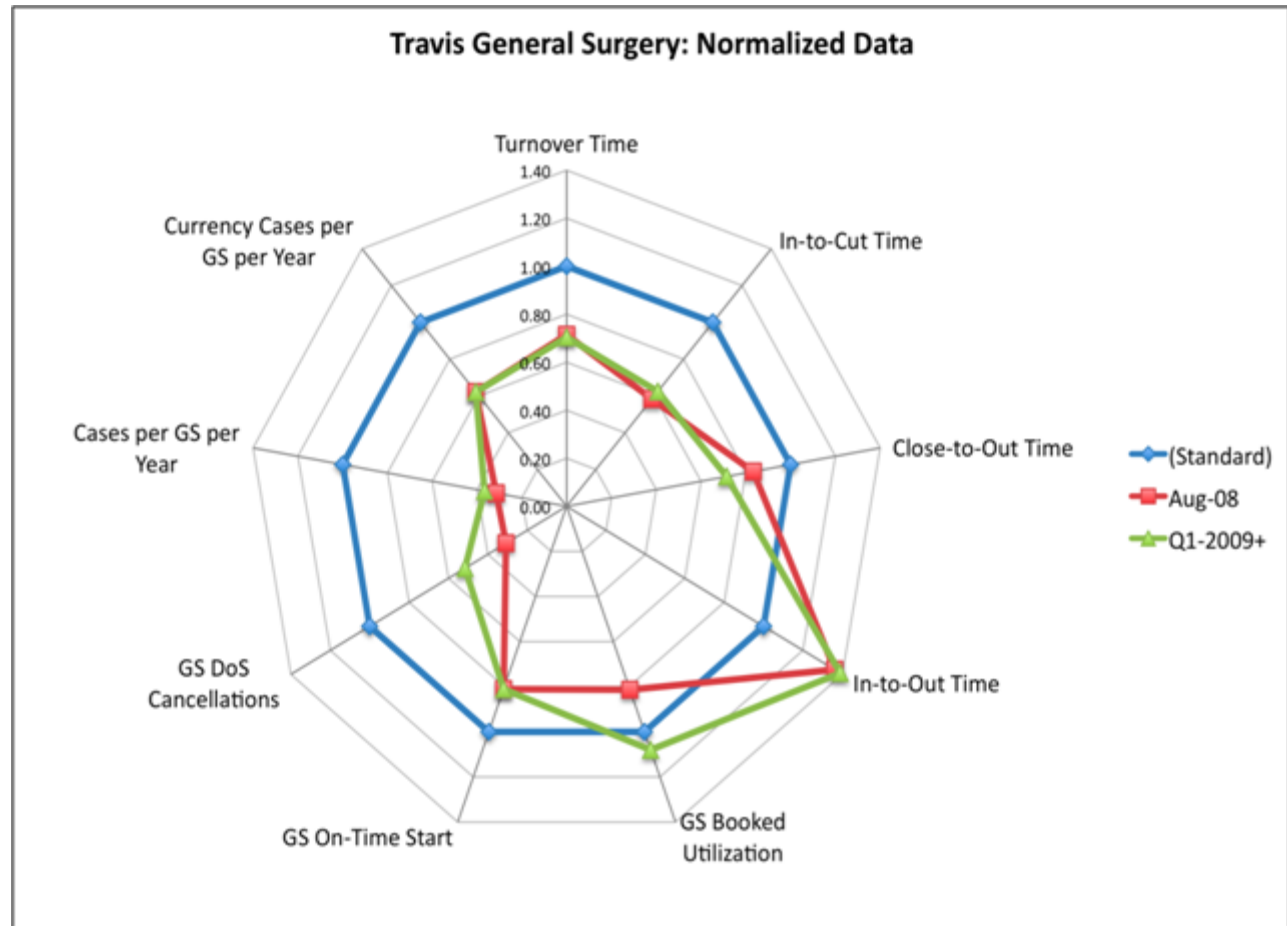
# The Travis “Spider Chart”

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Showing the baseline Travis data and the changes since the first onsite EVSA in September 2008.

Points lying *within* the blue circle represent results that are good improvement targets, in proportion to the difference.

Results that lie *outside* the blue circle represent results that are better than the MHS or AFMS goal.





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# ***Clear Family Health Goals*** ***“AF Medical Home”***

- **Improve health of our beneficiaries – focus on prevention**
- **Create enjoyable and productive practice environment**
  - **Promote and deliver quality, evidence-based care**
  - **Retain current physicians and recruit new physicians**
- **Deliver greater spectrum of care to our population by optimally using all skills of clinician and support staff**



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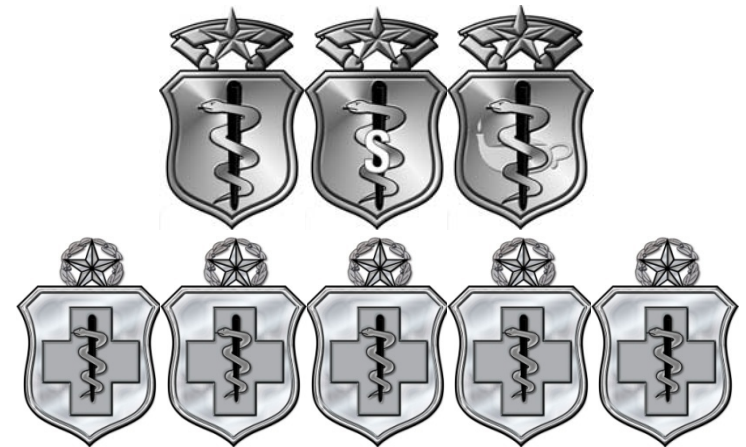
# *Family Health Team*

## *The New Promise*

- ***Family Health Team***
  - Family Practice Physician
  - Physician Assistant
  - Nurse
  - **5 – Medical Technicians**

**8 Medical Personnel**

**2500 empanelled patients**



**Flight Optimizations**



## Provider Metrics

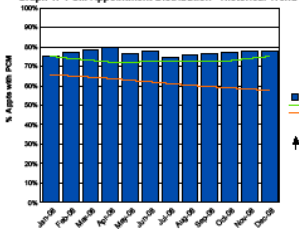
## Facility Metrics

### Family Health Provider Overview Report November 2008

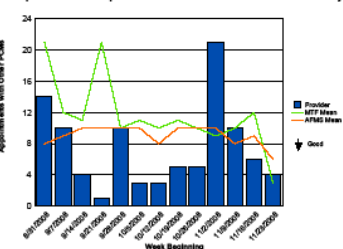
EDWARDS - PCM: DADIVAS,CHRISTOPHER D - Enrollment: 1,158 - Clinic: BGAA - Clinic Enrollment: 4,823 - PCMs: 5

About the Data in This Report: Data at all levels on this report (provider, clinic, MTF, AFMS) represents Family Health (BGA\*) only. Charts containing appointment or RVU-related data do not include T-CONS as part of the overall data set. All data is based on providers whose PCM Flag = YES.

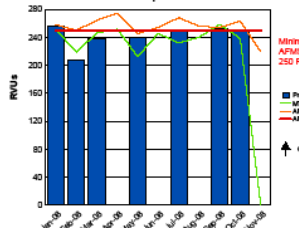
Graph 1: PCM Appointment Distribution - Historical Trend



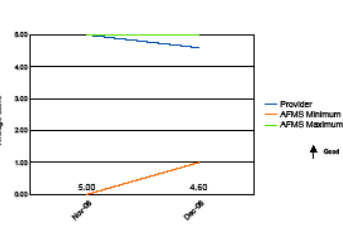
Graph 2: Patients Empanelled to PCM Who Saw Another PCM - Weekly



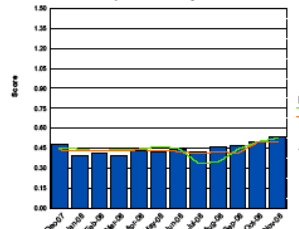
Graph 3: RVU Trend



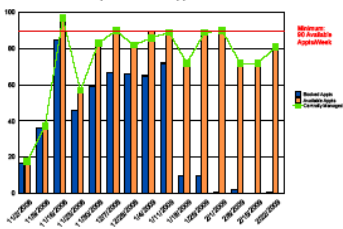
Graph 4: Service Delivery Assessment - Patient Satisfaction



Graph 5: Ambulatory Case Mix Index



Graph 6: Provider Appointment Trend

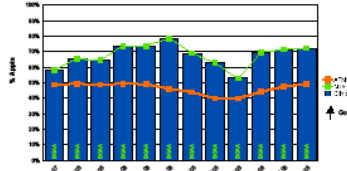


### MTF Family Health Overview Report November 2008

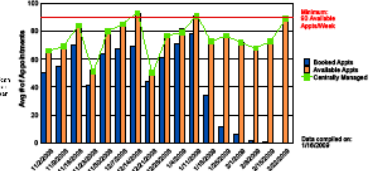
EDWARDS

About the Data in This Report: Data at all levels on this report (provider, clinic, MTF, AFMS) represents Family Health (BGA\*) only. Charts containing appointment or RVU-related data do not include T-CONS as part of the overall data set. All data is based on providers whose PCM Flag = YES. # PCMs = 5

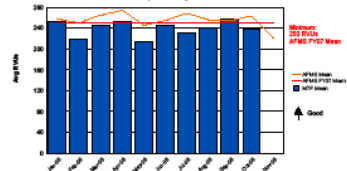
Graph 1: Percentage of PCM Appointments with Empanelled Patients - Historical Trend



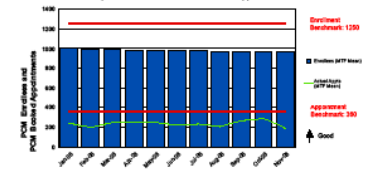
Graph 2: MTF Weekly Average Appointments



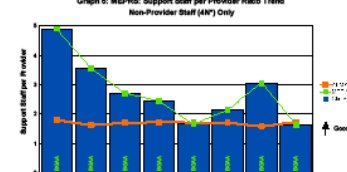
Graph 3: Average RVU Trend



Graph 4: Prime Enrollment and Booked Appointment Trend



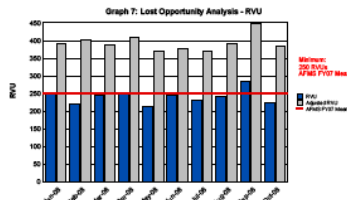
Graph 5: MEPRS: Support Staff per Provider Ratio Trend - Non-Provider Staff (NP) Only



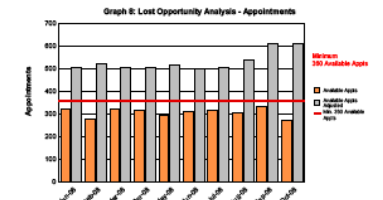
Graph 6: HEDIS Composite Score by Clinic



Graph 7: Lost Opportunity Analysis - RVU



Graph 8: Lost Opportunity Analysis - Appointments

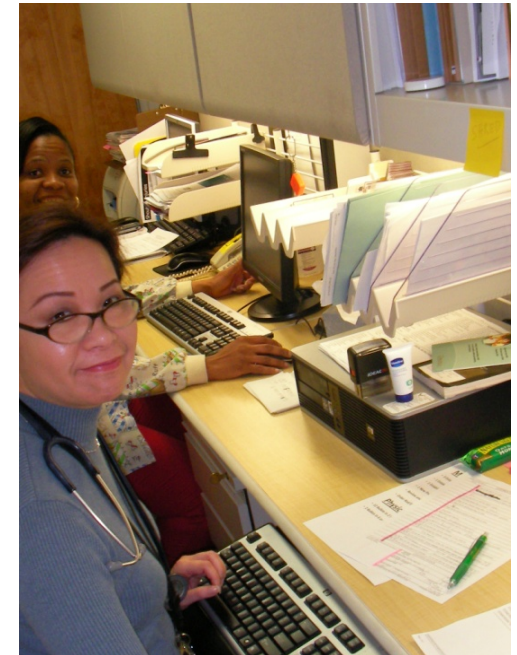




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# ***Family Health Clinic Baseline***

- **Lack of Team Documentation**
  - **Med Tech and nursing staff not utilized to full potential**
- **Suboptimal provider workstations**
- **AHLTA notes that lacked readability**
- **Coding not reflective of work done**
  - **Low RVUs and high rate of unsigned encounters**
- **Poor accessibility of patient handouts**
- **Multiple AHLTA outages**
- **These issues result in an inefficient workflow**





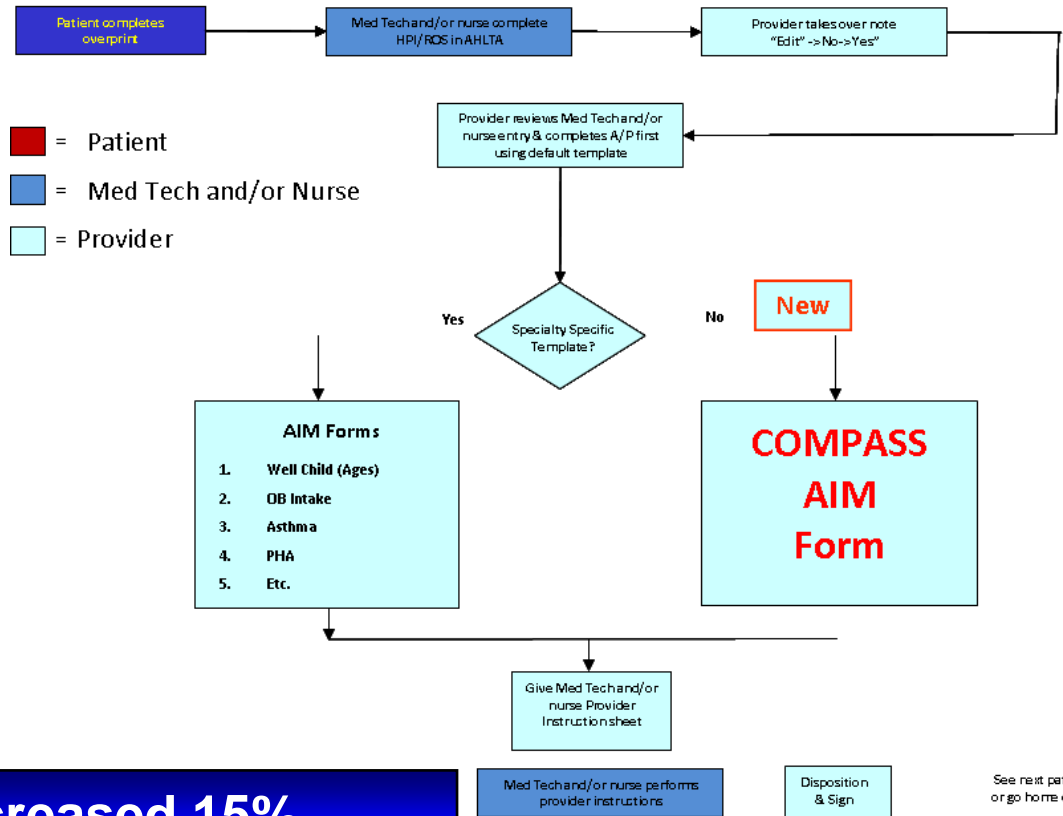


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# COMPASS Workflow



## AHLTA COMPASS Workflow



**Clinic appointments increased 15%**  
**Coding accuracy increased 10%**



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# ***Behavioral Health Optimization Program***

***Minimizing Mental Health Barriers To Care***

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- **Provides Primary Care Services**
  - **Not traditional mental health (MH) services**
- **Taught in all psychology/social work residencies**
  - **BHOP services are active in 61% of AF MTFs**
- **FY 08 64 providers on-site at 31 MTFs**
  - **Hired 17 of 22 Red Cell funded full-time BHOP contractors**
- **14983 appointments AF-wide**
- **FY07 cost recapture \$927,112**

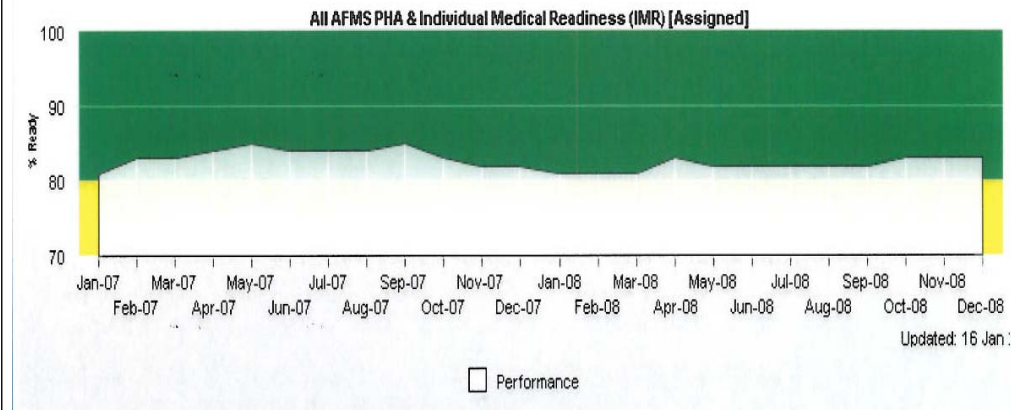
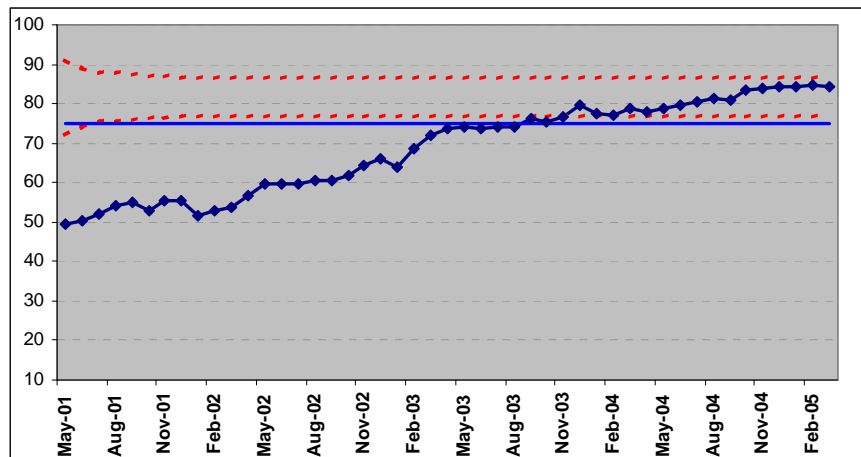


# CSAF Medical Metric IMR... Six Elements

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Members are considered ***“Fully Medically Ready”*** if:

- **Annual Preventive Health Assessment (PHA):** Current
- **Immunizations:** Current
- **Medical Readiness Labs:** Current and documented  
(HIV, DNA, Blood Type and Rh factor, G6PD, Sickledex)
- **No Deployment Limiting Conditions (DLCs):** Do not have medical profile for a DLC (4T profile on the AF Form 422)
- **Dental Classification:** DoD Class I or II
- **Medical Equipment:** 1 pair gas mask inserts





# *Stratified Assignment Limitation Codes (ALC)*

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- **Problem**
  - Significant time lag in medical/disability processing
  - Up to 6K AD unable to deploy
- **Solution**
  - Direct ALC request before full disability evaluation
  - Stratify ALC by Diagnosis and obtain theater clearance
- **Measurements**
  - Disposition time to CC
  - Increased pool of deployers
- **Feedback**
  - Significant decrease in case resolution time
  - Less work load on FSO
  - Not a single return home from theater due to ALC