



THE ASSISTANT SECRETARY OF DEFENSE

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WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

MAR 19 2008

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER
AND RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER
AND RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE
(MANPOWER AND RESERVE AFFAIRS)

SUBJECT: Policy Memorandum – Implementation of New Medical Expense and
Performance Reporting System Codes to Track Case Management
Associated with Global War on Terror Heroes

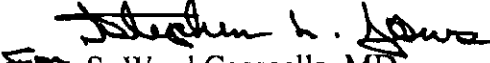
Department of Defense Instruction 6025.20 of January 5, 2006 (Medical Management (MM) Programs in the Direct Care System and Remote Areas), implements policy for establishing MM programs within the direct care system. This instruction goes on to say that military treatment facilities (MTFs) are responsible for utilization management (UM), case management (CM), and disease management (DM) programs. The TRICARE Management Activity provided implementing guidance to the MTFs for UM, CM, and DM programs by publishing a comprehensive MM Guide in January 2006 (www.mhsophsc.org/PUBLIC/mm_guide/MM_Guide_2006.pdf).

With the ongoing operations in Iraq and Afghanistan, Executive Order 13426 established the Task Force on returning Global War on Terror (GWOT) Heroes. In May 2007, a Senior Oversight Committee (SOC) Line of Action for Department of Defense/Veterans Affairs CM Reform was launched. The SOC's goal was to standardize clinical and nonclinical CM processes to facilitate and guide Service members and their families through the process.

The SOC Line of Action has mandated that the Military Health System (MHS) track CM associated with GWOT Heroes consistently and separately from other MM services. To comply with this, centralized visibility of CM activities supporting GWOT Heroes within the MHS is needed. The attached policy paper satisfies that need.

HA POLICY: 08-001

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S. Ward Casscells, MD

Attachment:
As stated

cc:
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force

POLICY PAPER

Medical Expense and Performance Reporting System Management Improvement Group Approved Medical Expense and Performance Reporting System Codes to Capture Case Management Initiatives within the Military Health System

STATUS

Executive Order 13426 established the Task Force on Returning Global War on Terror (GWOT) Heroes. This task force was directed to identify and examine existing Federal services provided to GWOT members, to identify gaps in such services, to provide recommendations on ways to fill those gaps using existing resources, and to ensure that agencies are communicating and cooperating effectively.

In May 2007, a Senior Oversight Committee (SOC) Line of Action for Department of Defense/Veterans Affairs Case Management (CM) Reform was formed. The goal of the SOC was to standardize clinical and nonclinical case management processes to facilitate and guide Service members and their families through the process.

BACKGROUND

CM is a component of Medical Management (MM) and defined as a “collaborative administrative process” which assesses, plans, implements, coordinates and evaluates options and services to meet complex health care needs and cost effective health care outcomes.

SOC Line of Action has requested the three Military Departments to track CM associated with GWOT Heroes consistently and separately from other MM services.

The Office of the Assistant Secretary of Defense (Health Affairs) (OASD/HA) needs centralized visibility of CM activities supporting GWOT Heroes within the Military Health System (MHS). The TRICARE Management Activity Business and Economic Analysis developed the overall concept of using an administrative Standard Ambulatory Data Record (SADR) to capture CM data and tasked the Medical Expense and Performance Reporting System (MEPRS) Management Improvement Group (MMIG) to provide the standard MEPRS code(s) required to initiate the SADR.

POLICY

Using one MEPRS Functional Cost Code (FCC) to create a SADR in which all CM activities could be recorded and tracked may not be sufficient as CM activities may be incurred in many areas within the MHS.

I direct the following: (1) to code CM associated with in-house MM, Service guidance that specifies creating the administrative SADR using MEPRS FCC ELA; (2) to code CM associated with the special program—Warrior Transition Units, Service guidance that specifies creating an administrative SADR using MEPRS FCC FAZ2; and (3) Navy establish additional fourth-level codes under ELA to record Warrior in Transition CM activities.