



# Department of Defense **INSTRUCTION**

**NUMBER** 6010.24  
May 14, 2015

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USD(P&R)

**SUBJECT:** Interagency Complex Care Coordination

**References:** See Enclosure 1

1. PURPOSE. This instruction:

a. Establishes policy and assigns responsibilities for complex care coordination in accordance with the authority in DoD Directive 5124.02 (Reference (a)) and the Memorandum of Understanding between the Department of Veterans Affairs and DoD (Reference (b)).

b. Provides a common operational model and supporting responsibilities concerning complex care coordination processes to which the Department of Veterans Affairs and DoD have, in Reference (b), agreed to adhere.

2. APPLICABILITY

a. This instruction applies to OSD, the Military Departments (including the Coast Guard at all times, including when it is a Service in the Department of Homeland Security by agreement with that Department), the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (referred to collectively in this instruction as the "DoD Components").

b. Reference (b) and this instruction are not intended to and do not bestow or confer rights or benefits provided for under the respective statutory authorities of the Department of Veterans Affairs or DoD.

3. POLICY. It is DoD policy that:

a. A common operational model and processes will be followed in support of the Department of Veterans Affairs and DoD complex care coordination processes. Development or modification of internal policies for governance and execution of these processes must comply with Reference (b).

b. Leadership will fully support implementation of Reference (b) and will work to implement common communication strategies, policy synchronization, and joint monitoring of clinical, non-clinical, and administrative outcome performance metrics.

4. RESPONSIBILITIES

a. Assistant Secretary of Defense for Health Affairs (ASD(HA)). Under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness (USD(P&R)), the ASD(HA) monitors DoD compliance with this instruction and supports the guidance of users through the Interagency Care Coordination Committee, a subcommittee of the Joint Executive Committee.

b. Director, Defense Health Agency. Under the authority, direction, and control of the USD(P&R), through the ASD(HA), and in addition to the responsibilities in paragraph 4c, the Director, Defense Health Agency is authorized to establish clinical case management guidance and procedures to implement this instruction.

c. DoD Component Heads. The DoD Component heads use Reference (b) to develop policy and guidance for their Component in provision or coordination of care, benefits, and services for Service members or veterans requiring complex care coordination as defined in Reference (b).

5. RELEASABILITY. **Cleared for public release**. This instruction is available on the Internet from the DoD Issuances Website at <http://www.dtic.mil/whs/directives>.

6. EFFECTIVE DATE. This instruction is effective May 14, 2015.

A handwritten signature in black ink, appearing to read "Brad Carson". The signature is stylized and cursive.

Brad Carson  
Acting Under Secretary of Defense for  
Personnel and Readiness

Enclosure  
References

ENCLOSURE

REFERENCES

- (a) DoD Directive 5124.02, “Under Secretary of Defense for Personnel and Readiness (USD(P&R)),” June 23, 2008
- (b) Memorandum of Understanding between Department of Veterans Affairs and Department of Defense for Interagency Complex Care Coordination Requirements for Service Members and Veterans, July 29, 2014<sup>1</sup>

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<sup>1</sup> MOU can be found on <http://www.health.mil/Policies>