



Restoring the Warrior to Readiness: TRICARE Update

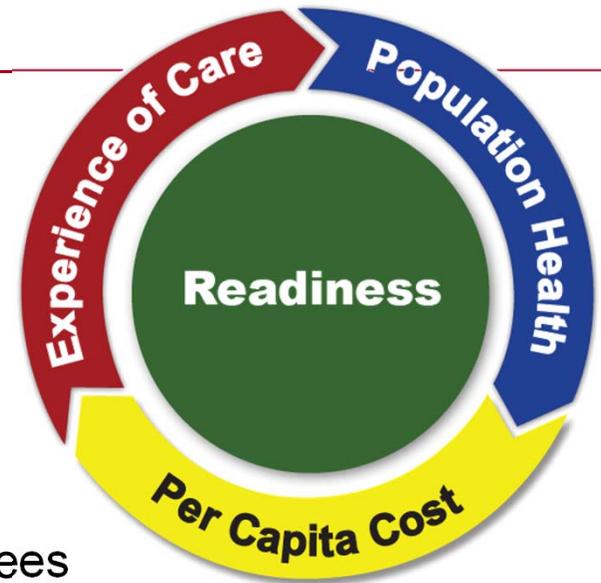
March 30, 2012

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Deputy Director
TRICARE Management Activity



Military Health System Quadruple Aim

- **Readiness**
 - Pre- and Post-deployment
 - Family Health
 - Behavioral Health
 - Professional Competency/Currency
- **Population Health**
 - Healthy service members, families, and retirees
 - Quality health care outcomes
- **A Positive Patient Experience**
 - Patient and Family centered Care, Access, Satisfaction
- **Cost**
 - Responsibly Managed
 - Focused on value

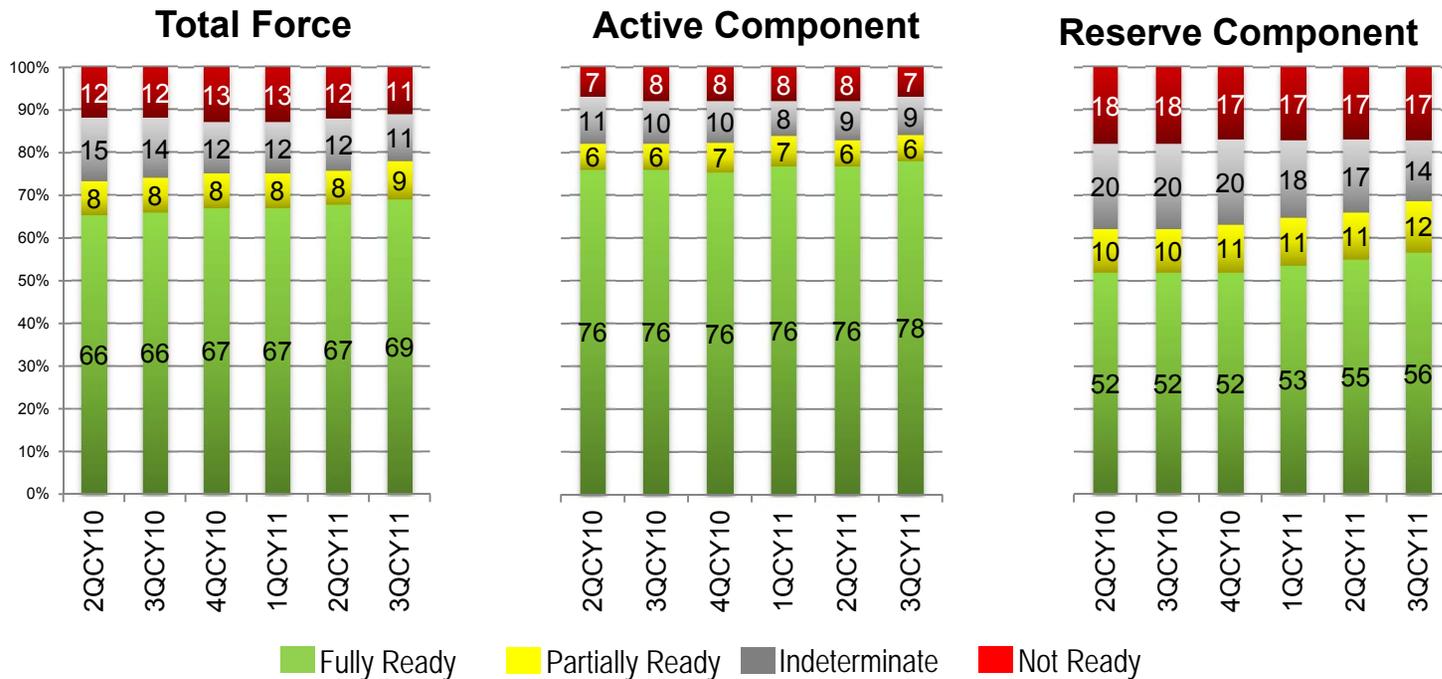


Quadruple Aim as Relevant Continuum for Readiness



Approaching Readiness Goals

2011 Individual Medical Readiness Target: 81%



- To improve performance, commands should focus on completing delinquent PHAs & dental exams



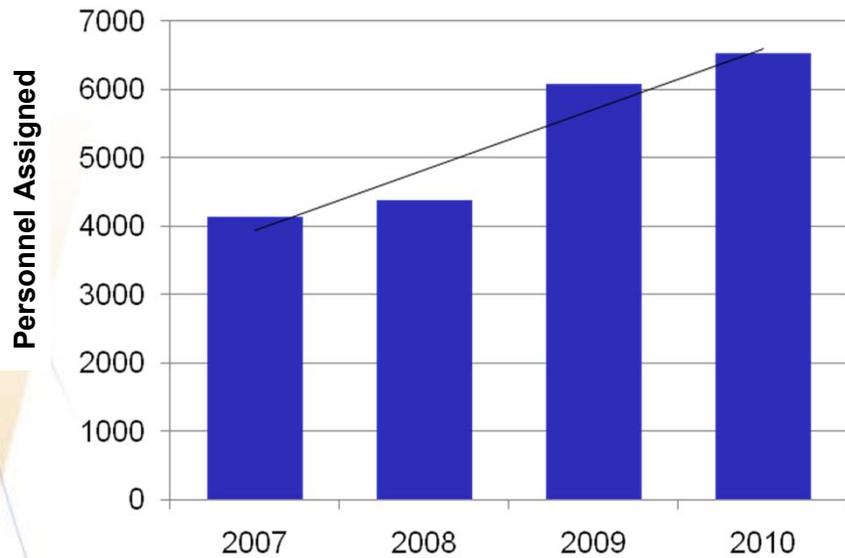
Individual and Unit Readiness



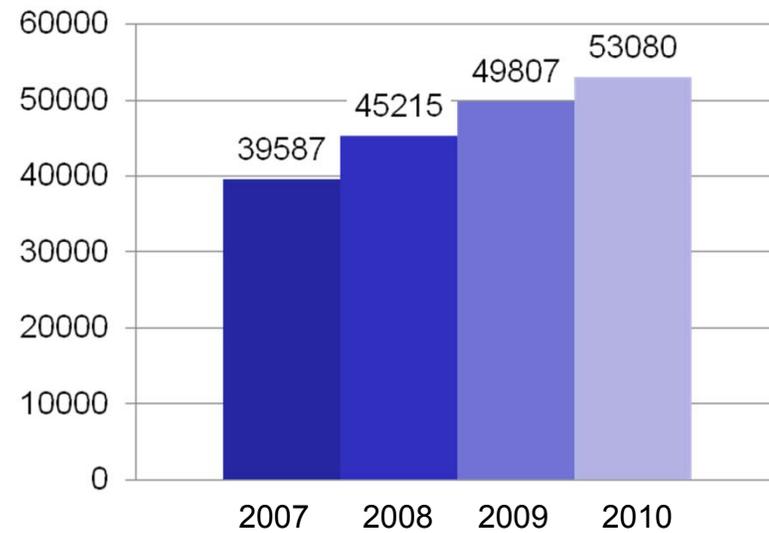


Meeting Behavioral Health Demand by Increasing Access

Behavioral Health Staffing at MTFs



Purchased Care Behavioral Health Providers



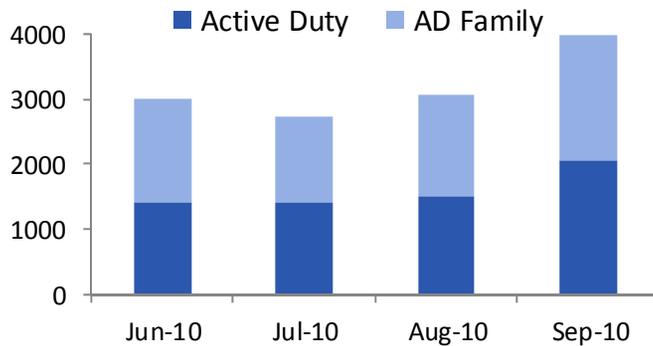
Behavioral Health, FY07-FY10

	Services	Patients
Direct care	Up 47%	Up 26%
Purchased care	Up 84%	Up 40%



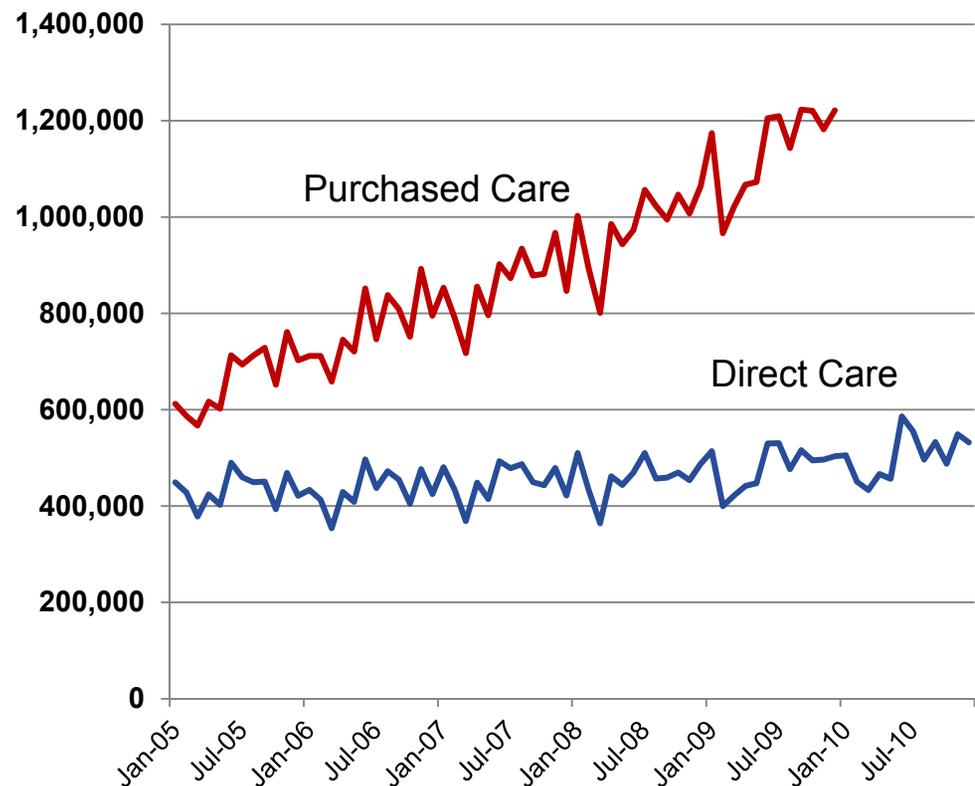
Physical Therapy Impact on Readiness

**Camp LeJeune Area
Physical Therapy Visits**



- What is readiness impact?
 - Visit cost is modest, but lost work time is significant
 - Deployment of physical therapists

**Musculoskeletal and
Physical Therapy Visits**



Should We Adopt New Models for On-Base Care?

How Can We Address the “White Space”?

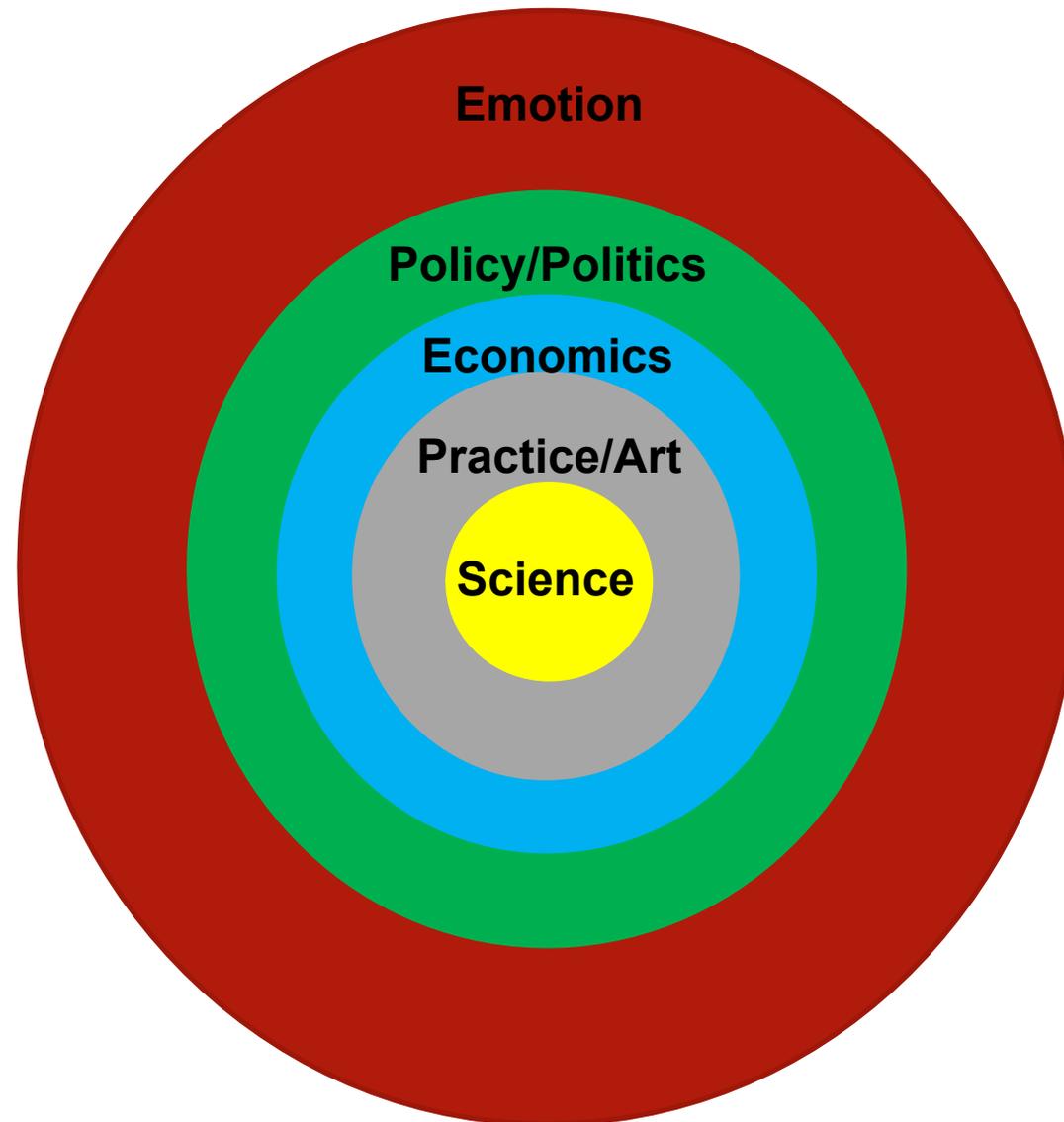
- Average time spent in medical appointment – 100 minutes/year
- What are we doing the remaining 525,500 minutes?
 - Work
 - School
 - Family
 - Personal time
 - Sleep
- How do all our *choices* contribute to readiness?

Personal

Professional



Healthcare to *Health* Dynamics

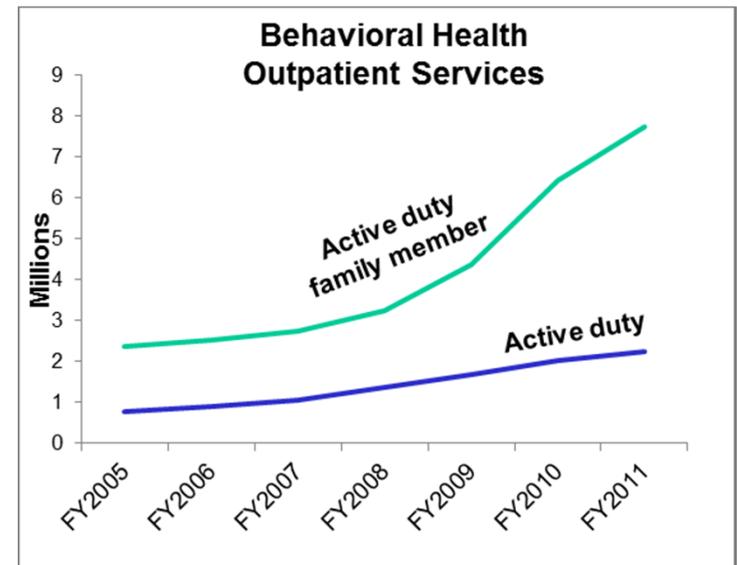




Family Readiness

Research on Behavioral Health

- New England Journal of Medicine
 - Studied Army wives of deployed soldiers
 - Found significantly higher rates of mental health issues compared to spouses of non-deployed
 - Rates increased with longer deployments (more than 11 months)



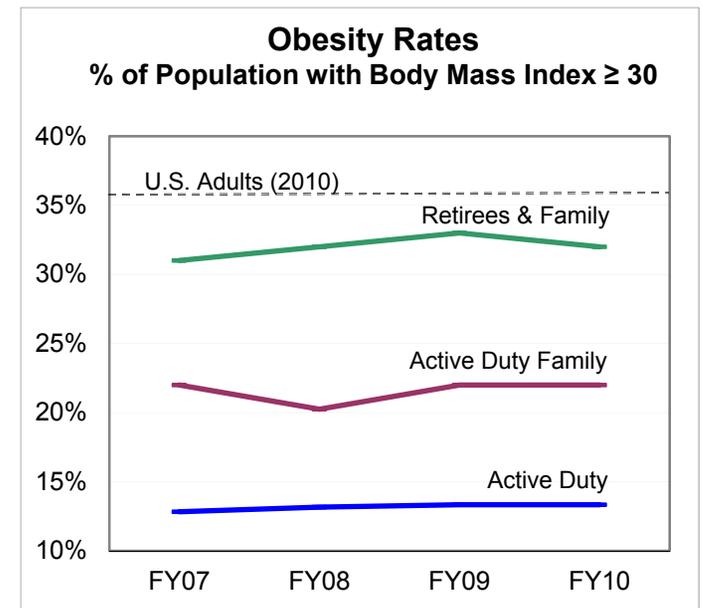
- National Military Family Association
 - Studied wide cross-section of military children nationally
 - Family breakdown: 57% Army, 20% AF, 17% Navy, 6% USMC or CG
 - Found significantly higher levels of emotional difficulties compared to children in general population
 - More emotional challenges as parental deployments grow longer
 - Symptoms increased if non-deployed parent also had behavioral health issues



Health Care to *Health*

TRICARE Resources

- Healthy Living campaign
 - Three primary lifestyle initiatives: obesity, alcohol abuse & tobacco use
 - Visit www.tricare.mil/HealthyLiving
- Alcohol Usage
 - 11% lower binge drinking rate at participating installations
 - Visit www.ThatGuy.com
- Smoking Cessation
 - Info & live web chat help at award-winning web site, www.ucanquit2.org
 - Smoking quit lines for U.S. regions
- New and expecting parent education
 - Text4baby, Parent Review





Medical Force Readiness

Supporting Troops and Families

- Leadership needs tools to identify problems before they're chronic
- Sustaining currency and enhancing competency
 - MTF Right of First Refusal: MTFs review civilian referrals for specialty care to determine if they can provide the care to TRICARE Prime beneficiaries living near MTF
 - Unique, valuable opportunity for Graduate Medical Education (GME) sites to obtain the right case mix necessary for a quality education
- Recognizing key interdependencies
- Maximizing opportunities when communicating with troops and families

