SECRETARY OF DEFENSE
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MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARIES OF DEFENSE
DEPUTY CHIEF MANAGEMENT OFFICER
CHIEFS OF THE MILITARY SERVICES
CHIEF OF THE NATIONAL GUARD BUREAU
DIRECTOR, COST ASSESSMENT AND PROGRAM EVALUATION
DIRECTOR, OPERATIONAL TEST AND EVALUATION
GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE
INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE
ASSISTANT SECRETARIES OF DEFENSE
DEPARTMENT OF DEFENSE CHIEF INFORMATION OFFICER
ASSISTANTS TO THE SECRETARY OF DEFENSE
DIRECTORS OF THE DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Military Health System Action Plan for Access, Quality of Care, and Patient Safety

The Military Health System (MHS) has demonstrated excellence in many things, including battlefield trauma care, medical evacuation, and post-combat rehabilitative care. In providing medical support for operational forces, it is without peer in the world. With respect to its additional mission of providing "peacetime" health care to millions of beneficiaries, it is a quality system, comparable to civilian counterparts. However, the just-completed MHS Review I ordered indicates that there are areas that need improvement in order for the MHS to achieve the goal of a preeminent health care system. We can do better.

Achieving the goal of a preeminent health care system begins with a culture where every member of our health care system understands that accountability, quality of care, and safety are their fundamental responsibilities. That culture must be based on clearly identified standards for access, quality, and patient safety, as well as an enterprise analytic capability to monitor performance, identify problems, and improve services. To advance this culture of excellence, strengthen our system of care, and address the findings and recommendations of the MHS review, I am directing implementation of the following essential measures:

Access to Care: The MHS sets clear standards for access to health care and many of our military treatment facilities (MTF) meet these standards; others do not. Patient satisfaction scores for getting care when needed suggest that patients also have concerns about their access to health care – no patient should be told to call back the next day for an appointment.

I direct that within 30 days, all MTF identified during the review as outliers with respect to access standards will have action plans to improve their performance in ensuring timely access to the integrated system of direct and purchased care. These plans will be under the direction and supervision of the relevant Surgeons General and the Director of the Defense Health Agency

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(DHA), with oversight for overall system improvement monitored by the MHS governance structure and reported to the Assistant Secretary of Defense for Health Affairs (ASD HA).

I also direct a twelve-month study to review purchased care access for all TRICARE enrollees. The study should examine performance against access standards for those enrolled in TRICARE Prime and access for those who use TRICARE Standard and Extra. Furthermore, this study will include a specific review of patient satisfaction for both our direct care system and purchased care in order to better understand patients' concerns.

Quality and Safety of Care: Our external experts point out that the MHS generally performs as well as the private sector in the delivery of safe, quality care. I believe our Service members, retirees and their families deserve better than average; I know our military healthcare providers and leaders believe that as well. Improving performance in both quality and safety is not a onetime event, nor should it be considered a burden. It must be seen as a prominent part of DoD's health care culture and requires ongoing measurement against benchmarks, accountability and raising the bar when goals are met. With that said, we need to address outliers identified in the report now to decrease variance in our system. While some of the initiatives will take time to implement and bear fruit, there are actions we can take now to improve the quality of care we deliver as a healthcare system.

Within 45 days, any MTF identified in the review as an outlier with respect to the quality and safety measures used in the review will have an action plan to improve performance. These plans will be under the direction and supervision of the relevant Surgeons General and the Director of the DHA, with oversight for overall system improvement monitored by the current MHS governance structure reporting to the ASD HA.

Within 90 days, the DHA will provide a plan for a more comprehensive assessment of quality and safety within purchased care to include current compliance with contract specifications for quality and safety.

To address the gap in the ability to measure and energize system wide performance, I direct that within 90 days, the DHA will establish a MHS performance management system (PMS) to support the Services as they manage and monitor MTF performance. The DHA will also use the PMS to manage the performance of the MTFs under their purview. The PMS will monitor MHS-wide core measures and dashboards for the purpose of monitoring system level improvements in all areas identified in the MHS Review. By July 15, 2015, I want a report that clearly demonstrates the PMS capability to drive system wide improvement for the identified common executable goals against common standards and for the dashboards to have measures identified in all areas covered by the MHS Review.

Transparency and Patient Engagement: Patients need to be actively involved in all aspects of their care. In order to do so, they need access to timely information to make decisions about that care. While we currently provide some information about the quality and safety of MHS care, it is difficult to find and even more difficult to understand.

Within 30 days, the MHS will have a plan to provide all currently available aggregate statistical access, quality and safety information for all MTF and, to the extent possible, all purchased care providers publically available on health.mil. Further refinement of this

information will take into consideration what our patients deem useful in making health decisions for themselves and their families. The DHA will support this effort.

Within 30 days, the MHS will also develop a mechanism through which patients and stakeholders are engaged for ongoing and enduring input for access, quality and safety issues.

High Reliability Organization: Within 90 days, the ASD HA will lead the development of a specific plan to implement the necessary changes to move to a top performing health system and address all recommendations in the MHS Review. The report will include any necessary organizational or infrastructure changes; education and training requirements; changes to existing policy or any required new policies; a plan to engage accrediting bodies and academic and professional organizations that can help facilitate this action and improve knowledge sharing across the enterprise; and include any additional resource requirements.

The Under Secretary of Defense for Personnel and Readiness (USD(P&R)) has overall responsibility and authority to take the actions directed by this memorandum and address the specific recommendations embedded in the final report. The USD(P&R) will, in coordination with the Secretaries of the Military Departments and with the assistance of the Assistant Secretary of Defense for Health Affairs, Director of the Defense Health Agency, and the Surgeons General, provide regular progress updates to the Deputy Secretary of Defense as requested until all actions are completed.

I want to acknowledge and thank all of DoD's health care providers for their selfless work and efforts every day, and for the work that went into the MHS Review. By clearly stating our challenges and providing solution sets to those identified, we will achieve a better system of care for those we serve. Our health care providers are second to none in their commitment to achieve more accountable and quality health care for all of our people.

Thank you.

cc:
Deputy Secretary of Defense