

Report of the Health Care Delivery Subcommittee

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President, Defense Health Board

March 9, 2009

Subcommittee Membership

- **Dr. George K. Anderson**
- **Dr. Donald M. Berwick**
- **Dr. Marion E. Broome**
- **Dr. Barbara Cohoon**
- **Dr. Kathleen A. Dracup**
- **Dr. Mary E. Evans**
- **Dr. Robert S. Galvin**
- **Dr. John P. Glaser**
- **Dr. Greer Glazer**
- **Dr. John Kokulis**
- **Dr. Felissa R. Lashley**
- **Dr. Wayne M. Lednar**
- **Dr. Russell V. Luepker**
- **Mr. John O. Marsh**
- **RADM Kathleen L. Martin**
- **Dr. Kenneth L. Mattox**
- **Dr. Michael D. Parkinson**
- **Dr. Nilda Peragallo**
- **Dr. Adil E. Shamoo**
- **Dr. Gail Wilensky**

February 27th Meeting

Four topics discussed:

- ◆ Update on DoD strategic plan
Implementing task force recommendation
- ◆ Health Care Delivery Matrices in MHS
- ◆ Direct Care and Purchased Care Trend
- ◆ Electronic Health Records

Implementation Strategy: Major Change to the Subcommittee

- ◆ Integration strategy
 - Q's: where failing; who to measure, if working
- ◆ “Micro-monitor” four areas
 - San Diego, I-25 in Colorado, NCR, San Antonio
 - Need for metrics, focus groups, success v. failure
- ◆ Six months + to assess problems
- ◆ One year plus until pilots ready

Other Recommendations

- ◆ Cost sharing: two step approach
 - reset cost share, stabilize with index tier to income; no TFL fee
 - Decision within two weeks
- ◆ Integration of medical services
 - Implications? Feasibility? Savings?
- ◆ Pharmacy – change co-pay structure
- ◆ “Best Practices” focus
 - include acquisition and contracting plus clinical

MHS Health Care Delivery Matrices

Development of MHS Values Dashboard

- Focus on matrices for measurement
- Matrices apply to direct care and purchased care
- Target high priority issues

Crisis in perception; slow provider communication

Attempt to tie matrices to patient-centered home

Attempts at P4P

Purchased Care/Direct Care Trends

- ◆ Budget/spending trends reviewed by service and sector
- ◆ Effects of various restrictions discussed
- ◆ Stimulus funds
 - \$.4 billion O&M; \$1.3 billion milcon

Electronic Health Records

- ◆ Reviewed progress and availability of different components
- ◆ Demo of some capabilities
- ◆ Discussion of PHR's versus EMR's
- ◆ Discussion of structured text

Going Forward

- ◆ Will meet again in June
 - Allow time for site monitor(s) to be selected, process to begin
- ◆ Will review demo's selected
- ◆ Will review new TMA contracts regarding demo/pilot flexibility
- ◆ Will not pursue EHR unless requested
 - Will remain in monthly electronic communication