

OFFICE OF THE UNDER SECRETARY OF DEFENSE

1000 DEFENSE PENTAGON WASHINGTON, D.C. 20301-1000

March 4, 2020

MEMORANDUM FOR DEPUTY ASSISTANT SECRETARY (BUDGET), OFFICE OF THE ASSISTANT SECRETARY OF THE ARMY (FINANCIAL MANAGEMENT AND COMPTROLLER) DIRECTOR FOR OFFICE OF BUDGET/FISCAL MA NAGEMENT, OFFICE OF THE ASSISTANT SECRETARY OF THE NAVY (FINANCIAL MANAGEMENT AND COMPTROLLER) DEPUTY ASSISTANT SECRETARY (BUDGET), OFFICE OF THE ASSISTANT SECRETARY OF THE AIR FORCE (FINANCIAL MANAGEMENT AND COMPTROLLER)

SUBJECT: Medical Billing Rates for Other than Foreign Military Personnel Utilizing Department of Defense Deployed/Non-Fixed Medical Facilities

This memorandum establishes medical billing rates for contractors deploying with U.S. Armed Forces, DoD civilians (both U.S. citizens and non-U.S. citizens, both essential and nonessential, both paid by appropriated funds and non-appropriated funds), media embedded in U.S. Armed Forces units, insurers of Military Health System beneficiaries, civilian emergencies, and others who receive medical care from a deployed/non-fixed medical facility. In accordance with DoD Instruction (DoDI) 3020.41, "Operational Contract Support," all costs associated with the treatment and transportation of contractors authorized to accompany the force (CAAF) are reimbursable to the Government and shall be the responsibility of contractor personnel, their employers, or their health insurance providers. These rates do not apply to foreign military patients receiving services under Acquisition and Cross-Servicing Agreements. This memorandum does not establish eligibility for care and does not apply to military treatment facilities (MTFs) funded by the Defense Health Program.

The following reimbursement rates (fixed and variable costs) should be used by the deployed/non-fixed medical facilities to calculate charges:

- Inpatient daily rate: \$4,200. Date of discharge is not billed unless patient is admitted and discharged on the same day.
- Outpatient visit rate: \$351. A visit is an encounter with a provider with clinical privileges to include diagnostic imaging, laboratory/pathology, and pharmacy provided at the medical facility. It does not include costs of services/supplies ordered by the provider but furnished by an entity other than the deployed medical facility (e.g., a pharmacy order purchased by the patient in the open economy).

These rates are to be used for medical services rendered from the date of this memorandum and are effective until updated. The following conditions must be satisfied to support the reimbursement process:

- Pursuant to DoDI 3020.41, to provide care for contractors deploying with the force, contracts shall contain standardized clauses for authorized levels of health service and other support for contractor personnel.
 - 1. All CAAF will normally be afforded emergency medical and dental care if injured while supporting contingency operations.
 - 2. Primary medical or dental care normally will not be authorized or be provided to CAAF by MTFs. When required and authorized by the Combatant Commander or subordinate joint force commanders, this support must be specifically authorized under the terms and conditions of the contract and detailed in the corresponding Letter of Authorization (LOA).
 - 3. The contract shall require that all contingency contractor personnel who are issued a LOA will carry the LOA with them at all times.

My point of contact for this action is Ms. DeLisa Prater, Defense Health Agency UBO Program Manager. She may be reached at 703-275-6380, or delisa.e.prater.civ@mail.mil.

Anne J. McAndrew

DoD Deputy Comptroller (Program/Budget)