Military Health System (MHS) Section 703 Workgroup Use Case Decision Package

Branch Health Clinic (BHC) San Onofre

Volume I

Disclaimer: This Use Case provides information relevant to decisions to change capacity and capability of a military treatment facility. A detailed implementation plan is needed to accomplish a transition of clinical services.

Executive Summary

Site	Branch Health Clinic (BHC) San Onofre
Decision	Branch Health Clinic San Onofre is in the process of transitioning to an Active Duty (AD) only clinic. The 703 decision supports the transition.

Background and Context

The table below summarizes the findings and data informing the decision on the future of the Military Medical Treatment Facility (MTF). Information in the Use Case Package could include, but is not limited to: Base and MTF mission briefs, a site-visit trip report, and two network assessments (TRICARE Health Plan Network Review and an independent government network assessment). When determining the decision for each site, the mission impact and network impact were considered in conjunction with Service and MTF input.

Base Mission Summary

Marine Corps Base (MCB) Camp Pendleton, the Corps' largest West Coast expeditionary training facility, encompasses more than 125,000 acres of Southern California terrain. The Base is home to the I Marine Expeditionary Force, 1st Marine Division, 1st Marine Logistics Group and many tenant units, including Marine Corps Installations-West, 1st Marine Raider Battalion, Wounded Warrior Battalion-West, Marine Corps Air Station Camp Pendleton, Marine Aircraft Group 39, Marine Corps Tactical Systems Support Activity, Marine Corps Recruit Depot San Diego's Weapons & Field Training Battalion, Marine Corps and Army Reserve Forces, the Navy's Assault Craft Unit 5, a Naval Hospital and 1st Dental Battalion.

The coastal and mountain terrain support a variety of military training. Fleet Marine Force units use Camp Pendleton's ranges and training areas to maintain combat readiness. MCB Camp Pendleton remains the Marine Corps' premier amphibious training base and will continue to enhance training opportunities, maximize the use of allocated resources, modernize base infrastructure and provide superior installation support and services.

Criteria Matrix

Decision Criteria	Rating or Value ¹	Key Takeaways or Findings	Use Case Package
Mission Impact	L	 BHC San Onofre is scheduled to transition to a Troop Clinic in October 2019 BHC San Onofre supports the School of Infantry-West (SOI-W) students and permanent personnel as well as the Navy Expeditionary Medical Training Institute, Los Angeles Recruiting District and the Deployment Processing Center-Talega (DPC) Annually, BHC San Onofre has a must-see population of 28,700 for the SOI-W BHC San Onofre supports the ready medical force through hospital Corpsman training. Operational training consists of Independent Duty Corpsman Clinical Site, Sick Call Screeners Course, Hospital Corpsman Personnel Qualification Standards Internship (HM PQS) and Tactical Combat Casualty Care. BHC San Onofre provides on the job training for Pharmacy, Laboratory and Audiology BHC San Onofre maintains programs for health and readiness including embedded mental health, occupational medicine, case management, audiology level 1 and 2 testing, antibiotic prophylaxis and bone marrow testing collection 	Section 1.0
Network Assessment	L	 Not conducted – no change is required as BHC San Onofre is already transitioning to an AD Only clinic 	Section 2.0

Risk / Concerns and Mitigating Strategies

The Risk / Concerns and Mitigation table below, represents a high-level summary of the risks identified throughout the process as well as the main concerns of the Base and MTF Commanders.

	Risk/Concerns	Mitigating Strategy
1	No risks / concerns identified as no additional changes are required for BHC San Onofre	• N/A

Next Steps:

No further action is required as BHC San Onofre is already transitioning to an AD Only Clinic.

¹See Appendix B for Criteria Ratings Definitions

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1.0. Installation and Military Medical Treatment Facility (MTF) Description

Marine Corps Base (MCB) Camp Pendleton, the Corps' largest West Coast expeditionary training facility, encompasses more than 125,000 acres of Southern California terrain. The Base is home to the I Marine Expeditionary Force, 1st Marine Division, 1st Marine Logistics Group and many tenant units, including Marine Corps Installations-West, 1st Marine Raider Battalion, Wounded Warrior Battalion-West, Marine Corps Air Station Camp Pendleton, Marine Aircraft Group 39, Marine Corps Tactical Systems Support Activity, Marine Corps Recruit Depot San Diego's Weapons & Field Training Battalion, Marine Corps and Army Reserve Forces, the Navy's Assault Craft Unit 5, a Naval Hospital and 1st Dental Battalion.

The coastal and mountain terrain support a variety of military training. Fleet Marine Force units use Camp Pendleton's ranges and training areas to maintain combat readiness. MCB Camp Pendleton remains the Marine Corps' premier amphibious training base and will continue to enhance training opportunities, maximize the use of allocated resources, modernize base infrastructure and provide superior installation support and services.

1.1. Installation Description

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Name	Marine Corps Base (MCB) Camp Pendleton
Location	North County, CA; approximately 38 miles from downtown San Diego
Mission Elements	I Marine Expeditionary Force, 1st Marine Division, 1st Marine Logistics Group, Marine Corps Installations-West, 1st Marine Raider Battalion, Wounded Warrior Battalion-West, Marine Corps Air Station Camp Pendleton, Marine Aircraft Group 39, Marine Corps Tactical Systems Support Activity, Marine Corps Recruit Depot San Diego's Weapons & Field Training Battalion, Marine Corps and Army Reserve Forces, the Navy's Assault Craft Unit 5, Naval Hospital Camp Pendleton and 1st Dental Battalion
Mission Description	Marine Corps Base Camp Pendleton's missions to operate a training base that promotes the combat readiness of the Operating Forces and the mission of other tenant commands by providing training opportunities, facilities, services and support responsive to the needs of Marines, Sailors and their families
Vision Description	Marine Corps Base Camp Pendleton supports today's fight and prepares for tomorrow's future. We will be a superior Marine Corps training base by expanding training opportunities, maximizing allocated resources, modernizing base infrastructure and providing superior service and support
Goals	 Enhance Installation Support of Warfighting Readiness Ensure the Long-Term Viability of All Installations Provide High Quality, Sustainable and Affordable Installation Support Optimize Workforce Readiness Promote Critical Partnerships
Regional Readiness/ Emergency Management	Unknown
Base Active or Proposed Facility Projects	Unknown
Medical Capabilities and Base Mission Requirements	Unknown

1.2. MTF Description

Branch Health Clinic San Onofre, located at Marine Corps Base Camp Pendleton, is approximately eight (8) miles from San Clemente, CA. Branch Health Clinic San Onofre provides healthcare for the School of Infantry (SOI) students, personnel, retirees and active duty family members (ADFM). BHC San Onofre is one of four clinics on Camp Pendleton and one of six total clinics within the Naval Hospital (NH) Camp Pendleton system.

BHC San Onofre
Camp Pendleton; approximately 8 miles from San Clemente , CA
Large Market; San Diego
 To train, deploy and deliver quality healthcare Be the preferred choice To align our efforts with Navy Medicine's strategic priorities of Readiness, Health and Partnership.
 Readiness-Ensure Operational Forces and Medical Staff are trained and ready to deploy for any future engagements Value-Provide High Reliability, Patient Centered Care to Active duty Service Members Jointness-Direct medical support to Operational Commander-School of Infantry-West (SOI-W), developing Combat Instructors, Riflemen and Infantry Marines
Outpatient facility
Unknown
Unknown
Unknown
Unknown
Partnership for Improvement (P4I) measures located in Volume II
CivilianMilitaryContractorTotalMedical9.246.50.856.5
 Primary Care Mental Health Case Management Pharmacy Occupational Health Audiology Immunizations Military Physicals Laboratory Radiology
 School of Infantry-West Naval Health Research Center- San Diego Navy Environmental and Preventive Medicine Unit 5
Active Duty Civilian Total

² Defined by FY17 NDAA Section 702 Transition

³ Appendix K: MTF Mission Brief

⁴ Source: Parent 0024 NH Camp Pendleton – Version 5 – 2019 Feb

2.0. Healthcare Market Surrounding the MTF

Description	BHC San Onofre is scheduled to transition to an Active Duty (AD) only in October 2019
Top Hospital Alignment	Not conducted – no change is required, BHC San Onofre is already transitioning to an AD Only clinic
Likelihood of Offering Primary Care Services to TRICARE Members (Providers not Limited to TRICARE)	Not conducted – no change is required, BHC San Onofre is already transitioning to an AD Only clinic

2.1. TRICARE Health Plan Network Assessment Summary

Network assessment was not performed as BHC San Onofre is currently transitioning to an AD Only clinic.

2.2. Network Insight Assessment Summary (Independent Government Assessment)

Network assessment was not performed as BHC San Onofre is currently transitioning to an AD Only clinic.

3.0. Appendices

Appendix A Use Case Assumptions
Appendix B Criteria Ratings Definition

Appendix C Glossary

Appendix D Volume II Contents

Appendix A: Use Case Assumptions

General Use Case Assumptions

- 1. Population impact that is greater than 10% of total population will impact the supply and demand of the provider network market
- 2. There will be no change in the TRICARE benefit to accommodate decisions
- 3. Readiness requirements for the final decision will be addressed in the Service Quadruple Aim Performance Plan (QPP)
- 4. There will be no changes to the existing Managed Care Support Contract (MCSC)
- 5. The MCSC could contract an additional 50% of the existing non-network Primary Care Providers (PCPs)
- 6. The average PCP panel is approximately 2000⁶

⁶ MGMA

Appendix B: Criteria Ratings Definition

Criteria Ratings Definition

Mission Impact	High: High probability of impacting the mission or readiness with the impacted population receiving network care Medium: Moderate probability of impacting the mission or readiness with the impacted population receiving network care Low: Low probability of impacting the mission or readiness with the impacted population receiving network care
Network Assessment	High: Both network assessments confirm inadequate network for primary and Specialty Care. Low probability of network growth or MCSC recruitment in the future Medium: Mixed findings from both network assessments for primary and Specialty Care. Moderate probability of network growth in the future Low: Both network assessments confirm adequate network for Primary Care and Specialty Care

Appendix C: Glossary

Term (alphabetical)	Definition
Ambulatory Care	Ambulatory care is care provided by health care professionals in outpatient settings. These settings include medical offices and clinics, ambulatory surgery centers, hospital outpatient departments, and dialysis centers (AHRQ.gov)
Beneficiary	Individuals who have been determined to be entitled to or eligible for medical benefits and therefore are authorized to receive treatment in a military treatment facility or under Department of Defense auspices (Source: health.mil)
Critical Access Hospital Designation	Critical Access Hospitals (CAHs) is a designation given to eligible hospitals by the Centers for Medicare and Medicaid Services (CMS) (CAHs) represent a separate provider type with their own Medicare Conditions of Participation (CoP) as well as a separate payment method. CoPs for CAHs are listed in the Code of Federal Regulations (CFR) at 42 CFR 485.601–647 (Source: CMS.gov)
Direct Care	Care provided to eligible beneficiaries throughout the Military Health System at DoD hospitals, clinics, and pharmacies (usually MTFs) (Direct Care); (Source: McEvoy, L. N., 2Lt, USAF. (2018). A Study of Military Health Care Costs: Direct Versus Purchased Care in a Geographical Region. Defense Technical Information Center, 1-6. Retrieved from https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf.)
Eligible	To use TRICARE, you must be listed in DEERS as being eligible for military health care benefits. TRICARE-eligible persons include the following: Military members and their families, National Guard/Reserve members and their families, Survivors, Some former spouses, Medal of Honor recipients and their families (Source: TRICARE.mil)
Enrollee	The Cambridge Dictionary defines Enrollee as "someone who is on the official list of members of a group, course, or college." For the purposes of this Use Case, Enrollee is defined as an eligible Military Health System beneficiary that is currently participating in one of the TRICARE Health plans
JOES	Joint Outpatient Experience Survey (Source: health.mil)
JOES-C	Joint Outpatient Experience Survey – Consumer Assessment of Health Providers and Systems (Source: health.mil)
Managed Care Support Contractor (MCSC)	Each TRICARE region has its own MCSC who is responsible for administering the TRICARE program in each region. The MCSCs establish the provider networks and conduct provider education. The MCSC is the MCSC in the East, and HealthNet is the MCSC in the West (Source: health.mil)
Network	A provider network is a list of the doctors, other health care providers, and hospitals that a plan has contracted with to provide medical care to its members. These providers are called "network providers" or "in-network providers." (Source: cms.org)
Occupational Therapy	Occupational therapy is the use of individualized evaluations, customized intervention strategies, and outcome evaluations to help people across their lifespan participate in activities they want and need through the therapeutic use of everyday activities (occupations) (Source: The American Occupational Therapy Association)
Remote Overseas	TRICARE Prime Remote Overseas is a managed care option in designated remote overseas locations: Eurasia-Africa, Latin America and Canada, Pacific (Source: TRICARE.mil)
P4I	A set of MHS clinical, quality, safety and readiness performance measures (Partnership for Improvement)
Panel	A panel is a list of patients assigned to each care team in the practice. The care team (e.g., a physician, a medical assistant, and a health educator) is responsible for preventive care, disease management, and acute care for all the patients on its panel. This means that a patient will have the opportunity to receive care from the same clinician and his or her care team. The panel's population are the patients associated with a provider or care team, the physician care team is concerned with the health of the entire population of its patient (Source: AHRQ.gov)
Plus	With TRICARE Plus patients receive free Primary Care at their respective military hospital or clinic. The beneficiary is not required to pay anything out-of-pocket. TRICARE Plus does not cover Specialty Care (Source: health.mil)
Prime	TRICARE Prime is a health insurance program offered to active duty members, retirees, activated guard and reserve members, and families. Active Duty members are required to enroll in TRICARE Prime, while all others may choose to enroll or use TRICARE Select. TRICARE Prime offers fewer out-of-pocket costs than TRICARE Select, but less freedom of choice for providers (Source: health.mil)
Purchased Care	TRICARE provides care to its eligible beneficiaries in two broad settings: a system of DoD hospitals, clinics, and pharmacies (usually MTFs) (Direct Care); and a supplemental network of participating civilian health care professionals, institutions, pharmacies, and suppliers (Purchased Care) (Source: McEvoy, L. N., 2Lt, USAF. (2018). A Study of Military Health Care Costs: Direct Versus Purchased Care in a Geographical Region. Defense Technical Information Center, 1-6. Retrieved from https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf.)
Reliant	Active Duty Service Members who are not enrolled to TRICARE Prime (e.g. students and recruits) (Source: MHS Modernization Study, Feb 2016)
Value Based Payment	Value Based Payment (VBP) is a concept by which purchasers of health care (government, employers, and consumers) and payers (public and private) hold the health care delivery system at large (physicians and other providers, hospitals, etc.) accountable for both quality and cost of care (Source: AAFP)

Appendix D: Volume II Contents

Part A	P4I Measures
Part B	JOES-C 12-month Rolling Data
Part C	MTF Mission Brief
Part D	MTF Portfolio (Full)