



DEFENSE HEALTH AGENCY
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FALLS CHURCH, VIRGINIA 22042-5101

DHA-IPM 17-008
October 24, 2017

MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (MANPOWER
AND RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE NAVY (MANPOWER AND
RESERVE AFFAIRS)
ASSISTANT SECRETARY OF THE AIR FORCE (MANPOWER
AND RESERVE AFFAIRS)
DIRECTOR OF THE JOINT STAFF
DEPUTY ASSISTANT SECRETARY OF DEFENSE (HEALTH
READINESS POLICY AND OVERSIGHT)
DEPUTY ASSISTANT SECRETARY OF DEFENSE (HEALTH
SERVICES POLICY AND OVERSIGHT)
DEPUTY ASSISTANT SECRETARY OF DEFENSE (HEALTH
RESOURCES MANAGEMENT AND POLICY)

SUBJECT: Interim Procedures Memorandum 17-008, Utilization of Tri-Service Workflow (TSWF) Case Management (CM) Screening Form for Adult and Pediatric Beneficiaries

References: See Attachment 1.

Purpose. This Defense Health Agency-Interim Procedures Memorandum (DHA-IPM), based on the authority of References (b) and (c), and in accordance with the guidance of References (d)–(g):

- Provides guidance to the Service Departments regarding standardized Medical Treatment Facility (MTF) implementation of Adult and Pediatric TSWF Forms that support telephonic, virtual, and face-to-face screening and documentation of CM services within the Armed Forces Health Longitudinal Technology Application system and future Electronic Health Record, Military Health System (MHS) GENESIS. Is effective immediately and should be included within Military Service Medical Management policies and guidance. This DHA-IPM will expire 12 months from date of issue and be replaced with an enduring DHA Procedural Instruction to support sustained implementation in MTFs.

Applicability. This DHA-IPM applies to:

- OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the DoD, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (referred to collectively in

the DHA-IPM as the “DoD Components”).

- Healthcare practitioners and facilities within the MHS involved in the delivery of Adult and Pediatric CM Services to eligible beneficiaries.


Policy Implementation. In accordance with Reference (a), this DHA-IPM will support standardized documentation to reduce variance and support improved beneficiary outcomes in alignment with the basic tenants of high reliability organizational processes. The MHS CM personnel will utilize Adult and Pediatric CM TSWF Forms to assess and document beneficiary centric CM requirements that can occur face-to-face, telephonically, or virtually.

Responsibilities

- The Director, DHA, will:
 - Oversee implementation of the standardized Adult and Pediatric MHS CM TSWF.
 - Monitor and track form implementation and use.
 - Establish a process to support dedicated feedback and modifications to MHS CM forms.
- The Secretaries of the Military Departments will coordinate with the Surgeons General of the Military Departments to:
 - Ensure guidance is in place to implement dedicated Adult and Pediatric CM TSWF Forms.
 - Identify a dedicated representative to oversee the execution and reporting of TSWF utilization.
 - Establish a mechanism to provide dedicated CM feedback on dedicated CM TSWF Forms.

Procedures. See Attachment 2.

Releasability. **Cleared for public release.** This DHA-IPM is available on the Internet from the DHA SharePoint site at: www.health.mil/dhapublications.



R. C. BONO
VADM, MC, USN
Director

Attachments:
As stated

cc:
Under Secretary of Defense for Personnel and Readiness
Assistant Secretary of Defense for Health Affairs
Surgeon General of the Army
Surgeon General of the Navy
Surgeon General of the Air Force
Medical Officer of the Marine Corps
Joint Staff Surgeon
Director of Health, Safety, and Work-Life, U.S. Coast Guard
Surgeon General of the National Guard Bureau
Director, National Capital Region Medical Directorate

ATTACHMENT 1

REFEERNCES

- (a) DoD Instruction 6025.20, "Medical Management (MM) Programs in the Direct Care System (DCS) and Remote Areas," October 2, 2013, as amended
- (b) DoD Directive 5136.01, "Assistant Secretary of Defense for Health Affairs ASD)(HA)," September 30, 2013
- (c) DoD Directive 5136.13, "Defense Health Agency (DHA)," September 30, 2013
- (d) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June, 23, 2008
- (e) Memorandum of Understanding between Department of Veterans Affairs and Department of Defense for "Interagency Complex Care Coordination Requirements for Service Members and Veterans," July 29, 2014
- (f) DoD Instruction 6010.24, "Interagency Complex Care Coordination," May 14, 2015
- (g) DHA-Procedural Instruction 5025.01, "Publication System," August 21, 2015
- (h) Case Management Society of America, Standards of Practice for Case Management, 2016

ATTACHMENT 2

PROCEDURES

1. BACKGROUND. Utilization of a dedicated TSWF Form within the direct care system facilitates standardized screening and documentation and clinical content, to include prompts for comprehensive CM interventions and support. These forms are currently located within the outpatient Electronic Health Record, Armed Forces Health Longitudinal Technology Application, and future MHS GENESIS system where available. CM services may be integrated into primary care activities or exist as a stand-alone clinic. Regardless of organization structure, Case Managers must use the CM TSWF to document all pediatric and adult CM encounters. TSWF use promotes standardization in assessment and documentation, improved communication, and robust collection of clinical data, including metrics pertaining to the quality of care delivered. Consistent and complete TSWF utilization will improve patient care and experience, as well as data capture and analytics for CM monitoring and reporting. Recommended updates to CM TSWF content will be coordinated with the Medical Management Working Group (MMWG) and MHS Integrating Board in compliance with organization governance up to and including the MHS Medical Operations Group.

2. TIMELINE

a. Implementation of dedicated Adult and Pediatric CM TSWF Forms to assess and document CM services needs through face-to-face, telephonic, and virtual engagement is effective immediately.

b. The MMWG will collaborate with the DHA TSWF team, who collects CM Adult and Pediatric TSWF utilization centrally, to provide MHS compliance reporting.

3. PROCEDURES

a. MMWG to collaborate with the DHA TSWF team responsible for collection of TSWF utilization data for quarterly CM documentation compliance reporting to MMWG Service leads and distribution to MTFs.

b. MMWG to collaborate with DHA TSWF team concerning TSWF content change recommendations for approval through the MMWG and DHA Integrating Board.

c. MMWG to collaborate with DHA TSWF team for MTF training needs identified by MMWG Service leads.

GLOSSARY

ABBREVIATIONS AND ACRONYMS

CM	Case Management
DHA	Defense Health Agency
DHA-IPM	Defense Health Agency-Interim Procedures Memorandum
MHS	Military Health System
MMWG	Medical Management Working Group
MTF	Medical Treatment Facility
TSWF	Tri-Service Workflow

PART II. DEFINITIONS

CM. A collaborative process of assessment, planning, facilitation, care coordination, evaluation, and advocacy for options and services to meet an individual's and family's comprehensive health needs through communication and available resources to promote patient safety, quality of care, and cost effective outcomes (Case Management Society of America, 2016 (Reference (h))).