

DoD Annual Periodic Health Assessment (PHA)

30 October 2018



Periodic Health Assessments (PHAs): Why...



PHA: basis for individual Service members to document medical readiness to perform military duties.

- Individual Medical Readiness (IMR), DoDI 6025.19 is a primary component of Force Readiness
- IMR requires an annual PHA to:
 - ☐ Assess health and medical readiness status of each Service member (SM)
 - ☐ Initiate preventive services
- In addition, PHAs
 - ☐ Identify and document Duty-Limiting/Deployment-Limiting Medical Conditions (DLMCs)
 - ☐ Provide preventive health information to Services

Periodic Health Assessments (PHAs): Where we came from...



- Historically, process and assessment varied by Service/Component and even within Service
- Resulted in poor data quality
- Inconsistency in Readiness determinations
- Recognized need to standardize PHA across the DoD to accurately assess and maintain Individual Medical Readiness (IMR)
- Several previous attempts at standardization failed

Periodic Health Assessments (PHAs) What we did...



- Established multi-service PHA Optimization Working Group (PHAOWG) –
 May 2013
- Redesigned PHA as standardized web-enabled tool
- Consulted DoD and Service-specific subject matter experts to determine best practices and develop evidence-based questions
- Performed in-depth analysis of validity/reading level of each assessment question
- Conducted beta testing and analysis
- Housed PHA on each Service's electronic platform

PHA Optimization Initiative: Where we are now...



- Standardized PHA referred to as DoD PHA (DD Form 3024)
 - ☐ All Services for Total Force interoperability, including Guard/Reserves
 - DODI 6200.06, Periodic Health Assessment (PHA) Program, 8 September 2016
 - DHA-PI 6200.06, DHA PI 6200.06, Periodic Health Assessment (PHA) Program, 9 May 2017
 - ☐ Three Parts: Service Member, Record Reviewer, Health Care Provider
- Logic-based instrument, including response-based skip-patterns
- Removes requirement for face-to-face (F2F) and replaces with person-toperson (P2P)
- Integrates PHA across Services information technology (IT) platforms e.g. ePHA, ASIMS, MODS, MEDNET (RHRP)
- Allows SM from any Service to complete DoD PHA at Sister Service locations

DoD PHA/MHA Training



- Per DoDI 6200.06, DHA developed PHA and MHA training for Health Care Providers
 - ☐ Level-3 Computer-Based Training (CBT) accessible from Joint Knowledge Online (JKO)
 - ☐ 2-hour Computer-Based Training for each assessment (PHA and MHA)
 - ☐ Applications submitted to provide Continuing Education Units upon completion of DoD PHA and MHA trainings
- Each Service developed their own DoD PHA and MHA training for Service Members, Health Care and Mental Health Providers, that reflected what they would see in their Service specific system.

DoD PHA – Part A Service Member Sections



- 1. Service Member Demographic Information
- 2. Deployment Information
- 3. Occupational Information
- 4. Medical Conditions (health changes since the last PHA)
- 5. Individual Medical Readiness (IMR)
- 6. Behavioral Health (depression, PTSD, alcohol)
- 7. Family History/Lifestyle (supplements, diet, tobacco, sexual health)
- Women's Health
- 9. Reserve Components
- 10. Other (pain, non-prescription meds, other concerns)
- 11. Separation/Retirement

DoD PHA – Part B Record Review and Recommendations



- 1. Reviewer Demographics
- 2. Medical Screening (height/weight, vital signs, labs)
- 3. Occupational-Specific Screening
- 4. Family History/Lifestyle
- 5. Women's Health
- 6. Deployment-related Health Assessments
- 7. IMR
- 8. Reserve Components
- 9. Additional Record Reviewer Comments

DoD PHA - Part C Health Care Provider



- 1. Mental Health Assessment Provider Information
- 2. Mental Health Assessment (AUDIT-C, PCL-C, PHQ-8)
- PHA Provider Information
- 4. PHA Provider Recommendations and Referrals
- 5. Summary and Comments
- 6. IMR Disposition Determination

DoD PHA Process Detail

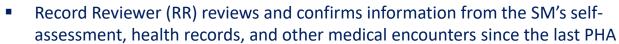


Service Member Self-Assessment (Part A)



- SM receives electronic health education
- Items for PHA Provider review and consultation are flagged as warranted





- Assess auto generated flags
- Provides additional comments to the Health Care Provider (HCP)



Health Care Provider Review (Part C)

- HCP or licensed mental health professional with MHA-specific training reviews the mental health portion of the self-assessment and conducts a person-toperson MHA
- HCP reviews SM's self-assessment, RR input, and any flags to determine next steps
- HCP reviews and notes any missing or inaccurate medical record information, conducts a face-to-face encounter (if necessary), and signs PHA as complete

DoD PHA Completions to date



- Full implementation of DoD PHA initiated in FY 18
- To date total 1,062,664
 - Active 753,749
 - Reserve 120,240
 - Guard 188,675

PHA Data



- Provides first Total Force aggregated PHA data
 - ☐ Identical data points collected for 100% of population annually
 - ☐ Over time will allow longitudinal evaluations down to the individual level
 - ☐ Each PHA contains >450 data points

Example PHA Data



- Prevalence of supplement use
 - ☐ Muscle Building Products 6%; Performance Enhancers 3%; Weight Loss Supplements 4%; Energy shots 4%
- Referrals and recommendations
 - ☐ 7.3% of individuals have been referred at least one time
 - ☐ Majority of referrals were to primary care and mental health services
- Nutrition in past 30 days
 - □ 30% eat 2+ servings of fruit and 42% eat 2+ servings of vegetables daily
- Sleep per night in past two weeks
 - ☐ 10% get 5 or less hours; 53% 5-7 hours; 36% 7+ hours
- Tobacco use
 - 40% are interested in quitting smoking, of those only 15% are interested in a referral

DoD PHA Feedback Survey



- 400+ Health Care Providers (HCP) across all Services having conducted at least 3 PHAs
- 400+ Service members (SM) across all Services
 - ☐ 6 Primary Questions, including demographics
 - 20 Secondary Questions
 - ☐ 5-point Likert items and open ended questions
- Surveys accessed through hyperlink distributed via email
- Responses categorized by: IT, Process, Form
- Data analysis/Report underway

DoD PHA and the Health Assessments Continuum: Where we go from here...



OPPORTUNITIES:

- Leverage data-driven, focused Public Health opportunities
 - Robust data analysis and longitudinal trending
- Streamline health assessment continuum with PHA as lynchpin
- Explore completion of occupational specialty exams during PHA process
- Leverage PHA and Separation History and Physical Exam (SHPE)
- Joint medical readiness system

CHALLENGES

Medical and Readiness System IT challenges

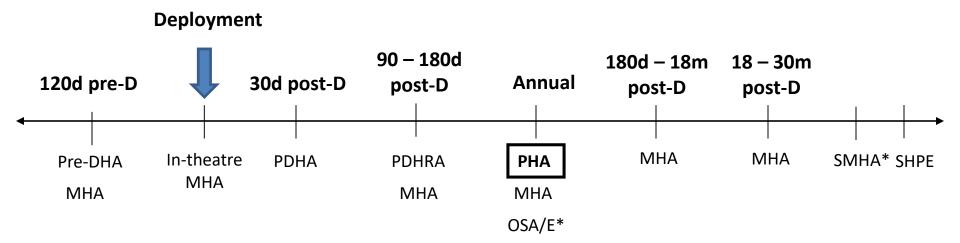
Health Assessments



- Periodic Health Assessment (PHA) annual
- Pre Deployment Health Assessments 120 days prior (previously 60 days)
- Deployment Mental Health Assessment 120 days prior
- In-theater Mental Health Assessment every 180 days
- Post Deployment Health Assessment 30 days before/after
- Post Deployment Health Re-Assessment 90-180 days after
- Deployment Mental Health Assessment 90-180 days after
- Deployment Mental Health Assessment 6-18 months after (previously 7-12 months)
- Deployment Mental Health Assessment 18-30 months after (previously 12-18 months)
- Separation MHA
- Separation Health Assessment (SHA)/Separation History and Physical Examination (SHPE)
- Occupational Specialty Assessments/Examinations

Health Assessment Timeline





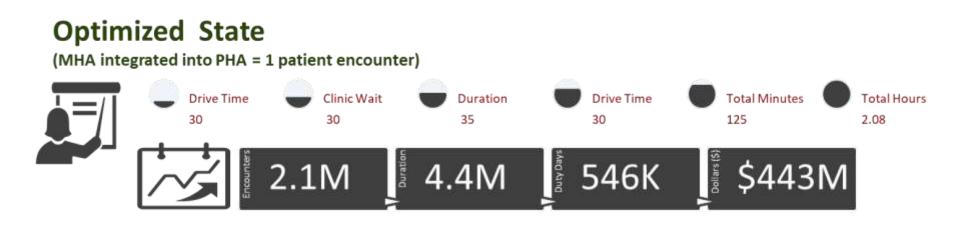
^{*}Occupational Specialty Assessments/Exams

^{*}Separation MHA

DoD PHA Cost Avoidance







Questions?

