

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

Soldier-Centered Medical Home (SCMH) Okubo-Joint Base Lewis-McChord (JBLM)

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	Soldier-Centered Medical Home (SCMH) Okubo – Joint Base Lewis-McChord (JBLM)
Decision	Soldier Centered Medical Home Okubo has already transitioned to an Active Duty (AD) only clinic. The 703 decision supports this 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.

Installation Mission Summary

Joint Base Lewis McChord is the Department of Defense's premiere military installation on the West Coast. JBLM provides world-class support to more than 40,000 active, Guard and Reserve service members and about 14,000 civilian workers.¹ Joint Base Lewis-McChord is home to I Corps, the globally responsive and regionally aligned joint task force capable headquarters that focuses on the Pacific Rim and supports the U.S. Pacific Command's theater campaign requirements, and the 62nd Airlift Wing - the only wing in the Department of Defense tasked to airlift nuclear and nuclear-related cargo.

Madigan Army Medical Center, the main health care provider for JBLM and the surrounding area, consists of several facilities including Soldier-Centered Medical Home (SCMH) Okubo, McChord Medical Clinic, Winder Family Medicine Clinic, South Sound Community Medical Home, Puyallup Clinic, and MAMC Annex. Madigan is a part of the Puget Sound enhanced Multi-Service Market (eMSM) which supports the Department of Defense's focus on improved readiness, improved cost, better health, lower cost in the Military Health System.

Criteria Matrix

Criteria	Rating or Value ²	Key Takeaways or Findings	Use Case Package
Mission Impact	L	<ul style="list-style-type: none"> SCMH Okubo serves as one of the Army's Medical Homes that takes an interdisciplinary approach to delivering evidence-based, comprehensive Primary Care for soldiers. Each patient partners with a team of healthcare providers – physicians, nurses, physician assistants, clinical pharmacists, physical therapy, dietician, and case management professionals - to develop a comprehensive, personal healthcare plan Okubo has made an effort to move away from episodic care and towards a standardized, long-term model that achieves optimal health outcomes No additional changes will be made as SCMH Okubo is already an Active Duty only clinic 	Section 1.0
Network Assessment	L	<ul style="list-style-type: none"> SCMH Okubo does not have beneficiaries attributed to it via Catchment ID, MTFSA, PRISM ID, or Enrollment ID The Primary Care providers within the 30-minute drive-time standard are capable of accepting incremental demand from beneficiaries utilizing services at SCMH Okubo JBLM 	Section 2.0

Risk/Concerns and Mitigating Strategies

The Risk/Concerns and Mitigation Strategies 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 identified. Though not exhaustive, the mitigation strategies / potential courses of action will be used to help develop a final implementation plan.

	Risk/Concerns	Mitigating Strategy
1	No risks or concerns have been identified as SCMH Okubo has already transitioned to an AD only clinic	<ul style="list-style-type: none"> N/A

Next Steps

No immediate next steps are required as SCMH Okubo has already transitioned to AD only clinic.

¹ <https://home.army.mil/lewis-mcchord/>

² See Appendix B for Criteria Ratings Definitions

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

Joint Base Lewis McChord is in Tacoma, Washington; approximately 38 miles from Seattle-Tacoma International Airport. Joint Base Lewis-McChord is home to I Corps, the globally responsive and regionally aligned joint task force capable headquarters that focuses on the Pacific Rim and supports the U.S. Pacific Command's theater campaign requirements, and the 62nd Airlift Wing - the only wing in the Department of Defense tasked to airlift nuclear and nuclear-related cargo.

SCMH Okubo JBLM is a part of the Puget Sound enhanced Multi-Service Market (eMSM), currently one of six eMSMs in the Department of Defense. Madigan is a tertiary care medical center that provides the full spectrum of primary and Specialty Care and serves as the regional referral center for Regional Health Command-Pacific. Within Madigan, Soldier-Centered Medical Home (SCMH) Okubo provides care to Active Duty only.

1.1. Installation Description

Name	SCMH Okubo Joint Base Lewis McChord (JBLM)
Location	JBLM, Washington; approximately 11 miles from Tacoma, WA
Mission Elements	<p>I Corps, the globally responsive and regionally aligned joint task force capable headquarters that focuses on the Pacific Rim and supports the U.S. Pacific Command's theater campaign requirements, stays prepared to deploy on short notice worldwide and is one of the Army's contingency corps.</p> <p>The strategic location of Joint Base Lewis-McChord provides Air Force units with the ability to conduct combat and humanitarian airlift to any location in the world. The 62nd Airlift Wing is the only wing in the Department of Defense tasked to airlift nuclear and nuclear-related cargo.³</p>
Mission Description	<p>Mission: JBLM provides state-of-the-art training and infrastructure, responsive quality of life programs, and fully-capable mobilization and deployment operations for Army, Navy, Air Force, and Marines. Manage resources efficiently and equitably to support mission readiness and execution, and the well-being of service members, families, and civilians. Sustain and protect the environment as a fully-integrated community partner in the lower Puget Sound, with a highly-trained and motivated workforce.</p> <p>Vision:</p> <ul style="list-style-type: none"> • Provide world-class support to mission commanders and the joint base community • Serve as an enabler to our warfighters as they train and project America's combat power • Make JBLM the station of choice for our nation's warfighter <p>JBLM supports more than 40,000 service members, approximately 14,000 full-time civilian employees and more than 90,000 family members, veterans and retirees.</p>
Regional Readiness/ Emergency Management	The strategic location of the base provides Air Force units with the ability to conduct combat humanitarian airlift to any location in the world with the C-17A Globemaster III, the most flexible cargo aircraft in the airlift force.
Base Active or Proposed Facility Projects	Unknown
Base Mission Requirements	Joint Base Lewis-McChord is a training and mobilization center for all services and is the only Army power-projection platform west of the Rockies.

1.2. MTF Description

SCMH Okubo, a part of Madigan Army Medical Center, is in Tacoma, Washington. SCMh Okubo has several units assigned, including the 593rd Expeditionary Sustainment Command, 13th Combat Sustainment Support Battalion, 7th Infantry Division, 2nd Stryker Brigade Combat Team, 17th Field Artillery Brigade, and 555th Engineer Brigade. Okubo has over 8,000 soldiers assigned and is located on JBLM Lewis North. Active Duty Family Members are concentrated near Okubo yet receive their care at other clinics, as Okubo has been Active Duty only since October 2016

³ <https://home.army.mil/lewis-mcchord/>

Name	SCMH Okubo – JBLM				
Location	JBLM, Washington; approximately 11 miles from Tacoma, WA				
Market⁴	Puget Sound (Large Market)				
Mission Description	Madigan AMC Mission: Team Madigan proudly generates a ready medical force and a medically ready force by delivering innovative, highly reliable healthcare in support of America's Military Family.				
Vision Description	Madigan AMC Vision: Always Ready, Trusted for Excellence.				
Goals	Values: I - Integrity C - Compassion A - Accountability R - Respect E - Excellence No Information				
Facility	Active Duty Only Soldier Centered Medical Home No				
Type⁵	Information				
Square Footage	Please see Volume II: Part A Data Call for full list of Deployable Medical Teams				
Deployable Medical Teams	Information				
MTF Active or Proposed Facility Projects	Unknown				
Performance Metrics	See Volume II Part D for Partnership 4 Improvement (P4I) measures and Part E Joint Outpatient Experience Survey - Consumer Assessment of Health Providers and Systems (JOES-C) data				
Fiscal Year (FY) 2018 Assigned Full-time Equivalents (FTEs)⁶		Civilian	Contractor	Military	Total
Healthcare Services	Medical	23.6	0.0	7.0	30.6
	<ul style="list-style-type: none"> • Primary Care • Clinical Pharmacist • Dietician • Physical Therapy • Occupational Therapy • Pharmacy • Laboratory • Radiology – X-ray only 				
Projected Workforce Impact	Active Duty	Civilian	Total		
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⁴ Defined by FY17 NDAA Section 702 Transition

⁵ Source: Madigan AMC-Ft Lewis MTF Portfolio

⁶ Source: Madigan AMC-Ft Lewis MTF Portfolio (FY17 numbers used because of lack of FY18 data related to MHS GENESIS implementation)

2.0. Healthcare Market Surrounding the MTF

Description	SCMH Okubo-JBLM is a Primary Care clinic that is being evaluated for closure. SCMH Okubo is a part of the broader Madigan Medical Center and the Puget Sound eMSM.		
Top Hospital Alignment	<ul style="list-style-type: none"> Tacoma General Hospital (Tacoma, WA) Capital Medical Center (Olympia, WA) Mary Bridge Children's Hospital (Tacoma, WA) MultiCare Allenmore Hospital (Tacoma, WA) MultiCare Good Samaritan Hospital (Puyallup, WA) Saint Claire Hospital (Lakewood, WA) Mason General Hospital (Shelton, WA) Madigan Army Medical Center (JBLM, WA) Western State Hospital (Lakewood, WA) St Joseph Medical Center (Tacoma, WA) Seattle Children's Hospital (Seattle, WA) Providence St Peter Hospital (Olympia, WA) 		
Likelihood of Offering Primary Care Services to TRICARE Members⁷		Number of Practices	Number of Physicians
	Contracted with TRICARE	133	138
	High Likelihood	8	5
	Medium Likelihood	64	121
	Low Likelihood	16	34
	Total	221	298

2.1. Network Insight Assessment Summary (Independent Government Assessment)

Facts:

- The network adequacy analysis included a 15-mile radius (30-minute boundary), which was used due to this geography being an urban area
- The identified drive time includes 72 zip codes and three partial counties (Mason, Pierce and Thurston)
- There are Primary Care 221 practice sites and 298 physicians in the 15-mile radius (not limited to TRICARE)
- Population growth over the last five years (2014 to 2018) has been very high at 11.2%. Population growth is projected to level out over the next five years (2019 to 2023) to 5.5%

Assumptions:

- Assumptions can be found in Section 4.3.2 of the NDAA Section 703 Report

Analysis:

- There is a projected overall surplus of General/Family Practice and Pediatric providers is projected in the market, with a small shortage of Internal Medicine providers that can be offset by these surpluses. The Primary Care providers within the 30-minute drive-time standard should be capable of accepting incremental from impacted beneficiaries utilizing services at SMHC Okubo

⁷ Contracted with TRICARE: Providers are currently contracted to provide services to TRICARE beneficiaries; High Likelihood: Providers are connected to organizations currently providing services to TRICARE beneficiaries; Medium Likelihood: Providers are accepting Medicare and/or Medicaid; Low Likelihood: Providers are neither providing Medicare nor Medicaid

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 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 2000⁸

⁸ 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

<i>Term (alphabetical)</i>	<i>Definition</i>
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. Humana 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	Data Tool
Part B	Relevant Section 703 Report Detail
Part C	Network Insight Assessment Summary (Independent Government Assessment)
Part D	P4I Measures
Part E	JOES-C 12-month Rolling Data
Part F	MTF Mission Brief
Part G	MTF Portfolio (Full)

