

# CLINICAL QUALITY MANAGEMENT DHA-PM 6025.13 Frequently Asked Questions



[Health.mil/cqm](https://health.mil/cqm) offers resources to communicate and introduce DHA-PM 6025.13 (Clinical Quality Management (CQM) in the Military Health System (MHS)). Additionally, a [CQM SharePoint site](#) houses essential resources related to implementing the DHA-PM 6025.13. On this site, you can access webinar slides and recordings, job aids, implementation guides, points of contact lists, and in-depth FAQs related to all Clinical Quality Management program volumes.

## What brought on changes to CQM within the MHS?

Three converging requirements provided opportunities to take action and strengthen accountability, transparency, and standardization, prevention and improvement in Clinical Quality Management:

- The High Reliability Organization mandate from the MHS Review.
- The National Defense Authorization Act of 2017 Section 702, and
- The expiration of the DoDM 6025.13.

## How does this “transition” to the Defense Health Agency improve efficiency and performance?

- The Defense Health Agency (DHA) and the Military Department medical leaders have developed DHA-PM 6025.15 to support Clinical Quality Management.
- Functional capabilities will be centralized at DHA Headquarters.
- Hospitals and clinics will have one military officer as the Director and Service Commander.
- DHA and Military Medical Departments are developing a coordinated staffing plan.
- Military Departments will manage civilian and contract personnel until DHA finalizes plans for civilian human resource support.

## What is the new organizational structure?

Under the DHA-PM 6025.13, there is a new structure. If you think of a pyramid with the Director, DHA at the top, the structure is as follows:

- DHA Director: Provides policy and oversight.
- Deputy Assistant Director Medical Affairs, Clinical Quality Management: Administers and manages CQM Programs.
- Defense Health Agency Markets/Intermediate Headquarters: Supports, monitors, and executes Clinical Quality Management Programs.
- Military Treatment Facilities: Maintain continuous compliance of DHA-PM 6025.13.

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## What is the purpose of DHA-PM 6025.13?

The DHA-PM 6025.13 provides expectations, requirements, and guidance that are all aligned to the CQM Strategy Elements: MHS Quadruple Aim, MHS High Reliability Organization Principles, and MHS Aims for Healthcare Quality. The volumes support the top priorities of the Defense Health Agency.

## How does the DHA-PM 6025.13 fit into the DHA mission?

- As a Combat Support Agency, the Defense Health Agency leads the MHS integration of readiness and health to deliver the Quadruple Aim: Improved Readiness, Better Health, Better Care, and Lower Cost.
- The Quadruple Aim is one of three MHS strategy elements which are the foundational and principle of Clinical Quality Management, supported by the DHA-PM 6025.13.

## Who does DHA-PM 6025.13 apply to?

The overall responsibilities apply to:

- Leadership:
  - OSD, MILDEPS, Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, Combatant Commands, DoD Office of Inspector General of the DoD, Defense Agencies, DoD Field Activities, and DoD Components.
- MHS and DoD Healthcare Providers:
  - MHS, DoD MTFs, uniformed Services, civilian, contract, volunteer, other medical or dental healthcare providers
- Other Providers:
  - Credentialed healthcare providers who are members of the Army National Guard or the Air National Guard, trainees with granted privileges, managed care support contractors (MCSCs), designated providers, and overseas contractors

## What are the changes in DHA-PM 6025.13?

As a result of DHA-PM 6025.13, there are changes, though much has stayed the same. A great way to look at the changes is to review to the Top 10- Infographic in the MTF Commander / Director Toolkit found at [www.health.mil/CQM](http://www.health.mil/CQM).



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## When do I follow the DHA-PM 6025.13 and when do I follow my Service guidance?

Military Departments shall utilize the applicable or referenced DHA publications and in the absence of DHA publications continue to utilize existing military department policies until superseded by a DHA policy.

## How does CQM impact our patients and beneficiaries?

- CQM provides an organized structure for an integrated framework of programs to objectively define, measure, assure, and improve the quality of care in the MHS.
- Through CQM, the MHS affirms its unwavering commitment to quality of healthcare for our beneficiaries, joint healthcare teams, and Combatant Commands across the globe.

## Where can I find more information to help me implement the changes in my MTF?

You can find information and resources to assist in all aspects of learning, implementation, and sustainment of all things related to DHA-PM 6025.13 on the CQM SharePoint site. Visit [info.health.mil](http://info.health.mil) and click on the CQM Toolkit button.

