

THE ASSISTANT SECRETARY OF DEFENSE WASHINGTON, DC 20301-1200

OCT 17 1995

MEMORANDUM FOR:

SURGEON GENERAL OF THE ARMY SURGEON GENERAL OF THE NAVY SURGEON GENERAL OF THE AIR FORCE

SUBJECT: Implementation of Recommendations for Military Health Services System (MHSS) Tri-Service Work Groups and Committees

Representatives of the Deputy Assistant Secretaries of Defense (DASDs) and Defense Medical Information Management (DMIM) met on 24 August 1995 and made recommendations about the realignment, retention, and elimination of MHSS Tri-Service Work Groups and Committees (see <u>Attachment 1</u>: Summary Table of DASD Recommendations on Work Groups and Committees and see <u>Attachment 2</u>: Assignments of Work Groups and Committees to Executive Agents (EAs), by Service).

The TRICARE Executive Committee (TEC) reviewed and concurred with the DASD representatives' recommendations. The Army and the Navy recommended extending the suspense date and the Air Force recommended changing the word "cognizance" to "chairmanship" and subsequently agreed to the word "sponsorship" to more adequately reflect responsibility for each committee and workgroup. These recommendations have been incorporated.

All MHSS committees and workgroups will be sponsored by a DASD or a Deputy Surgeon General.

Please recharter the work groups and committees under your sponsorship (reference <u>Attachment 2</u>) November 1995. Those groups not rechartered by 30 November 1995 will be eliminated. A committee or work group designated for elimination can request to be rechartered by a DASD or a Deputy Surgeon General.

All charters must be reviewed by the TEC and approved by the Assistant Secretary of Defense (Health Affairs) (ASD(HA)). A sample charter is included as <u>Attachment 3</u>.

Please send your signed charters to the Executive Secretary of the TEC for inclusion on the TEC agenda for approval. After approval by the TEC, provide a copy of the charter to DMIM for updating its "MHSS Tri-Service"

Work Groups and Committees" database. My point of contact is CAPT Medhat Ashamalla, MC, USN, Defen	se
Medical Information Management.	

Thank you for your assistance and cooperation.

Educated D. Whates
Edward D. Martin, M.D.
Principal Deputy Assistant Secretary

HA POLICY 96-003

Attachments: As stated

Summary Table of DASD Recommendations on Work Groups and Committees

Recommendation	DASD(CS)	DASD(HB&P)	DASD(HSF)

Retain with New or Updated Charter Submitted by 15 Nov 95	1. Armed Forces Institute of Pathology Board of Governors (c) 2. Chiropractic Advisory Committee (c) 3. DoD Health Promotion Coordinating Committee (c) 4. Flag Officer Executive Committee on Organ and Tissue Donation and Transplantation (wg) 5. Laboratory Joint Group (wg)	1. Borrowed Military Manpower (wg) 2. Defense Health Program/Planning, Programming, and Budgeting System (wg) 3. Fixed Costs Associated with the Capitation Financing Model (wg) 4. How CHAMPUS Funds Should Be Allocated Within the Health Care Regions (wg) 5. Resource Analysis and Planning System (RAPS) (wg) 6. Resource Management Steering Group (c) 7. Review of Medical Tri-Service Counting of Workload & Facilities (wg) 8. Review of Medical Tri-Service Procurement (wg)	1. TRICARE Managed Care Support Financial Management Work Group (wg)
Retain Under Different DASD		1. Cost Modelling (wg) (to HSO&R)	
Eliminate by 30 Nov 95 if not Rechartered	1. Ambulatory Procedures Visits (wg) 2. DoD CEPRP Coding/ DRG Validation Study (Possibly Disability Council) (wg) 3. Joint Service Quality Management Committee (c) 4. Medical Digital Imaging System (Radiology) (wg) 5. Medical Outcomes	1. Environment & Occupational Health (wg)	1. TRICARE System Interoperability (wg)

Committee (c)
6. Radiology Proponent
Committee for Medical
Digital Imaging (MDIS)
(c)
7. Subcommittee on
Corporate Information
Management for
Occupational Health
and Safety (c)
8. Task Force on
Women's Health Issues
(wg)
9. Tri-Service
Biometrics Counterparts
and uniform
Biostatistical Utility (c)
10. Tri-Service Training
Committee (inactive) (c)
11. Persian Gulf
Veterans Flag Group
(wg)

Non-HA Entity

1. Accession Medical

Examination (wg)

2. Accession MedicalExamination Proponent(c)

3. DoD Ergonomics (wg)

4. DoD Hearing

Conservation (wg)

5. DoD Injury

Surveillance and

Prevention (wg)

6. DoD Interagency

Lead-Based Paint Task

Force (wg)

7. DoD Radiation

Research and Policy

(wg)

8. DoD Safety and

Occupational Health (c)

9. Laser System Safety

(wg)

10. Medical Evaluation

Board/Physical

1. CHCS Training (TRN) (wg) 1. CHCS Managed Care Program (MCP) (wg)

Functions Assumed by Executive Agents

2. CHCS Medical Records (MRC) (wg) 3. Surgeons General Pharmacy Specialty Advisors (c) 4. Pharmacy FPI (wg) 5. Dental Proponent Committee (c) 6. Dental Services FPI Work Group (wg) 7. CHCS Integration Committee (c) 8. CHCS Technical (TEC) (wg) 9. CHCS Functional Integration Team (wg) 10. CHCS Nursing (NRS) (wg) 11. CHCS Dietetics (DTS) (wg) 12. CHCS Data Administration (DA) (wg) 13. CHCS Patient Administration (PAD) (wg)

Retain with New or

Submitted by 15 Nov 95

Updated Charter

14. CHCS Providers
(PRV) (wg)
15. CHCS Patient
Appointment and
Scheduling (PAS) (wg)
16. CHCS Laboratory
(LAB) (wg)
17. CHCS Radiology
(RAD) (wg)
18. CHCS Pharmacy
(PHR) (wg)

1. TRICARE Readiness Executive Committee (TREC) (wg)

- 2. Joint Medical Oversight (wg)
- 3. Senior Officer (O-6)
 Working Group (c)
- 4. Theater Medical Information Project (wg)
- 5. Armed Services
 Blood Program Office,
 Blood Coordinating
 Committee (c)
- 6. Blood Management Users' Group (wg)
- 7. Inter-Service Training and Review Organization Medical Consolidation Review (wg)
- 8. Medical Expense and Performance Reporting System (wg)
- 9. Medical Facilities
 Acquisition &
 Maintenance Board (wg)
- 10. Medical Logistics
- Proponent (wg)
- 11. MHSS Health
- Facilities Steering
- Committee (c)
- 12. Space Planning Criteria Review Group
- (wg)
- 13. Third party

TRICARE
 Executive Committee
 (c)

- 2. MHSS Strategic Planning Committee (c)
- 3. Strategic Planning Work Group Subcommittee (wg)
- 4. Defense Medical Advisory Committee (c)

- 1. AIS Project Review Board (wg)
- 2. MHSS Information Management Proponent Committee (c)
- 3. Technical Integration Working Group (wg)

Retain Under Different DASD	Collection/Uniform Business Office (UBO) (wg) 14. Uniform Biometrics Utility (UBU) (wg) 1. TRICARE Executive Committee (c) (to	
	P&PC)	
Eliminate by 30 Nov 95 if not Rechartered	1. Access Measurement Standards (wg) 2. ADS Implementation Committee, CIW Working Group (c) 3. Ambulatory Data Collection Work Group (wg) 4. Biometrics Work Group (wg) 5. Cardiology (wg) 6. Cardiology Functional Proponent Committee (c) 7. CHAMPUS Data Integration (wg) 8. Corps Level TMIP (wg) 9. Defense Vision Information System Functional Proponent Committee (c) 10. DoD Mortuary Affairs Program (wg) 11. DoD Vision Services Functional Process Improvement (wg) 12. Economic Procedures Manual (wg) 13. Facilities Inventory (wg) 14. IIFEA Proponent Subcommittee (c) 15. Integrated Inpatient FEA/Clinical	1. DoD TRICARE Internet Communications System Proponency Committee (wg) 2. MHSS Life Cycle Integration Group (wg) 3. Military Health Data Users Group (wg) 4. TRICARE Information Management and Planning Subgroup (TIMPS) (wg)
	Information System	

(wg) 16. Joint Service Patient Administration (wg) 17. MASCAL/Mobile CHCS (wg) 18. Medical Surveillance for Department of Defense Deployments (wg) 19. Nutrition Management (wg) 20. Nutrition Management Information System / (NMIS) Functional **Proponency Committee** (c) 21. Patient Administration/ Readiness (wg) 22. Patient Administration/ Readiness Proponent Subcommittee (c) 23. Patient Management in Multiple In-Patient Facilities (wg) 24. Patient Management Proponent Subcommittee (c) 25. Personnel/CHCS Prototype (wg) 26. Regulate and Evacuate (wg) 27. Tri-Service Facility Manager's Course **Development Group** (wg) 28. TRICARE **Enrollment Committee** (c)

Non-HA Entity	1. DoD Medical Records Retirement & Retrieval (wg) 2. Field Medical MARC (wg) 3. VA Medical Records Transfer (wg)	
Functions Assumed by Executive Agents	1. CEIS Functional Proponent Committee (c) 2. Corporate Executive Information System (CEIS) (wg)	1. CIW Management Steering Committee (c) 2. Clinical Collaboration Working Group (wg)

Assignments of Work Groups and Committees to Executive Agents, by Service

Work Group/ Committee Status	Army	Navy	Air Force
Assigned to an	1. CEIS Functional		
Executive Agent	Proponent Committee		
	(c)		
	2. Corporate		
	Executive Information		
	System (CEIS) (wg)		
	3. Surgeons General		
	Pharmacy Specialty		
	Advisors (c)		
	4. Pharmacy FPI (wg)		

Pending Assignment	1. CHCS Training (TRN)	1. CIW Management
to an Executive Agent	(wg)	Steering Committee (c)
	2. CHCS Medical Records	2. Clinical Collaboration
	(MRC) (wg)	Working Group (CIW)
	3. CHCS Integration	(wg)
	Committee (c)	
	4. CHCS Technical (TEC)	
	(wg)	
	5. CHCS Functional	
	Integration Team (wg)	
	6. CHCS Nursing (NRS)	
	(wg)	
	7. CHCS Dietetics (DTS)	
	(wg)	
	8. CHCS Data	
	Administration (DA) (wg)	
	9. CHCS Patient	
	Administration (PAD) (wg)	
	10. CHCS Providers (PRV)	
	(wg)	
	11. CHCS Patient	
	Appointment and	
	Scheduling (PAS) (wg)	
	12. CHCS Laboratory	
	(LAB) (wg)	
	13. CHCS Radiology	
	(RAD) (wg)	
	14. CHCS Pharmacy (PHR)	
	(wg)	
	15. CHCS Managed Care	
	Program (MCP) (wg)	
	16. Dental Proponent	
	Committee (c)	
	17. Dental Services FPI	
	Work Group (wg)	

Military Health Services System Health Facilities Steering Committee

1. **PURPOSE:** The Military Health Services System (MHSS) Health Facilities Steering Committee will serve as an executive-level body responsible for developing and recommending the strategic direction for health facility life-cycle management within the architecture of the TRICARE Program. Within 90 days of its first meeting, the committee is charged to deliver a strategy outline that gives maximum flexibility in the acquisition and maintenance of facilities. The committee is charged further to evaluate the appropriateness of the distribution of MILCON functions and authorities.

The strategic plan will address, but not be limited to, the following:

- Strategic investment life-cycle management process
- Innovative design procurement, and construction methodologies
- Health facility life-cycle management and regional health care delivery plan integration
- Legislative and regulatory activities
- Medical military construction program validation
- New technologies in support of the practice of medicine
- Industry bench marking
- Metrics to evaluate the effectiveness of the health facilities life-cycle management process

2. MEMBERSHIP

DASD (HSO&R) Chair

Deputy Navy Surgeon General Member

Deputy Army Surgeon General Member

Deputy Air Force Surgeon General Member

DASD (HSF)

Non-voting Member

Non-voting Member

Non-voting Member

Non-voting Member

Non-voting Member

Non-voting Member

RMO Consultant
DMIM Consultant
DMFO Recorder

Others as required

3. **MEETINGS**: Meetings will be held at the call of the Chairman. Minutes will be prepared by the Recorder, approved by the Chairman, and distributed to the Members.

The committee will have sufficient scope and empowerment to look to the future and define improved processes for the acquisition and maintenance of health care treatment facilities. The committee will also sponsor the

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Health Facilities Life-Cycle management Program (medical military construction, real property maintenance, etc.) in the Planning, Programming, and Budget System cycle.

In the even that a principal committee member is unable to attend, the alternate representative will be a General Officer (Flag Officer or General Officer equivalent) in order to exercise the voting privilege.

- 4. **DELIVERABLES** (Description, when due, to whom due).
- 5. **DURATION OF COMMITTEE/WORK GROUP** (Sunset Clause).

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Last update: 12/21/1998