

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

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Naval Branch Health Clinic (NBHC) Rancho Bernardo  
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

<b>Site</b>	Naval Branch Health Clinic (NBHC) Rancho Bernardo
<b>Decision</b>	The Medical Home Port Team transferred from NBHC Rancho Bernardo to NBHC Miramar on June 1, 2018. Operations at NBHC Rancho Bernardo stopped on June 1, 2018 including the Pharmacy, Lab, and Physical Therapy services. The 703 decision supports the 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

Naval Medical Center (NMC) San Diego is made up of nine (9) Primary Care sites for family members and eight (8) medical clinics serving AD personnel. NMC San Diego's top priority is providing the safest, highest quality patient-centered medical care for veterans, service members, and their families. NMC San Diego offers both patient services and Graduate Medical Education (GME) including 24 Graduate Medical and Dental Programs and affiliation with 19 civilian nursing schools.

## Criteria Matrix

Criteria	Rating or Value <sup>1</sup>	Key Takeaways or Findings	Use Case Package
Mission Impact	N/A	<ul style="list-style-type: none"> <li>No change, NBHC Rancho Bernardo is closed</li> </ul>	Section 1.0
Network Assessment	N/A	<ul style="list-style-type: none"> <li>Not conducted – no change, NBHC Rancho Bernardo is closed</li> </ul>	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 on the site visit.

	Risk/Concerns	Mitigating Strategy
1	No risks or concerns have been identified as NBHC Rancho Bernardo has already closed.	<ul style="list-style-type: none"> <li>N/A</li> </ul>

## Next Steps

No immediate next steps are required as NBHC Rancho Bernardo has already closed.

<sup>1</sup> See Appendix B for Criteria Ratings Definitions

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

Naval Medical Center (NMC) San Diego offers both patient services and Graduate Medical Education (GME). Over 250,000 San Diego residents are eligible for care with close to 100,000 enrolled beneficiaries. The NMC San Diego staff includes more than 6,500 military and civilian professionals. NMC San Diego's top priority is providing the safest, highest quality patient-centered medical care for veterans, service members, and their families. There are nine (9) Primary Care sites for family members and eight (8) medical clinics serving active duty personnel.

### 1.1. Installation Description

<b>Name</b>	Naval Medical Center (NMC) San Diego
<b>Location</b>	San Diego, California
<b>Mission Elements<sup>2</sup></b>	<p>NMC San Diego hosts important educational, clinical and research programs. NMC San Diego has 24 Graduate Medical and Dental Programs and is affiliated with 19 civilian nursing schools. NMCS D personnel deploy to Iraq, Afghanistan, Kuwait, Djibouti, and aboard the United States Naval Ship (USNS) Mercy (T-AH-19) in support of United States (U.S.) Military Hospital Kuwait, the I and III Marine Expeditionary Forces, humanitarian missions, and as individual augmentees. NMC San Diego has the only Navy Medicine amputee center in the Western Pacific.</p> <p>Patient services include primary and Specialty Care, obstetrics and gynecology, mental health, dental, laboratory, and pharmacy. NMC San Diego offers more than 100 specialty and subspecialty Care services<sup>3</sup>.</p>
<b>Mission Description</b>	<p>Our Mission</p> <ul style="list-style-type: none"> <li>• Prepare to deploy in support of operational forces</li> <li>• Deliver quality health services</li> <li>• Shape the future of military medicine through education, training and research</li> </ul>
<b>Regional Readiness/ Emergency Management</b>	Unknown
<b>Base Active or Proposed Facility Projects</b>	Unknown
<b>Base Mission Requirements</b>	<p>Our Vision</p> <p>Be the nation's premier Military Medical Center, providing world-class care; anytime, anywhere!</p> <p>Guiding Principles</p> <p>We believe:</p> <ul style="list-style-type: none"> <li>• Staff are our most important resource</li> <li>• Patients are our focus</li> <li>• Success is judged by those we serve</li> <li>• Service, professionalism, respect, teamwork, safety, and compassion are valued</li> <li>• Building a healthy force, preventing casualties, and casualty care are the cornerstones of our practice</li> <li>• Quality healthcare is centered on families and communities</li> <li>• Structured and disciplined resource decisions lead to sound business practices</li> <li>• Communication, coordination, and cooperation are critical to our success</li> <li>• Continuous improvement is essential to quality healthcare and patient safety</li> </ul>

### 1.2. MTF Description

Operations at Naval Branch Health Clinic (NBHC) Rancho Bernardo stopped on June 1, 2018, including the Pharmacy, Lab, and Physical Therapy services. The Medical Home Port Team transferred from NBHC Rancho Bernardo to NBHC Miramar. The NBHC Rancho Bernardo offered comprehensive Primary Care services to non-Active Duty (AD) patients enrolled in TRICARE Prime. NBHC Rancho Bernardo was part of NMC San Diego.

<sup>2</sup> <https://www.med.navy.mil/sites/nmcsd/pages/command/command-about-us.aspx>

<sup>3</sup> <https://www.med.navy.mil/sites/nmcsd/Pages/Patients/branch-and-dental-clinics.aspx>

<b>Name</b>	NBHC Rancho Bernardo San				
<b>Location</b>	Diego, California				
<b>Market<sup>4</sup></b>	San Diego, California				
<b>Mission Description</b>	N/A				
<b>Vision Description</b>	N/A				
<b>Goals</b>	N/A				
<b>Facility Type</b>	N/A				
<b>Square Footage</b>	N/A				
<b>Deployable Medical Teams</b>	N/A				
<b>MTF Active or Proposed Facility Projects</b>	N/A				
<b>Performance Metrics</b>	See Volume II, Part A for Partnership 4 Improvement (P4I) measures and Part B Joint Outpatient Experience Survey - Consumer Assessment of Health Providers and Systems (JOES-C) data				
<b>Fiscal Year (FY) 2018 Assigned Full-time Equivalents (FTEs)</b>		<b>Civilian</b>	<b>Contractor</b>	<b>Military</b>	<b>Total</b>
<b>Healthcare Services</b>	<b>Medical</b>	N/A	N/A	N/A	<b>N/A</b>
	Outpatient key product lines <sup>5</sup> <ul style="list-style-type: none"> <li>- Primary Care</li> </ul> Health Promotion Classes <ul style="list-style-type: none"> <li>- Tobacco cessation</li> <li>- Stress reduction</li> <li>- Weight management</li> <li>- Disease management classes               <ul style="list-style-type: none"> <li>o Diabetes management</li> <li>o High blood pressure (hypertension) management</li> <li>o High cholesterol class</li> </ul> </li> </ul> Support services <ul style="list-style-type: none"> <li>- Mammography</li> <li>- Laboratory</li> <li>- Pharmacy</li> </ul>				

<sup>4</sup> Defined by FY17 NDAA Section 702 Transition

<sup>5</sup> <https://www.med.navy.mil/sites/nmcsd/Pages/Patients/NBHC-RB-Medical.aspx>

## 2.0. Healthcare Market Surrounding the MTF

<b>Description</b>	Operations at NBHC Rancho Bernardo stopped on June 1, 2018, including the Pharmacy, Lab and Physical Therapy services.
<b>Top Hospital Alignment</b>	Not conducted – no change, NBHC Rancho Bernardo is closed.
<b>Likelihood of Offering Primary Care and Specialty Services to TRICARE Members<sup>6</sup></b>	Not conducted – no change, NBHC Rancho Bernardo is closed.

### 2.1. DHA TRICARE Health Plan Network Review

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Not conducted – no change, NBHC Rancho Bernardo is closed.

### 2.2. Network Insight Assessment Summary (Independent Government Assessment)

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Not conducted – no change, NBHC Rancho Bernardo is closed.

<sup>6</sup> 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

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## Appendix A: Use Case Assumptions

### General Use Case Assumptions

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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 2000<sup>7</sup>

<sup>7</sup> 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>
<b>Ambulatory Care</b>	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)
<b>Beneficiary</b>	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)
<b>Critical Access Hospital Designation</b>	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)
<b>Direct Care</b>	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 <a href="https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf">https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf</a> .)
<b>Eligible</b>	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)
<b>Enrollee</b>	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
<b>JOES</b>	Joint Outpatient Experience Survey (Source: health.mil)
<b>JOES-C</b>	Joint Outpatient Experience Survey – Consumer Assessment of Health Providers and Systems (Source: health.mil)
<b>Managed Care Support Contractor (MCSC)</b>	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)
<b>Network</b>	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)
<b>Occupational Therapy</b>	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)
<b>Remote Overseas</b>	TRICARE Prime Remote Overseas is a managed care option in designated remote overseas locations: Eurasia-Africa, Latin America and Canada, Pacific (Source: tricare.mil)
<b>P4I</b>	A set of MHS clinical, quality, safety and readiness performance measures (Partnership for Improvement)
<b>Panel</b>	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)
<b>Plus</b>	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)
<b>Prime</b>	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)
<b>Purchased Care</b>	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 <a href="https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf">https://apps.dtic.mil/dtic/tr/fulltext/u2/1056374.pdf</a> .)
<b>Reliant</b>	Active Duty Service Members who are not enrolled to TRICARE Prime (e.g. students and recruits) (Source: MHS Modernization Study, Feb 2016)
<b>Value Based Payment</b>	<b>Value Based Payment (VBP)</b> 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

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- Part A P4I Measures
- Part B JOES-C 12-month Rolling Data