

Military Medical Care

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National Defense Authorization Act (NDAA) 2007

SEC. 734

“Develop a fully integrated program on disease and chronic care management for the military health care system that provides ...uniform policies and practices on disease management and chronic care management throughout that system...”

National Defense Authorization Act (NDAA) 2007

- Meet nationally recognized accreditation standards
 - Disease Management Association of America Components (e.g. population identification processes and evidence-based practice guidelines)
- Specify outcome measures and objectives
 - Capture and report data across the services AND the purchased care arenas in order to provide the Congress comprehensive DM reports
- Include strategies for all beneficiaries including Medicare
- Conform to HIPAA laws and regulations

Source: NDAA 2007 Section 734 (c)

DoD Health Care - Combining Military-Unique Programs, Public Health Functions and Health Plan Best Practices

- Responsibility for
 - Comprehensive portfolio of health programs to support the national defense strategy and
 - To improve the health of military communities.

DoD Health Care - Combining Military-Unique Programs, Public Health Functions and Health Plan Best Practices

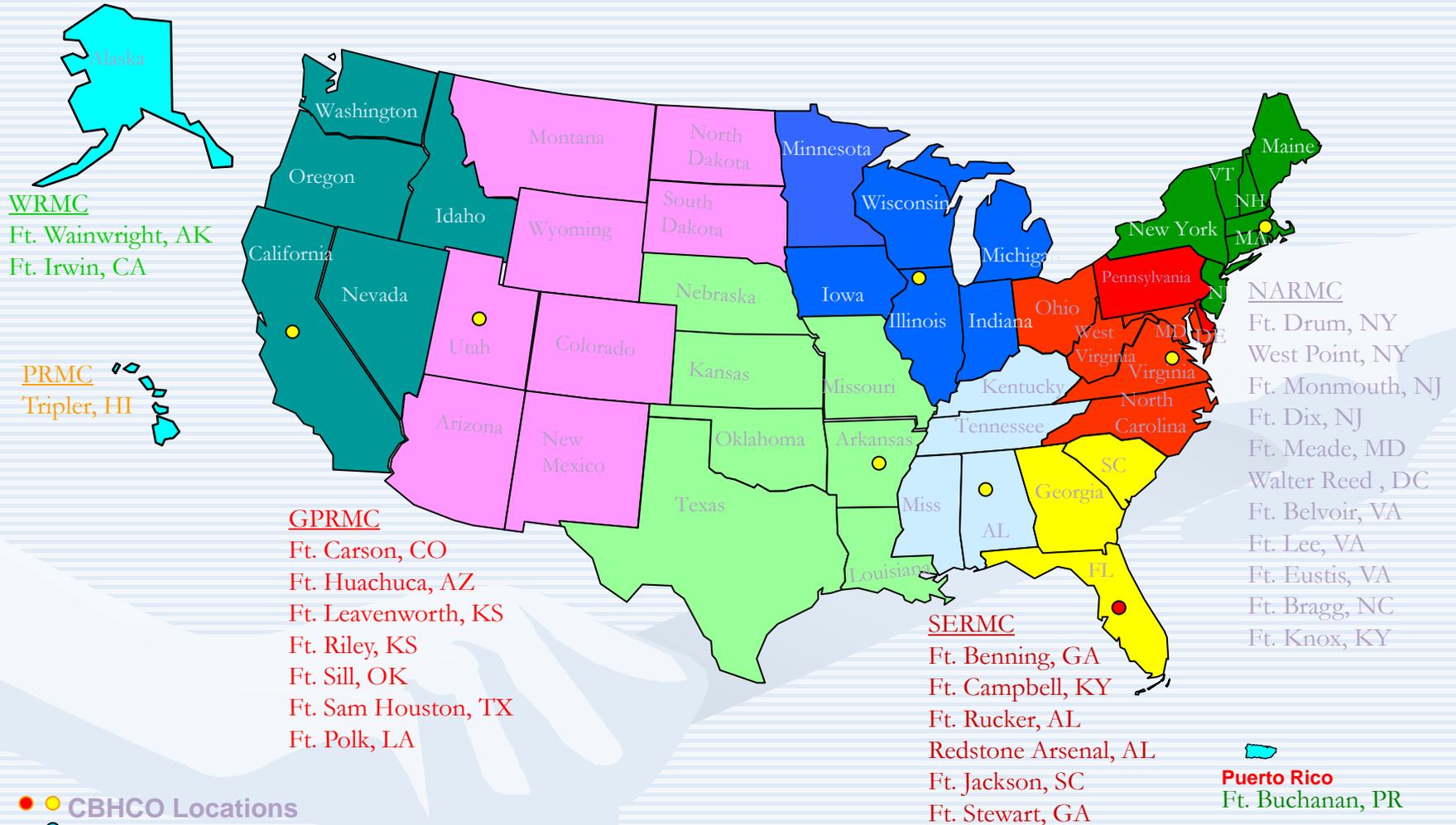
- **Diverse programs ranging from**
 - Traditional health care services (hospitals and clinics)
 - Environmental health
 - Disease surveillance in remote locations
 - Health protection and health promotion
 - Treatment and rehabilitative services
 - Assessing and monitoring health status

Military Health Care System

Strives daily to simultaneously accomplish five interconnected goals:

- A fit, healthy and protected force
- Reduced death, injuries and diseases during military operations
- Utmost satisfaction of beneficiaries
- Creation of healthy communities
- Effective management of health care costs

MEDCOM MTFs and CBHCOs



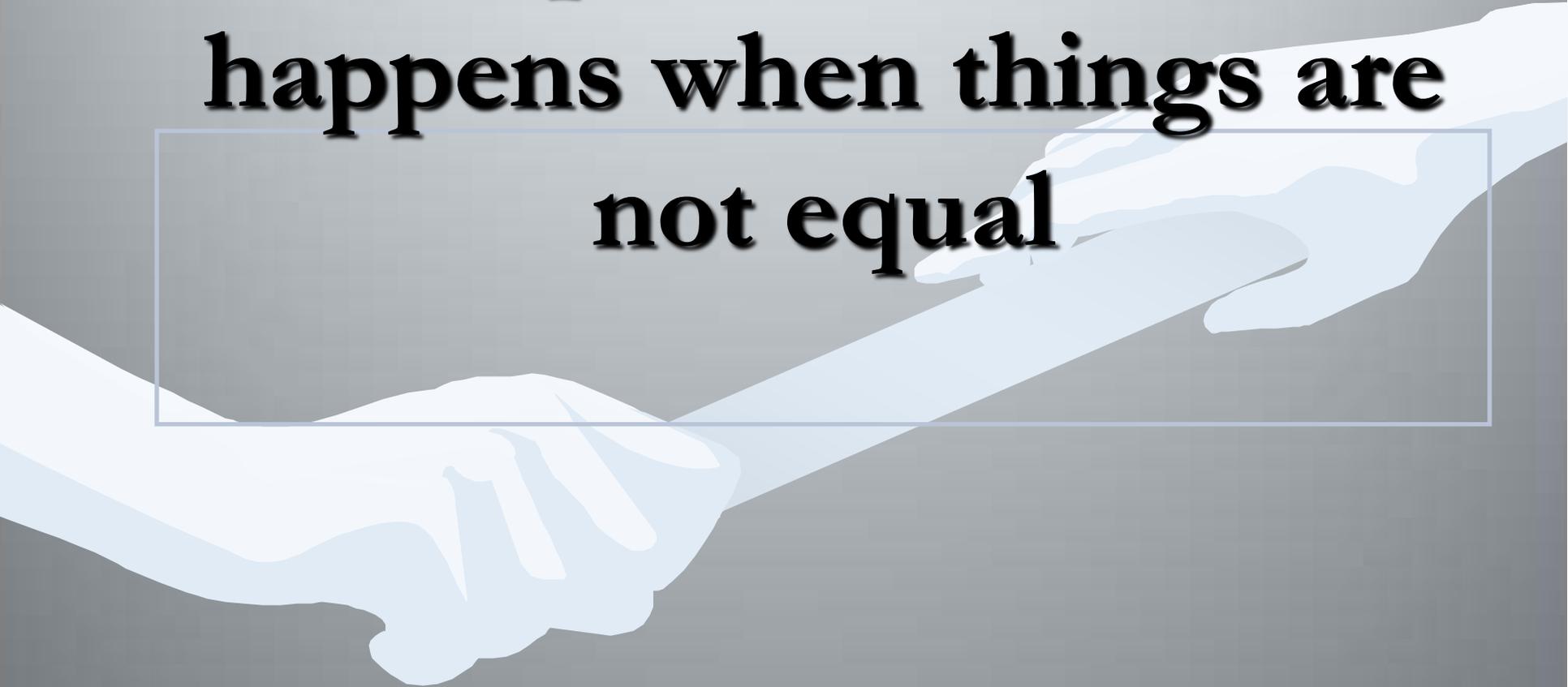
● CBHCO Locations
● Hybrid CBHCOs*

* AK, HI and PR to run CBHCO-like operations from local garrisons & MTFs

Military Treatment Facilities



**Disparities...what
happens when things are
not equal**

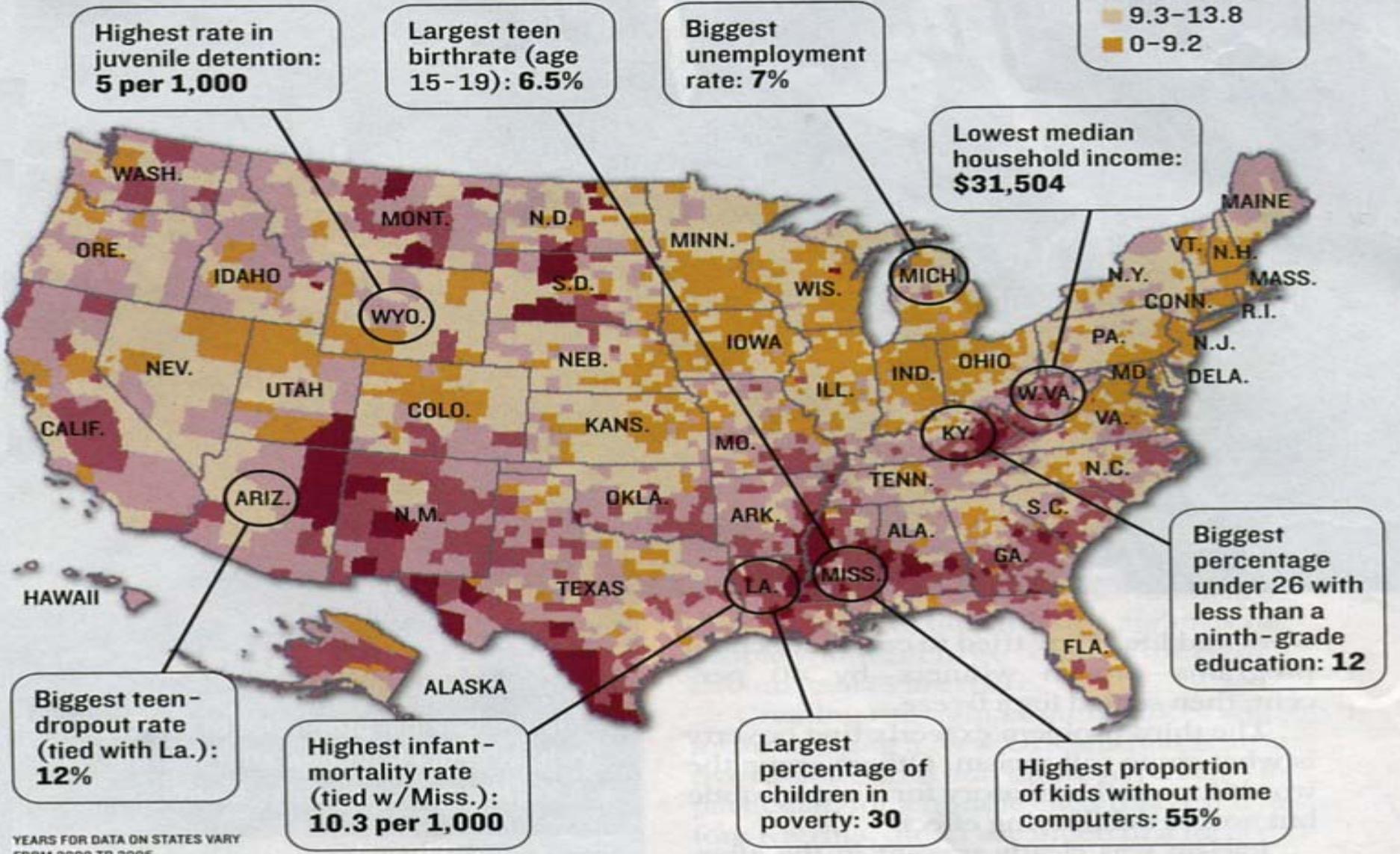
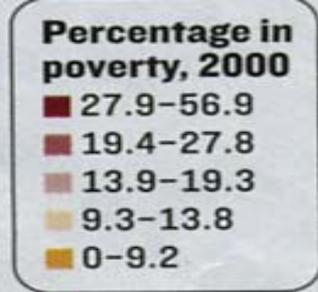


Health Disparities in the US

- Have existed for decades
- Occur across the lifespan
- Encompass physical and behavioral health
- Involve a variety of clinical and scientific disciplines
- Demands cultural proficiency to manage
- Will need a diverse and well trained workforce to make changes
- Require focused efforts to address effectively

The Geography of Destitution

The country is crisscrossed by poverty belts, each defined by distinct ethnic groups. Blacks populate the Deep South, and whites dominate Appalachia.



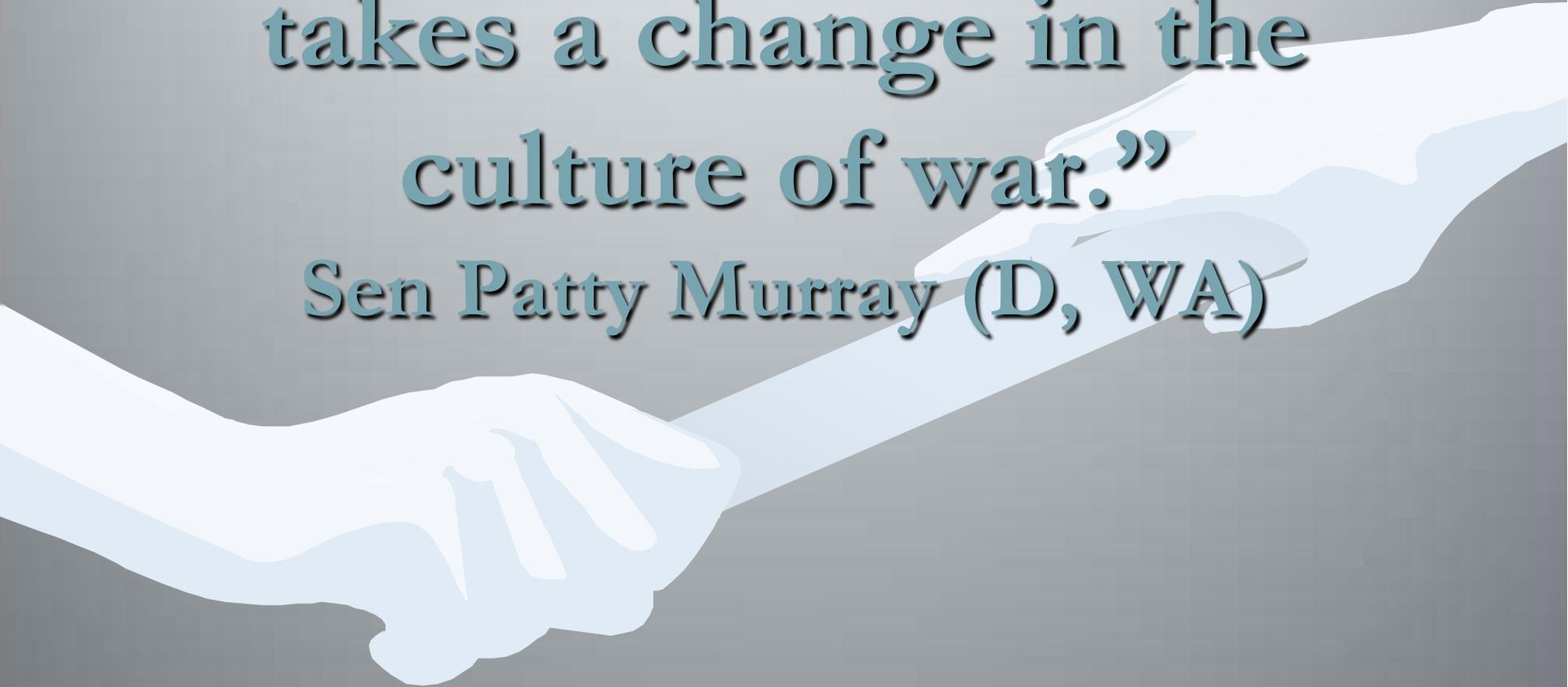
YEARS FOR DATA ON STATES VARY FROM 2000 TO 2005

Military Health Care

- Goal of standardizing care for service members and families
- Eliminating disparities within the force – Henley and Kugler’s work
- Partnering with civilian clinicians when needed
- Taking the lead on military medicine – not just medicine in the military

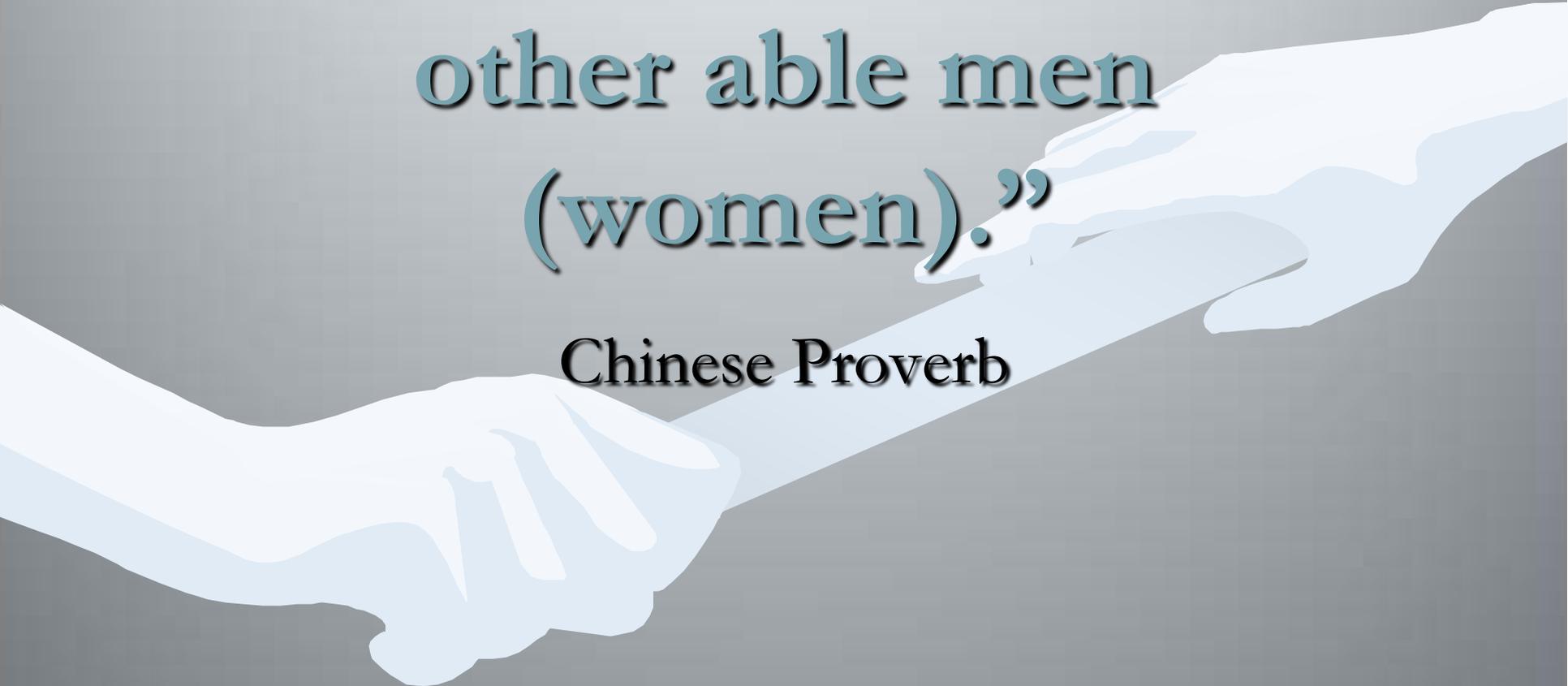
**“It takes leadership and it
takes a change in the
culture of war.”**

Sen Patty Murray (D, WA)



**“Behind an able man
(woman) there are always
other able men
(women).”**

Chinese Proverb



USU

- A worldwide reputation as a center of excellence for military and public health professions education and research.
- Unique programs related directly to force health protection, tropical diseases, disaster medicine, military and public health medical readiness and adaptation to extreme environments.
- Commitment to preparing outstanding scientists and health care practitioners for careers in service to the nation

Teams

- **Involve more people, thus affording more resources, ideas, and energy than would an individual.**
- **Maximize a leader's potential and minimize her weaknesses. Strengths and weaknesses are more exposed in individuals.**
- **Provide multiple perspectives on how to meet a need or reach a goal, thus devising several alternatives for each situation.**
- C. G. Wilkes in John C. Maxwell, *Equipping 101*. Thomas Nelson Publishers, Nashville, 2003.p.5-6

Teams

- **Share the credit for victories and the blame for losses. This fosters genuine humility and authentic community.**
 - **Keep leaders accountable for the goal.**
 - **Can simply do more than an individual.**
-
- C. G. Wilkes in John C. Maxwell, *Equipping 101*. Thomas Nelson Publishers, Nashville, 2003.p.5-6

How to Invest in Your Team

- **Make the decision to build a team – this starts the investment in the team**
- **Gather the best team possible – this elevates the potential of the team**
- **Pay the price to develop the team – this ensures the growth of the team**
- **Do things together as a team – this provides community for the team**
- John C. Maxwell, *Equipping 101*. Thomas Nelson Publishers, Nashville, 2003,p.16-21

How to Invest in Your Team

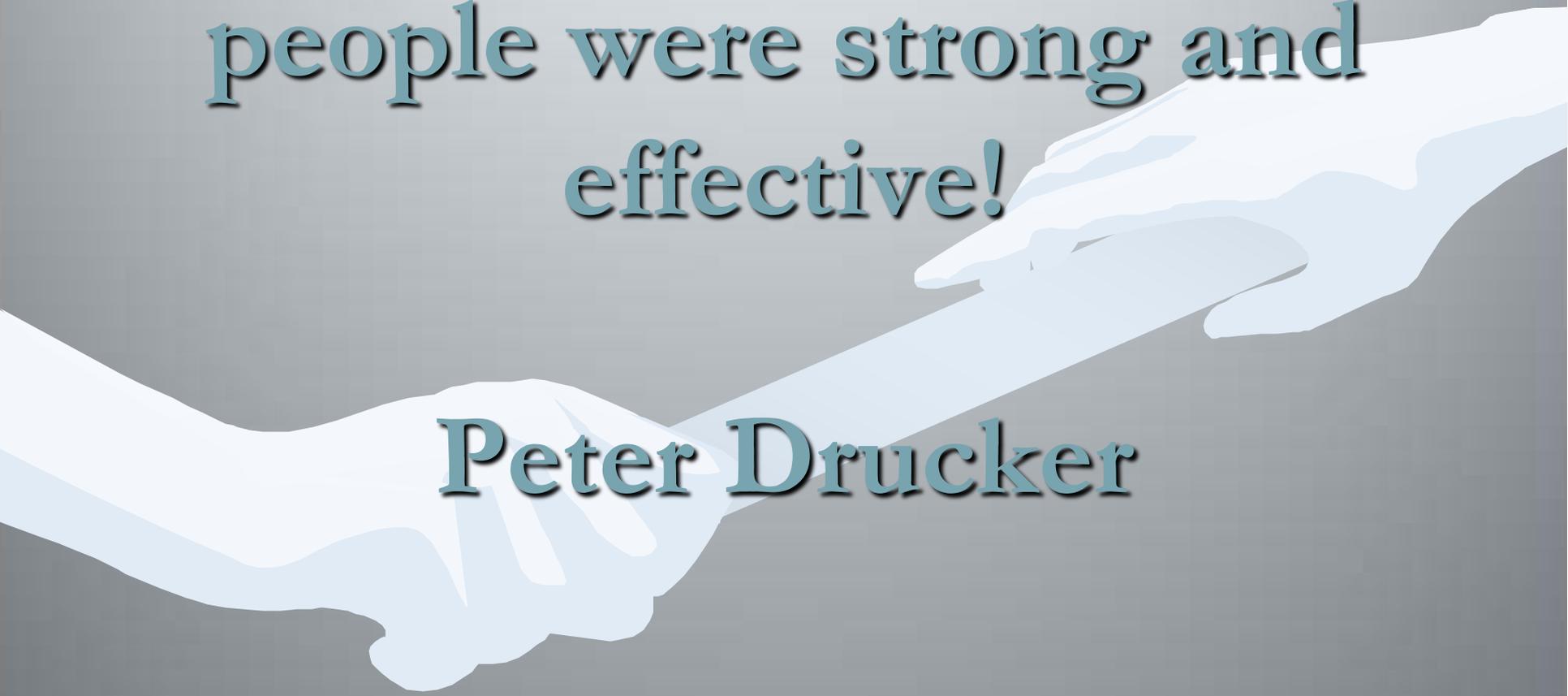
- **Empower team members with responsibility and authority – this raises up leaders for the team**
- **Give credit for success to the team – this lifts the morale of the team**
- **Watch to see that the investment in the team is paying off – this brings accountability to the team**
- John C. Maxwell, *Equipping 101*. Thomas Nelson Publishers, Nashville, 2003,p.16-21

Everything rises and fall
on leadership



**No executive has ever
suffered because his
people were strong and
effective!**

Peter Drucker



Great leaders seek out
and find potential leaders,
then transform them into
good leaders.



How are Your Values Seen?

- “In the context of organizational and professional culture, values are embedded in the strategies and tactics through which the job gets done. When there is a contradiction between the stated values and the behaviors, we believe the behaviors. Values lead to management style and leadership preferences.”
- Robinson-Walker C. *Women and Leadership in Health Care: The Journey to Authenticity and Power*. Jossey-Bass Publishers. San Francisco. 1999.

Special Report

THE OTHER AMERICA



LEFT BEHIND

An elderly woman awaits evacuation. TV dislikes images of the poor, but they were omnipresent during the coverage of Katrina.

Newsweek, September 19, 2005

September 11, 2001



A stylized illustration of two hands shaking, rendered in white and light blue tones against a light blue background. The hands are positioned horizontally, with the left hand on the left and the right hand on the right, meeting in the center. The fingers are slightly curled, suggesting a firm grip or agreement. The overall style is clean and modern.

**Military Health Care –
Is About Family**