

**Defense Health Program
Fiscal Year (FY) 2019 Budget Estimates
Operation and Maintenance
Medical Workload Data - DHP Summary**

	FY 2017	FY 2018	FY 2019	FY 2017-2018	FY 2018-2019
<u>Population - Eligible Beneficiaries, CONUS</u>	<u>Actuals</u>	<u>Estimate*</u>	<u>Estimate*</u>	<u>Change</u>	<u>Change</u>
Active Duty **	1,388,784	1,395,350	1,401,087	6,566	5,737
Active Duty Family Members	1,836,872	1,846,065	1,855,215	9,193	9,150
Retirees	1,042,769	1,038,531	1,034,255	-4,238	-4,276
Family Members of Retirees	2,410,939	2,405,217	2,399,445	-5,722	-5,772
Subtotal Eligible	6,679,364	6,685,162	6,690,002	5,798	4,839
Medicare Eligible Beneficiaries ***	<u>2,320,014</u>	<u>2,341,191</u>	<u>2,360,784</u>	<u>21,177</u>	<u>19,593</u>
Total Average Eligible Beneficiaries	8,999,378	9,026,353	9,050,786	26,975	24,432
<u>Population - Eligible Beneficiaries, OCONUS</u>					
Active Duty **	158,824	159,694	160,417	870	723
Active Duty Family Members	132,849	133,411	134,086	562	675
Retirees	21,739	21,650	21,565	-89	-84
Family Members of Retirees	54,588	54,477	54,372	-111	-106
Subtotal Eligible	368,000	369,231	370,440	1,231	1,209
Medicare Eligible Beneficiaries	<u>38,235</u>	<u>38,558</u>	<u>38,859</u>	<u>323</u>	<u>302</u>
Total Average Eligible Beneficiaries	406,235	407,789	409,299	1,554	1,510
<u>Population - Eligible Beneficiaries, Worldwide</u>					
Active Duty **	1,547,608	1,555,044	1,561,504	7,436	6,460
Active Duty Family Members	1,969,721	1,979,475	1,989,301	9,754	9,825
Retirees	1,064,508	1,060,180	1,055,820	-4,328	-4,360
Family Members of Retirees	<u>2,465,527</u>	<u>2,459,694</u>	<u>2,453,817</u>	<u>-5,833</u>	<u>-5,878</u>
Subtotal Eligible	7,047,364	7,054,394	7,060,442	7,030	6,048
<u>Medicare Eligible Beneficiaries:</u>					
Active Duty Family Members	5,397	5,406	5,424	9	18
Guard/Reserve Family Members	1,490	1,512	1,529	22	17
Eligible Retirees	1,137,657	1,149,710	1,160,524	12,053	10,814
Eligible Family Members of Retirees ****	726,711	734,302	741,120	7,591	6,819
Survivor	484,429	486,254	488,480	1,825	2,226
Other	2,565	2,565	2,565	0	0
Total Medicare Eligible Beneficiaries	<u>2,358,249</u>	<u>2,379,749</u>	<u>2,399,643</u>	<u>21,500</u>	<u>19,894</u>
Total Average Eligible Beneficiaries	9,405,613	9,434,143	9,460,085	28,530	25,942

Notes:

1. FY 2018 population data has been updated based upon FY 2017 actuals and revised projected beneficiary populations. The FY 2018 Budget Request reflected an estimate of 9,476,320 comprised of 1,579,128 Active Duty (AD); 2,036,545 Dependents AD; 1,058,826 Eligible Retirees; 2,431,865 Eligible Dependents of Retirees; and 2,399,955 Medicare Eligibles.
2. (*) FY 2018 and FY 2019 Estimates are projected numbers of MHS eligible beneficiaries and are based on (a) future Budget End Strengths of Active Duty and Active Guard/Reserve members and (b) the DoD's Actuary's projection of retirees.
3. (**) Active Duty and Active Duty Guard/Reserve beneficiaries are excluded from being counted as Medicare Eligible.
4. (***) The US "Medicare Eligible Beneficiaries" are defined as MERHCF beneficiaries: Active Duty Family Members, Guard/Reserve Family Members, Eligible Retirees, Eligible Family Members of Retirees, Inactive Guard/Reserve, Inactive Guard/Reserve Family Members, Survivors, and Others.
5. (****) The Worldwide "Eligible Family Members of Retirees" are defined as MERHCF beneficiaries: Family Members of Retirees, Inactive Guard/Reserves, and Inactive Guard/Reserve Family Members.

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Operation and Maintenance
Medical Workload Data - DHP Summary**

6. Numbers may not sum to totals due to rounding.

7. USFHP enrollees who are also Medicare Eligible are shown in Eligible Beneficiaries, not under Medicare Eligible Beneficiaries

	<u>FY 2017</u> <u>Actuals</u>	<u>FY 2018</u> <u>Estimate</u>	<u>FY 2019</u> <u>Estimate</u>	<u>FY 2017-2018</u> <u>Change</u>	<u>FY 2018-2019</u> <u>Change</u>
<u>Enrollees - Direct Care</u>					
TRICARE Region - North	940,584	na	na	-940,584	0
TRICARE Region - South	928,430	na	na	-928,430	0
TRICARE Region - East	na	1,884,169	1,886,143	1,884,169	1,974
TRICARE Region - West	970,537	975,502	984,193	4,965	8,691
TRICARE Region - Europe	137,175	137,560	137,609	385	49
TRICARE Region - Pacific	213,651	225,268	224,895	11,617	-373
TRICARE Region - Latin America	3,959	4,520	4,523	561	3
Alaska	59,432	59,272	59,272	-160	0
Sub-Total CONUS Regions	2,839,551	2,859,671	2,870,336	20,120	10,665
Sub-Total OCONUS Regions	<u>414,216</u>	<u>426,619</u>	<u>426,298</u>	<u>12,403</u>	<u>-321</u>
Total Direct Care Enrollees	3,253,766	3,286,290	3,296,634	32,523	10,344

Source: Service Medical Departments Business Plans

Enrollees are only TRICARE PRIME Enrollees enrolled to a military treatment facility.

Excludes "Plus" empaneled and other TRICARE space available users.

Effective January 1, 2018, TRICARE North and South Regions combined to form TRICARE East in accordance with the 2017 National Defense Authorization Act.

	<u>FY 2017</u> <u>Actuals</u>	<u>FY 2018</u> <u>Estimate</u>	<u>FY 2019</u> <u>Estimate</u>	<u>FY 2017-2018</u> <u>Change</u>	<u>FY 2018-2019</u> <u>Change</u>
<u>Enrollees - Managed Care Support Contract*</u>					
TRICARE Region - North	321,549	na	na	-321,549	0
TRICARE Region - South	473,111	na	na	-473,111	0
TRICARE Region - East	na	780,000	780,000	780,000	0
TRICARE Region - West	322,645	317,000	317,000	-5,645	0
Total MCS Contracts	1,117,305	1,097,000	1,097,000	-20,305	0
TRICARE Region - Overseas-Europe, Pacific, Latin America	17,875	24,800	24,800	6,925	0
Total MCS Contracts	1,135,180	1,121,800	1,121,800	-13,380	0

*Note: (1) Prime (no TFL) enrollment to Managed Care Contractor (not Military Treatment Facility--see above) as of October of Fiscal Year--Source M2 (DEERS). (2) Current TRICARE contract (Dec 2017) has three regions and overseas. New contract (Jan 2018) has two regions and overseas. (3) Overseas increases by 4,780 FY 17 to FY 18 due to TOP East Europe (Operation Atlantic Resolve) enrollment.

<u>Infrastructure</u>					
Inpatient Facilities	51	51	51	0	0
Medical Clinics	382	376	376	-6	0
Dental Clinics	247	247	247	0	0
Veterinary Clinics	251	251	251	0	0

**Defense Health Program
Fiscal Year (FY) 2019 Budget Estimates
Operation and Maintenance
Medical Workload Data - DHP Summary**

Notes:

1. FY 2018 medical and dental clinics have been updated based upon the actual number of activated and deactivated facilities. The FY 2018 Budget Request reflected an estimate of 380 medical clinics and 248 dental clinics in FY 2018.
2. Inpatient Facilities: No net change. In FY 2018, Navy converted medical clinic to a hospital at Marine Corps Air Station Iwakuni, Japan. Air Force converted one hospital to a medical clinic at Mountain Home Air Force Base, ID.
3. Medical Clinics: In FY 2017, Army added two medical clinics at Joint Base Lewis McChord, WA; one medical clinic at Camp Robinson, AR; one medical clinic at Fort Drum, NY; one medical clinic at Fort Bliss, TX; one medical clinic at Fort Pickett, VA; and one medical clinic at the Army Health Center, Monterey, CA. The Army deactivated one medical clinic at Ft AP Hill, VA; two medical clinics at Ft Hood, TX; and one medical clinic at Fort Benning, GA. The Navy added one medical clinic in Suffolk, VA. The Air Force deactivated one medical clinic at Tyndall AFB, FL and one medical clinic at Joint Base Lewis McChord. In FY 2018, Navy converted one medical clinic to a hospital at Marine Corps Air Station, Iwakuni, Japan. Air Force converted one hospital to a medical clinic at Mountain Home Air Force Base, Idaho. Air Force added one medical clinic at Tinker Air Force Base, OK and one medical center at Moody Air Force Base, GA. Air Force deactivated eight medical clinics: two at Hurlburt Field, FL; one at Eglin Air Force Base, FL; one at Fort Benning, GA; one at Pope Joint Base, NC; one at Kadena Air Base, Japan; one at Mildenhall, England; and one at Cannon Air Force Base, NM.
4. Dental Clinics: In FY 2017, Army added one dental clinic at Camp Humphreys, South Korea and deactivated one dental clinic at Illesheim, Germany and one dental clinic at Livorno, Italy.
5. Veterinary Clinics: No change.

	<u>FY 2017</u> <u>Actuals</u>	<u>FY 2018</u> <u>Estimate</u>	<u>FY 2019</u> <u>Estimate</u>	<u>FY 2017-2018</u> <u>Change</u>	<u>FY 2018-2019</u> <u>Change</u>
<u>Direct Care System Workload (from M2 and Business Planning Tool)</u>					
Inpatient Admissions, Non-Weighted (SIDR Dispositions-All)	228,253	223,604	226,457	-4,649	2,853
Inpatient Admissions, Weighted (MS-DRG RWPs, Non Mental Health)	196,030	191,791	194,187	-4,239	2,396
Inpatient Admissions, Occupied Bed Days (Mental Health Only)	97,922	100,678	100,722	2,756	44
Average Length of Stay (ALL Bed Days/All Dispositions)	2.98	2.93	2.94	0	0
Ambulatory Visits, Non-Weighted (Encounters, CAPER)	39,704,553	37,419,582	37,455,187	-2,284,971	35,605
Ambulatory Visits, Weighted (Adj Provider Aggregate RVUs, CAPER)	78,906,034	75,281,312	75,342,713	-3,624,721	61,401
Ambulatory Procedures, Weighted (Aggregate Weight APCs, CAPER)	10,961,235	10,806,868	10,828,151	-154,367	21,283
Number of Outpatient Pharmacy Prescriptions "Scripts"	45,695,695	46,315,786	47,033,786	620,091	718,000

Notes:

1. The FY 2017 to FY 2018 decrease in Inpatient Admissions is due to anticipated increase in the use of ambulatory procedures. The FY 2018 to FY 2019 increase in Inpatient Admissions is based on Component performance plan projections. The FY 2017 to FY 2018 and FY 2018 to FY 2019 increase in Inpatient Admissions, Occupied Bed Days (Mental Health Only) is due to increased Residential Treatment Facilities capacity and efforts to recapture mental health care from the network.
2. The FY 2017 to FY 2018 decrease in ambulatory visits (weighted and non-weighted) is due to the closure of the ambulatory surgery facility at Fort Leavenworth, KS; the reduction of specialty care at lower acuity Army MTFs; and reduced ambulatory procedure center (APC) projections at Naval Medical Center Portsmouth and Naval Hospital Bremerton. The FY 2018 to FY 2019 increase in ambulatory visits (and weighted visits) are projected to increase as Army moves Active Duty specialists to MTFs with higher demand for these procedures.

**Defense Health Program
Fiscal Year (FY) 2019 Budget Estimates
Operation and Maintenance
Medical Workload Data - DHP Summary**

	<u>FY 2017 Actuals</u>	<u>FY 2018 Estimate</u>	<u>FY 2019 Estimate</u>	<u>FY 2017-2018 Change</u>	<u>FY 2018-2019 Change</u>
<u>Dental Workload (Dental Weighted Values (DWVs) (from Components)</u>					
CONUS	11,327,853	11,389,176	11,514,288	61,323	125,112
OCONUS	<u>2,795,788</u>	<u>2,720,951</u>	<u>2,760,146</u>	<u>-74,836</u>	<u>39,195</u>
Total DWVs	14,123,641	14,110,127	14,274,434	-13,514	164,307
<u>CONUS</u>					
Active Duty	9,463,345	9,502,143	9,597,586	38,797	95,444
Non-Active Duty	<u>1,864,508</u>	<u>1,887,033</u>	<u>1,916,701</u>	<u>22,525</u>	<u>29,669</u>
Total CONUS	11,327,853	11,389,176	11,514,288	61,323	125,112
<u>OCONUS</u>					
Active Duty	1,972,849	1,903,722	1,927,454	-69,126	23,731
Non-Active Duty	<u>822,939</u>	<u>817,229</u>	<u>832,693</u>	<u>-5,710</u>	<u>15,464</u>
Total OCONUS	2,795,788	2,720,951	2,760,146	-74,836	39,195

Note: The FY 2017 to FY 2018 decrease is due to a projected decrease in OCONUS FTEs available to provide dental care. The FY 2018 to FY 2019 increase is due to anticipated additional Non-Active Duty workload resulting from exceptions to treat pediatric patients at Fort Polk, LA and Fort Irwin, CA.

Private Sector Workload¹

Note 1: (a) At time of data pull, December 2017, data was undergoing an update to match pending changes to the contract in January 2018. The benefit changed from: Prime; Standard/Plus;Overseas to PRIME,SELECT; and, OVERSEAS, (b) No MERHCF beneficiaries, (c) Outpatient workload in OP setting only, (d) Only workload generated from TED claim, (e) All Major Diagnostic Codes (e.g., surgical, mental health, internal medicine,etc.), (f) Outpatient and Prescriptions = FY 17 Actuals; Inpatient (due to claim lag) = Actuals (thru Q3) + Estimate Q4.

	<u>FY 2017 Actuals</u>	<u>FY 2018 Estimate</u>	<u>FY 2019 Estimate</u>	<u>FY 2017-2018 Change</u>	<u>FY 2018-2019 Change</u>
<u>Managed Care Support Contracts (TRICARE Prime)</u>					
Inpatient Admissions	167,554	165,878	165,380	-1,676	-498
Inpatient Relative Weighted Product (RWPs)	161,080	159,469	158,991	-1,611	-478
Outpatient Visits	17,568,033	17,392,353	17,340,176	-175,680	-52,177
Outpatient Relative Weighted Units (RVUs)	68,222,634	67,540,408	67,337,787	-682,226	-202,621
<u>TRICARE Standard/Extra & Other*(Changes in Jan 2018 to only "Select")²</u>					
Inpatient Admissions	151,021	149,511	149,062	-1,510	-449
Inpatient Relative Weighted Product (RWPs)	187,058	185,187	184,631	-1,871	-556
Outpatient Visits	17,393,849	17,219,911	17,168,251	-173,938	-51,660
Outpatient Relative Weighted Units (RVUs)	70,190,077	69,488,176	69,279,711	-701,901	-208,465

*Note 2: Includes Standard (prior to Jan 2018), Select (Jan 2018 forward), TRICARE Reserve Select, Supplemental Care and other non-Prime and non-Overseas)

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Operation and Maintenance
Medical Workload Data - DHP Summary**

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TRICARE Overseas Program (TOP and TRICARE Global Remote)	Actuals	Estimate	Estimate	Change	Change
Inpatient Admissions	14,060	13,919	13,877	-141	-42
Inpatient Relative Weighted Product (RWPs)	8,531	8,446	8,420	-85	-26
Outpatient Visits	390,034	386,134	384,976	-3,900	-1,158
Outpatient Relative Weighted Units (RVUs)	1,284,385	1,271,541	1,267,726	-12,844	-3,815
*Note 3: Includes TRICARE Overseas and TRICARE Remote Overseas, all BENCATS.					
Pharmacy⁴	Actuals	Estimate	Estimate	Change	Change
Retail					
Number of Scripts	21,155,361	20,097,593	19,092,713	-1,057,768	-1,004,880
Mail Order					
Number of Scripts	6,943,015	7,290,166	7,654,674	347,151	364,508
*Note 4: Congressionally-approved changes to pharmacy benefit has resulted in decreasing retail and increasing, less costly, mail order scripts					
TRICARE Dental Program	Actuals	Estimate	Estimate	Change	Change
Enrollment - Single Plan	244,937	244,676	246,075	-261	1,399
Enrollment - Family Plan	431,420	430,961	433,425	-459	2,465
Enrollment - Survivor Single Plan	2,873	2,870	2,886	-3	16
Enrollment - Survivor Family Plan	3,616	3,612	3,633	-4	21
Uniformed Services Family Health Plan	Actuals	Estimate	Estimate	Change	Change
Enrollees (Non-Medicare eligible, DoD Only)	99,070	99,070	99,070	0	0