I. <u>Description of Operations Financed</u>:

This Budget Activity Group provides for all medical and dental care plus pharmaceuticals received by Military Health System (MHS)-eligible beneficiaries using healthcare services provided in the private sector. This includes the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) Program, the TRICARE Managed Care Support Contracts (MCSC), the Uniformed Services Family Health Program (USFHP), the TRICARE Overseas Program (TOP), the Supplemental Care Program, TRICARE Mail Order Pharmacy (TMOP), the National Retail Pharmacy, TRICARE Reserve Select (TRS), which is a premium based program for reservists and their family members, and various support activities.

Pharmaceuticals - Purchased Health Care: Includes expenses for the pharmaceutical costs associated with contractual pharmacy services providing authorized benefits to eligible beneficiaries via the TRICARE Mail Order Pharmacy (TMOP). Excludes manpower authorizations and all administrative costs of the Defense Health Agency to include regional offices and Defense Supply Center-Philadelphia's management of the TMOP.

National Retail Pharmacy - Includes expenses for the pharmaceutical costs associated with contractual pharmacy services providing authorized benefits to eligible beneficiaries via the TRICARE Retail Pharmacy Program. The TRICARE Retail Pharmacy Program provides network pharmaceutical prescription benefits for eligible beneficiaries from private sector retail pharmacies.

TRICARE Managed Care Support Contracts (MCSC) - Includes expenses for the at-risk health care costs specifically for providing benefits identified in Title 32 United States Code of Federal Regulations 199 and measurable to the following for areas serviced by TRICARE Managed Care Support Contracts: healthcare authorized under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) for the following beneficiaries: (a) retired military personnel and (b) for spouses and dependent children of active duty,

I. <u>Description of Operations Financed (cont.)</u>

retired, or deceased military personnel in civilian facilities and by private practitioners. Also includes costs for the Extended Care Health Option (ECHO) for disabled dependents of active duty personnel covered under the Program for Persons with Disabilities (PFPWD) Act: Includes healthcare costs for those programs that are considered at-risk to the TRICARE Managed Care Support Contracts, and external and internal resource sharing agreements when paid by the TRICARE Managed Care Support contractors. In addition, it includes underwritten costs for health care for those beneficiaries who have enrolled directly with the MCSC affiliated contracted providers.

Excluded from MCSC are PSC healthcare costs captured in separate PSC programs due to population or separate PSC contracts for these areas. Such as: (a) Beneficiaries enrolled to Military Treatment Facility (MTF) providers for health care are accounted for in PE 0807738; (b) claims processed by the TRICARE Overseas Contract (PE 0807749); (c) any not-at-risk/non-underwritten costs associated with the Supplemental Care Program (PE 0807743) and (d) Miscellaneous Purchased Care activities (PE 0807751) such as surveys, demonstrations or pilots requested by Congress. Also excluded are Defense Health Agency (DHA) costs for manpower authorizations and any administrative costs of DHA executive agents associated with the management of TRICARE Managed Care Support Contracts.

Military Treatment Facility (MTF) Enrollees Purchased Care - Includes expenses for the underwritten costs for TRICARE health care benefits provided to the MTF Prime enrollees as authorized under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS). Excludes health care provided under the Supplemental Care Program for Active Duty service members and expensed in PE 0807743.

Dental Purchased Care - Includes expenses associated with the government paid portion of insurance premiums specifically for providing dental benefits in civilian facilities and

I. <u>Description of Operations Financed (cont.)</u>

by private practitioners for the beneficiaries who are enrolled in the TRICARE Dental Program. Beneficiaries eligible for enrollment are: (a) active duty family members and (b) select reservist or individual ready reservist (IRR) and dependent family members. Also, includes administrative, management, and health care costs associated with these dental services. Excludes dental services and costs expensed for Active Duty members in the Supplemental Care - Dental Care (PE 087745) and direct health care system (Dental Care - CONUS, PE 807715 and Dental Care - OCONUS, PE 807915).

Uniformed Services Family Health Program (USFHP) - Includes costs based on annual capitation rates for providing TRICARE-like benefits authorized through contracts with designated civilian hospitals in selected markets to beneficiaries that enroll to a USFHP civilian facility located in their geographic residence. Beneficiaries eligible for enrollment into USFHP include active duty family members, retirees and their family members and survivors who live within the specially designated geographic area.

Supplemental Care - Health Care - Includes costs for providing the TRICARE Prime benefit to active duty service members and other designated eligible patients who receive health care services in the civilian sector or non-defense facilities either referred or non-referred from the Military Treatment Facility, emergent care and authorized non-emergent care. Includes members in travel status, Navy/Marine Corps service members enrolled to deployable units and referred by the unit primary care manager, eligible Reserve Component personnel, ROTC students, cadets/midshipmen, and eligible foreign military. This program also covers health care sought in the civilian sector due to active duty assignments in remote CONUS locations. The types of claims include health care under TRICARE Prime Remote, MTF referred care, emergency care, and authorized non-emergency/non-referred care. Includes the costs of sharing agreements that are not paid

I. Description of Operations Financed (cont.)

by the managed care support contractors. Excludes all costs associated with dental care for Active Duty members expensed in Supplemental Care - Dental (PE 807745).

Supplemental Care - Dental - Includes costs for a dental benefit for uniform dental care and administrative costs for active duty members including eligible mobilized select reserves or individual ready reserves (IRR), receiving services in the civilian sector to include dental practitioners within Department of Veterans Affairs' facilities. This program also covers dental care for active duty members in the civilian sector due to military assignments in remote CONUS locations.

Continuing Health Education/Capitalization of Assets (CHE/CAP) - Provides for support of graduate medical education and capital investment within civilian facilities which provide services to the Military Health System and Medicare. These facilities operate under the Diagnosis Related Group (DRG system) of payment providing federal inpatient services under TRICARE and Medicare.

TRICARE Overseas Program (TOP) - Includes costs specifically for delivery of Military Health System Prime benefits in civilian facilities by private practitioners to active duty and eligible active duty family member beneficiaries enrolled to the TRICARE Overseas Program (TOP) and foreign claims for non-active duty beneficiaries including Medicare eligibles (when Medicare Part B is purchased). Coverage includes Europe, the Pacific region, Latin America, Asia, Africa, Canada, and covered through Remote Overseas areas or TRICARE Select options per the TOP contract. The scope of health care includes medical, dental, inpatient care, laboratory work, health care testing, and other health care services equivalent to the DoD TRICARE program. Benefits are exclusively pass—through costs. Excluded from the benefits program is custodial care claims, special and emergent care claims and Alaska claims. Also includes overseas health care provided

I. <u>Description of Operations Financed (cont.)</u>

under the Supplemental Care program. Excludes demonstrations, congressional mandates and other health care expensed in Miscellaneous Purchased Health Care, PE 0807751.

Miscellaneous Purchased Health Care - Includes costs specifically for providing benefits identified in Title 32 of the Code of Federal Regulations Part 199 (32 CFR 199) authorized under the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) for the following beneficiaries: (a) retired military personnel and (b) spouses and dependent children of active duty, retired, or deceased military personnel in civilian facilities and by private practitioners. Also includes costs for special education and institutional care in civilian facilities for disabled dependents of active duty personnel covered under the Program for Persons with Disabilities (PFPWD) Act. Includes administrative, management, and health care costs for Custodial Care, Special and Emergent Care Claims, Alaska Claims, Autism Benefit, Laboratory Developed Tests (LDTs), State Vaccine Program, TRICARE/Medicare dual eligible beneficiaries program (e.g., TRICARE Dual Eligible Fiscal Intermediary Contract - TDEFIC) transition assistance programs and TRICARE Reserve Select (TRS).

Miscellaneous Support Activities - Includes the miscellaneous administrative costs and support contract expenses for various programs, demonstrations and other congressionally mandated programs or actions not directly providing health care. Programs financed include: Contracts for marketing and education functions, claims auditing, surveys, e-Commerce, Case Management services, the National Quality Monitoring Service and on-going support from Defense Enrollment Eligibility Reporting System (DEERS) are reflected in this program element.

II. Force Structure Summary:

II. Force Structure Summary (cont.)

TRICARE healthcare benefits under contracts in private sector care (PSC) programs are available to approximately 9.6 million DoD beneficiaries are eligible to receive TRICARE benefits. The Managed Care Support Contractors (MSCS) provide uniform health care plan options to eligible beneficiaries when they enroll with their regional contractor. Effective January 1, 2018 Defense Health Agency simplified the benefit structure of TRICARE as two options, PRIME (HMO like) or Select, the new Preferred Provider option (PPO). The long standing TRICARE Standard and Extra options both transition to the Select option. TRICARE benefits include Dental Care via contracts with civilian dental practitioners as well. TRICARE benefits are available to approximately 2.4 million Medicare eligible beneficiaries of Military Retirees, Survivors or special eligibility groups who qualify and received benefits from Medicare program by law. These costs are paid from the Medicare Eligible Retiree Health Care Fund (MERHCF) and are excluded from the baseline budget for PSC contracts.

--FY 2019 Private Sector Care actuals including all funding sources is \$15,522,099
--FY 2020 Private Sector Care current estimate is based on first quarter disbursement data which shows a 7 percent increase over disbursements for the same period in FY 2019. We are continuing to monitor execution as we work towards determining the factors contributing to the increase.

III. Financial Summary (\$ in thousands)

FY 2020 Congressional Action FY 2019 Budget Current FY 2021 A. BA Subactivities Actuals Request Amount Percent Appropriated Estimate Estimate 1. Pharmaceuticals 791,073 829,460 0 0.0 829,460 792,559 822,222 Purchased Health Care 2. National Retail 851,561 931,018 -10,000 -1.1 921,018 960,244 994,926 Pharmacy 3. Managed Care Support 6,098,189 6,178,513 -55,825 -0.9 6,122,688 6,075,661 6,052,019 Contracts 4. MTF Enrollee Purchased 3,330,234 2,894,375 0 0.0 2,894,375 3,392,399 3,505,298 Care 5. Dental Purchased Care 289,677 297,540 0 0.0 297,540 290,258 297,791 6. Uniformed Services 545,842 622,340 0.0 622,340 570,040 594,611 Family Health Program 7. Supplemental Care -1,397,552 0.0 1,397,552 1,479,013 1,537,278 1,324,653 Health Care 8. Supplemental Care -90,821 70,371 0.0 70,371 93,008 96,915 Dental 9. Continuing Health 335,261 378,198 0.0 378,198 354,268 344,021 Education/Capitalization 10. Overseas Purchased 340,650 349,768 0.0 349,768 245,402 251,463 Health Care 11. Miscellaneous 1,078,217 955,363 Ω 0.0 955,363 1,168,851 1,220,432 Purchased Health Care 130,108 136,508 0 0.0 136,508 127,246 124,911 12. Miscellaneous Support Activities Total 15,206,286 15,041,006 -65,825 -0.4 14,975,181 15,548,949 15,841,887

^{1.} FY 2019 actuals includes \$277,066K for OCO.

^{2.} FY 2019 actuals includes \$408,080K OMNIBUS Reprogramming approved by Congress to mitigate increased healthcare claims to Private Sector medical facilities and practitioners. (Procurement appropriation provides \$308,480K and \$99,600K from Restoration/Modernization

III. Financial Summary (\$ in thousands)

BAG 7 DHP O&M).

- 3. FY 2019 actuals do not include Department of Defense Medicare-Eligible Retiree Health Care Fund (MERHCF) of \$7,926,557K (O&M Only).
- 4. FY 2019 actuals do not include \$315,218K funds execution from FY 2018/FY 2019 Carry Over account.
- 5. FY 2020 current estimate excludes \$287,487K for OCO.
- 6. FY 2020 current estimate does not include anticipated Department of Defense Medicare-Eligible Retiree Health Care Fund (MERHCF) of \$8,664,293K (O&M Only).
- 7. FY 2021 estimate excludes \$296,828K for OCO.
- 8. FY 2021 estimate does not include anticipated Department of Defense Medicare-Eligible Retiree Health Care Fund (MERHCF) of \$8,981,540K (O&M Only).
- 9. FY 2020 Current Estimate for PSC reflects revised estimated shortfall of \$573,768K funding required to satisfy contractual obligations of the Defense Health Program.

		Change	Change
В.	Reconciliation Summary	FY 2020/FY 2020	FY 2020/FY 2021
	Baseline Funding	15,041,006	15,548,949
	Congressional Adjustments (Distributed)	-65,825	
	Congressional Adjustments (Undistributed)		
	Adjustments to Meet Congressional Intent		
	Congressional Adjustments (General Provisions)		
	Subtotal Appropriated Amount	14,975,181	
	Fact-of-Life Changes (2020 to 2020 Only)		
	Subtotal Baseline Funding	14,975,181	
	Supplemental	287 , 487	
	Reprogrammings	573 , 768	
	Price Changes		530,606
	Functional Transfers		
	Program Changes		-237,668
	Current Estimate	15,836,436	15,841,887
	Less: Wartime Supplemental	-287 , 487	
	Normalized Current Estimate	15,548,949	

FY	Reconciliation of Increases and Decreases 2020 President's Budget Request (Amended, if applicable) Congressional Adjustments	<u>Amount</u>	<u>Totals</u> 15,041,006 -65,825
	 a. Distributed Adjustments 1) Historical Underexection: 2) Medical Reform Implementation: 3) Pharmaceuticals Excess Growth: b. Undistributed Adjustments c. Adjustments to Meet Congressional Intent d. General Provisions 	-38,500 -17,325 -10,000	
	2020 Appropriated Amount OCO and Other Supplemental Enacted a. OCO and Other Supplemental Requested		14,975,181 287,487
_	1) OCO and other Supplemental	287,487	
FY	Fact-of-Life Changes 2020 Baseline Funding Reprogrammings (Requiring 1415 Actions) a. Increases		15,262,668 573,768
	1) Risk Assessment of Health Care Claims Trending for FY 2020: Resources required for reprogramming in FY 2020 to support costs attributed to increased Managed Care Support Contractor enrollment, utilization of Urgent Care facilities, walk-in clinics, primary care providers office visits, care delivered in homes for injectable drubs or durable medical equipment and care at Residential Treatment Centers or Psychiatric Hospitals. Additional costs increase attributed to price growth not reflected in the FY 2020 baseline budget. FY 2019 baseline actuals were \$14,929,220K.	573 , 768	

C. Reconciliation of Increases and Decreases	<u>Amount</u>	<u>Totals</u>
The FY 2020 Enacted baseline is \$14,975,181. This		
reflects zero increase for normal inflation. The FY		
2020 Current Estimate reflects the projected growth		
for Private Sector Care based on the 1st Quarter		
disbursement data for FY 2020.		
Revised FY 2020 Estimate		15,836,436
5. Less: OCO and Other Supplemental Appropriations and		-287 , 487
Reprogrammings (Items 2 and 4)		
FY 2020 Normalized Current Estimate		15,548,949
6. Price Change		530 , 606
7. Functional Transfers		
8. Program Increases		
a. Annualization of New FY 2020 Program		
b. One-Time FY 2021 Increases		
c. Program Growth in FY 2021		
9. Program Decreases		-237 , 668
a. Annualization of FY 2020 Program Decreases		
b. One-Time FY 2020 Increases		
c. Program Decreases in FY 2021	104 000	
1) a. Implements 2017 NDAA Benefit Reform to Lower	-134,000	
Overall Healthcare and Administrative Costs:		
Incremental program decrease driven by recent		
administrative and health benefit reforms. Changes		
include:		
\$100 0 million incremental comings demised for		
-\$106.0 million incremental savings derived for		
phased implementation of benefit reforms in NDAA 2017		
creating TRICARE Select (a Preferred Provider		
enrollment Option) and modernizing fee structure for		

C.	Reconciliation of Increases and Decreases	<u>Amount</u>	<u>Totals</u>
	enrollment and co-pays for enrollees of TRICARE.		
	-\$28.0 million incremental reduction for estimated savings associated with the phased in adoption of Centers for Medicare and Medicaid (CMS) reimbursement rates for Long Term Care Hospitals and Inpatient Rehabilitation Facilities providing care to TRICARE beneficiaries. (FY21 increased to \$155 million from \$127 million in FY20)		
	FY 2020 Private Sector Care baseline funding is \$14,975,181K		
	2) b. Reduced Contract Requirements: Reduced requirements based on incorporation of the FY 2019 actual execution into the FY 2021 budget estimate for contract requirements. Incorporating this analysis into budgetary projections combined with better pricing methodologies, and a review of historical deobligation trends resulted in improved requirement identification and resource management. FY 2020 Private Sector Care baseline funding is \$14,975,181K	-44,407	
	3) c. Updated Population Mix Projections: Incremental reduction which incorporates program changes based on projected change in population mix for Active Duty, Active Duty Family Member, Retiree and Retiree Family Member. FY 2020 Private Sector Care baseline funding is \$14,975,181K	-24,203	
	4) d. Realignment of Information Technology Systems to	-17,883	

C. Reconciliation of Increases and Decreases	<u>Amount</u>	<u>Totals</u>
IM/IT Budget Activity Group:		
Realignment of resources to Information		
Management/Information Technology from Private Sector		
Care to account for the budgeting and execution of		
the IT operating costs for the TRICARE Encounter Data		
(TED) and Patient Encounter Processing and Reporting		
(PEPR) applications within the Tri-Service IM/IT		
program element. Realignment allows for managerial		
oversight and execution of all IT funding within the		
Health Information Technology Directorate. The		
FY2020 Miscellaneous Support Activities baseline		
funding is \$136,508K.		
5) e. Pharmacy Co-Pay Changes for NDAA 2018:	-8 , 191	
Incremental reduction to Pharmacy requirements for		
revisions to the Co-Pay tables for various drug		
categories offered under TRICARE Pharmacy benefits		
structure. The FY2020 Pharmacy Mail Order baseline		
budget request is \$829,460K and the Retail Pharmacy		
baseline budget is \$921,018K.		
6) f. Implements Reduction to Headquarters Contracts:	-4 , 984	
Reduces requirements to contracts with professional		
support services, studies or analytic services as		
directed to implement Headquarters Contract		
Reductions across the enterprise. The FY2020		
Miscellaneous Support Activities baseline funding is		
\$136,508K.	4 000	
7) g. Defense Wide Review (DWR) - Additional Cost	-4,000	
Reduction By Implementing Automated Payroll Deduction		
Payment of TRICARE Enrollment Fees:		

III. Financial Summary (\$ in thousands)

C. Reconciliation of Increases and Decreases Reduced costs estimated for implementation of automated payroll deduction to collect TRICARE enrollment fees saving fees charged for credit card usage by beneficiaries to pay monthly enrollment to TRICARE. The FY 2020 Managed Care Support Contracts baseline funding is \$6,122,688K. FY 2021 Budget Request Amount Totals 15,841,887

FY 2021 FY 2019-2020 FY 2019-2021

IV. Performance Criteria and Evaluation Summary:

					II EULD EULL
	Actuals	Estimate	Estimate	Change	Change
Private Sector Care Enrollment:		(Non-OCO)	(Non-OCO)		
PSC TRICARE Prime Enrollees	1,221,250	1,214,101	1,216,868	-7,149	2,767
PSC TRICARE Select Enrollees	2,016,536	1,992,562	1,987,567	-23,974	-4,995
PSC Non-Enrolled (Standard/Extra)	157,348	156,330	156,673	-1,018	343
TRICARE Overseas Enrollees	416,112	418,336	420,259	2,224	1,923
Total MCS and Overseas :	3,811,246	3,781,329	3,781,367	-29,917	38
TRICARE Dental Program Enrollment	680,845	681,269	681,694	424	425
Uniformed Services Family Health Plan	98,323	103,919	109,834	5,596	5,915
Private Sector Care System	FY 2019	FY 2020	FY 2021	FY 2019-2020	FY 2019-2021
Workload:	Actuals	Estimate	Estimate	Change	Change
Outpatient-Visits	65,648,325	64,709,234	64,884,661	-939,091	175,427
Outpatient-Weighted (Relative Value Units, RVUs)	127,027,349	125,246,986	125,596,389	-1,780,363	349,403
Inpatient-Admissions	315,586	311,271	312,191	-4,315	920
Inpatient-Weighted (Relative Weighted	206 275	000 400	000 000	4 000	
Products, RWPs)	296,275	292,188	293,030	-4,087	842
Prescriptions:		,	, ===,		
	19,414,536	19,702,515	20,343,035	287,979	640,520
Prescriptions:	19,414,536	,	, ===,		640,520

FY 2020

General Notes: a) All data excludes MERHCF and Dual Eligibles (TDEF). (b) New contract (Jan 2018) has two regions and overseas. The benefit changed from: Prime, Standard, Extra and TRICARE Overseas to Prime, Select and Overseas, (c) workload is all workload provided in Private Sector locations regardless of patient's enrollment status, (d) enrollment is to PSC MCS providers and Overseas Program not to the Military Treatment Facilities.

FY 2019

<u>Workload Notes</u>: (a) FY 2019 PSC workload includes OCO and Baseline in Actuals reported. b) FY 2020 and FY 2021 CONUS and OCONUS Healthcare workload projections are based on Non-OCO Population trends for Prime and all others.

- c) OCO estimated at 1% of total workload in E, W, and Overseas (Roughly 95K OCO divided by Roughly 9.5M TRICARE eligibles)
- d) FY 2020 Pharmacy projection of script growth uses eligible Population trends and percentage increase in script volume from FY2018 to FY2019.
- e) FY 2021 Pharmacy projection of script growth uses eligible Population change.
- f) Dental Enrollment estimates for FY 2020 and FY 2021 is based on rate of change from FY 2018 to FY 2019.
- g) USFHP enrollee estimates for FY 2020 and FY 2021 is based on rate of change from FY 2018 to FY 2019.

V. <u>Personnel Summary</u>

Civilian FTEs changes: FY 2019 Civilian FTEs are not documented supporting the actual execution of Private Sector Care funds for Civilian salaries as reported in the Civilian OP-32 rows by DHA Comptroller. FY 2020 and FY 2021 have no FTEs programmed.

VI. OP 32 Line Items as Applicable (Dollars in thousands):

		Chan	ge		Chan	ge	
	FY 2019	FY 2019/1	FY 2020	FY 2020	FY 2020/1	FY 2021	FY 2021
OP 32 Line	<u>Actuals</u>	Price	Program	<u>Estimate</u>	Price	Program	<u>Estimate</u>
101 Exec, Gen'l & Spec Scheds	630	18	-648	0	0	0	0
199 TOTAL CIV COMPENSATION	630	18	-648	0	0	0	0
308 Travel of Persons	493	10	-14	489	10	0	499
399 TOTAL TRAVEL	493	10	-14	489	10	0	499
647 DISA Enterprise Computing Centers	0	0	10,119	10,119	132	80	10,331
699 TOTAL DWCF PURCHASES	0	0	10,119	10,119	132	80	10,331
915 Rents (Non-GSA)	5,000	100	-5,100	0	0	0	0
920 Supplies & Materials (Non- Fund)	4	0	3	7	0	0	7
921 Printing & Reproduction	1,350	27	4,182	5 , 559	111	6	5,676
924 Pharmaceutical Drugs	1,598,007	58 , 967	95,828	1,752,802	64,678	-332	1,817,148
925 Equipment Purchases (Non-Fund)	0	0	3,720	3,720	74	4	3,798
932 Mgt Prof Support Svcs	34,737	695	20,234	55,666	1,113	-1,161	55,618
933 Studies, Analysis & Eval	5 , 974	119	-918	5,175	104	-161	5,118
955 Other Costs (Medical Care)	4,500	176	-4,676	0	0	0	0
959 Other Costs (Insurance Claims/Indmnties)	11	0	-8	3	0	0	3
960 Other Costs (Interest and Dividends)	1,017	20	-1,037	0	0	0	0
984 Equipment Contracts	14,502	290	-14,792	0	0	0	0
986 Medical Care Contracts	13,479,321	525,693	-330,501	13,674,513	463,566	-215,544	13,922,535
987 Other Intra-Govt Purch	4,998	100	19,517	24,615	492	-6,748	18,359
989 Other Services	41,476	830	-39,568	2,738	55	2	2,795
990 IT Contract Support Services	14,266	285	-1,008	13,543	271	-13,814	0
999 TOTAL OTHER PURCHASES	15,205,163	587,302	-254,124	15,538,341	530,464	-237,748	15,831,057
Total	15,206,286	587,330	-244,667	15,548,949	530,606	-237,668	15,841,887