VOLUME 2B, CHAPTER 12: “DEFENSE HEALTH PROGRAM”

SUMMARY OF MAJOR CHANGES

All changes are denoted by blue font.

Substantive revisions are denoted by an * symbol preceding the section, paragraph, table, or figure that includes the revision.

Unless otherwise noted, chapters referenced are contained in this volume.

Hyperlinks are denoted by bold, italic, blue and underlined font.

The previous version dated June 2007 is archived.

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<th>EXPLANATION OF CHANGE/REVISION</th>
<th>PURPOSE</th>
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<tr>
<td>Various</td>
<td>Formatting changes</td>
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<tr>
<td>120302</td>
<td>Changed printed and electronic submission requirements</td>
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<tr>
<td>1204</td>
<td>Updated headers for PB-11, PB-11A, and PB-11B</td>
<td>Update</td>
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<tr>
<td>1204</td>
<td>Updated and added Program Elements for O&amp;M and RDT&amp;E</td>
<td>Update</td>
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CHAPTER 12

DEFENSE HEALTH PROGRAM

1201  GENERAL

120101.  Purpose

A.  This chapter provides instructions applicable to budget formulation and congressional justification for the Defense Health Program (DHP).

B.  The following appropriations are covered as subsections of the DHP appropriation:

1.  Operation and Maintenance (O&M)

2.  Procurement

3.  Research, Development, Test and Evaluation (RDT&E)

120102.  Submission Requirements

General guidance with regard to submission requirements is presented in Volume 2A, Chapter 1. This chapter covers specific backup material requirements for the above accounts. The Assistant Secretary of Defense (Health Affairs) (ASD(HA)) should also consult all of the other chapters of this Regulation for exhibit requirements that are not specifically addressed in this chapter including Volume 2B, Chapter 19 – Other Special Analyses. The ASD(HA) is also responsible for providing data to update the Comptroller Information System (CIS) and the Future Years Defense Program (FYDP) automated systems for the DHP appropriation. The Military Components must reconcile all DHP personnel data with, and submit all proposed military and civilian medical personnel changes to the CIS and FYDP through the TRICARE Management Activity Program Budget and Execution Directorate before these changes are accepted in these automated systems. (See Volume 2A, Chapter 1 and Volume 2B, Chapter 19, of this Regulation.)

120103.  Preparation of Material

General guidance with regard to format and preparation of material is presented in Volume 2A, Chapter 1. Volume 2B, Chapter 12 provides additional specific guidance with regard to the back-up material required for the DHP. (See Volume 2A, Chapter 1, of this Regulation.)

120104.  References

Volume 2A, Chapter 3 provides guidance related to O&M costs, Volume 2B, Chapter 4 provides guidance and formats related to Procurement appropriations, and Volume 2B, Chapter 5 provides guidance and formats related to RDT&E appropriations. (See Volume 2A, Chapter 3
and Volume 2B, Chapter 4, of this Regulation.)

1202 PROGRAM AND BUDGET REVIEW SUBMISSION

120201. Purpose

This Section provides guidance for preparation and submission of budget estimates for the DHP. The budget estimates consist of all O&M, procurement, and RDT&E resources that support the medical activities that were consolidated into the DHP.

120202. Submission Requirements

A. The ASD (HA) is responsible for submitting all exhibits required for the O&M, procurement, and RDT&E appropriations as specified in Volume 2A, Chapter 3, Volume 2B, Chapters 4, and 5 respectively. The ASD (HA) is also responsible for submitting exhibit requirements specified in the other chapters of this Regulation including Volume 2B, Chapter 19 – Other Special Analyses. (See Volume 2A, Chapter 3 and Volume 2B, Chapter 4, 5, and 19, of this Regulation).

B. In addition, the Cost of Medical Activities Exhibit (PB-11, PB-11A, PB-11B) will be prepared and submitted to the Office of the Under Secretary of Defense (Comptroller) (OUSD(C)) concurrent with the program and budget review submission. Formats for these exhibits are provided at the end of this chapter. Two printed copies and one electronic copy of each exhibit should be provided to the OUSD(C) Program/Budget (P/B) Military Personnel & Construction Directorate, Room 3C654, Washington, DC 20301-1100.

C. For all updates of the OUSD(C) automated budget system databases, DoD Components must reconcile all DHP personnel data with, and submit all proposed military and civilian medical personnel changes through the TRICARE Management Activity Program Budget and Execution Directorate.

1203 CONGRESSIONAL JUSTIFICATION/PRESENTATION

120301. Purpose.

This section presents the exhibit requirements for submission to Congress. Examples of budget exhibits can be found in Section 1204.

120302. Submission Requirements

A. The ASD (HA) is responsible for submitting all exhibits required for the O&M, procurement, and RDT&E appropriation as specified in Volume 2A, Chapter 3, Volume 2B, Chapters 4, and 5 respectively. The ASD (HA) is also responsible for submitting exhibit requirements specified in the other chapters of this regulation including Volume 2B, Chapter 19 – Other Special Analyses. (See Volume 2A, Chapter 3 and Volume 2B, Chapter 4, 5, and 19)
B. In addition, the cost of Medical Activities Exhibit (PB-11, PB-11A, PB-11B) will be prepared and submitted to the OUSD (C) for the DHP. Formats for these exhibits are provided at the end of this chapter. Two printed copies and one electronic copy of each exhibit should be provided to the OUSD (C), P/B, Military Personnel Construction Directorate, Room 3C654, the Pentagon.

C. Two printed copies and one electronic copy of the PBA-9 (Medical Programs Exhibit for the O&M Overview) will be due to the OUSD(C), P/B, Military Personnel & Construction Directorate, Room 3C654, the Pentagon at the time that the President’s budget exhibits are due. The required format for the PBA-9 is provided at Volume 2A, Chapter 3, Section 0304 (See Volume 2A, Chapter 3, section 0304 of this Regulation).

D. The OP-5 exhibit and other supporting exhibits will be prepared for each of the following activities. Meaningful performance criteria should be displayed for each activity.

- In-House Care
- Private Sector Care
- Consolidated Health Support
- Information Management
- Management Activities
- Education and Training
- Base Operations/Communications

E. The ASD(HA) will prepare the DHP Volume 1 (Justification of Estimates), Volume 2 (Data Book), and Volume 3 (Additional Accompanying Exhibits). Forty printed copies and five electronic storage media copies of Volumes 1 and 2 and ten printed copies and three electronic storage media copies of all three volumes and other required exhibits should be provided to the OUSD (C), P/B, Military Personnel & Construction Directorate, Room 3C654, the Pentagon.

1204 DEFENSE HEALTH PROGRAM SUBMISSION FORMATS

120401. Purpose

The formats provided on the following pages reflect guidance presented in previous sections of this chapter. Unless modified in a submission budget call, the formats should be followed.
120402. Unique Exhibits in Support of the Defense Health Program

PB-11 Defense Health Program Funding Summary .................................................................7
PB-11A Defense Health Program Personnel Summary.........................................................12
PB-11B Medical Workload and Productivity Data ...............................................................15
### Defense Health Program Funding by Subactivity Group

#### IN-HOUSE CARE
- 0807700HP Defense Medical Centers, Hospitals & Medical Clinics – CONUS
- 0807900HP Defense Medical Centers, Hospitals & Medical Clinics – OCONUS
- 0807701HP Pharmaceuticals, CONUS
- 0807901HP Pharmaceuticals, OCONUS
- 0807715HP Dental Care Activities – CONUS
- 0807915HP Dental Care Activities – OCONUS

**Subtotal In-House Care**

#### PRIVATE SECTOR CARE
- 0807702HP Pharmaceuticals – Purchased Health Care
- 0807703HP Pharmaceuticals – National Retail Rx
- 0807723HP TRICARE Managed Care Support (MCS) Contracts
- 0807738HP MTF Enrollees – Purchased Care
- 0807741HP Dental – Purchased Care
- 0807742HP Uniformed Services Family Health Program (USFHP)
- 0807743 HP Supplemental Care – Health Care
- 0807745HP Supplemental Care – Dental
- 0807747HP Continuing Health Education/ Capitalization of Asset Program (CHE/CAP)
- 0807749HP Overseas Purchased Health Care
- 0807751HP Miscellaneous Purchased Health Care
- 0807752HP Miscellaneous Support Activities

**Subtotal Private Sector Care**
### DEPARTMENT OF DEFENSE
Cost of Medical Activities
DEFENSE HEALTH PROGRAM

#### Defense Health Program Funding by Subactivity Group
(Dollars in Thousands)

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<th>FY CY Estimate</th>
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<td>0807714HP Other Health Activities</td>
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<td>0807760HP Veterinary Services</td>
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<td>0807785HP Armed Forces Institute of Pathology (AFIP)</td>
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**Subtotal Consolidated Health Support**

#### INFORMATION MANAGEMENT

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<td>0807793HP MHS Tri-Service Information Management/Information Technology</td>
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**Subtotal Information Management**

#### MANAGEMENT ACTIVITIES

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<td>0901200HP BMMP Domain Management &amp; System Integration</td>
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**Subtotal Management Activities**
## Defense Health Program Funding by Subactivity Group

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<td>0807754HP Pollution Prevention</td>
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### DEPARTMENT OF DEFENSE
### COST OF MEDICAL ACTIVITIES
### DEFENSE HEALTH PROGRAM

#### Defense Health Program Funding by Subactivity Group

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<td>Pharmacy Equipment</td>
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<td>Medical/Surgical Equipment</td>
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<td>0603002HP Medical Advanced Technology (AFRRI)</td>
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Submitting Components should refer to the FYDP Structure Management (FSM) System as described in section 010702 of Chapter 1 of this volume to ensure that Health program FYDP program elements shown on this format are current.
### Defense Health Program Funding by Subactivity Group

(Thousands of Dollars)

<table>
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<th>FY PY Actual</th>
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**Active Military – Assigned to DHP**

**Army Total**
- Officers
- Enlisted

**Navy Total**
- Officers
- Enlisted

**Air Force Total**
- Officers
- Enlisted

**Total Active Duty**
- Officers
- Enlisted

**Active Military - Non DHP Medical**

**Army Total**
- Officers
- Enlisted

**Navy Total**
- Officers
- Enlisted

**Air Force Total**
- Officers
- Enlisted

**Total Active Duty**
- Officers
- Enlisted

Exhibit PB-11A Defense Health Program Personnel Summary

(Page 1 of 3)
### DEPARTMENT OF DEFENSE
### DEFENSE HEALTH PROGRAM

#### Personnel Summary

<table>
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<tr>
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<td>FTEs</td>
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#### I. Civilian Personnel - US Direct Hire
- Army
- Navy
- Air Force
- TRICARE Management Activity
- Total

#### II. Civilian Personnel - Foreign National Direct Hire
- Army
- Navy
- Air Force
- TRICARE Management Activity
- Total

#### III. Civilian Personnel - Foreign National Indirect Hire
- Army
- Navy
- Air Force
- TRICARE Management Activity
- Total

#### IV. Total Civilian Personnel
- Army
- Navy
- Air Force
- TRICARE Management Activity
- Total

#### V. Summary Civilian Personnel
- U.S. Direct Hire
- Foreign National Direct Hire
- Foreign National Indirect Hire
- Total, Civilians

1/ Includes reimbursable civilians - memo

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Exhibit PB-11A Defense Health Program Personnel Summary
(Page 2 of 3)
SPECIAL INTEREST MANPOWER (End Strength)

TRICARE Regional Offices (TRO):
   Military FTE’s
   Civilian FTE’s

TRICARE Management Activity (PE 0807798)
   Military FTE’s
   Civilian FTE’s

Army Management Headquarters (PE 0807798)
   Military FTE’s
   Civilian FTE’s

Navy Management Headquarters (PE 0807798)
   Military FTE’s
   Civilian FTE’s

Air Force Management Headquarters (PE 0807798)
   Military FTE’s
   Civilian FTE’s

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Exhibit PB-11A Defense Health Program Personnel Summary (Page 3 of 3)
Exhibit PB-11B Medical Workload and Productivity Data

DEFENSE HEALTH PROGRAM
Medical Workload and Productivity Data

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Population - Average Eligible Beneficiaries CONUS

- Active Duty
- Active Duty Dependents
- CHAMPUS Eligible Retirees
- CHAMPUS Eligible Dependents of Retirees
- Subtotal CHAMPUS Eligibles
- Medicare Eligible Beneficiaries
- Total Average Eligible Beneficiaries

Population - Average Eligible Beneficiaries OCONUS

- Active Duty
- Active Duty Dependents
- CHAMPUS Eligible Retirees
- CHAMPUS Eligible Dependents of Retirees
- Subtotal CHAMPUS Eligibles
- Medicare Eligible Beneficiaries
- Total Average Eligible Beneficiaries

Population - Average Eligible Beneficiaries Worldwide

- Active Duty
- Active Duty Dependents
- CHAMPUS Eligible Retirees
- CHAMPUS Eligible Dependents of Retirees
- Subtotal CHAMPUS Eligibles
- Medicare Eligible Beneficiaries
- Active Duty Family Members
- Guard/Reserve Family Members
- Retirees
- Family Members of Retirees
- Survivor
- Other

- Total Medicare Eligibles
- Total Average Eligible Beneficiaries

Exhibit PB-11B Medical Workload and Productivity Data
(Page 1 of 5)
## Exhibit PB-11B Medical Workload and Productivity Data

### DEFENSE HEALTH PROGRAM

**Medical Workload and Productivity Data**

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### Enrollees - Direct Care

- TRICARE Region – North
- TRICARE Region – South
- TRICARE Region – West
- TRICARE Region – Europe
- TRICARE Region – Pacific
- Alaska
  - Sub-Total CONUS Regions
  - Sub-Total OCONUS Regions
  - Total Direct Care Enrollees

### Enrollees (Managed Care Support Contract)

- TRICARE Region – North
- TRICARE Region – South
- TRICARE Region – West
- Total MCS Contracts

### Infrastructure

- Operating Beds
- Inpatient Facilities
- Medical Clinics
- Dental Clinics
- Veterinary Clinics

---

1. *Alaska in the West Contract is non-underwritten therefore not included in the total.*
## DEFENSE HEALTH PROGRAM

### Medical Workload and Productivity Data

<table>
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### Direct Care System Workload (from MEPRS)
- Inpatient Admissions
- Occupied Bed Days
- Inpatient Relative Weighted Product (RWPs)
- Average Length of Stays (Bed Days/Disposition)
- Total Ambulatory Visits
- Outpatient Relative Value Units (RVUs)
- Pharmacy – Military Treatment Facilities Worldwide
  - Number of Scripts
  - Number of Users

### Dental Workload (Dental Weighted Values (DWVs))
- **CONUS**
  - Total DWVs
- **OCONUS**
  - Total CONUS

- **CONUS**
  - Active Duty
  - Non-Active Duty
  - Total CONUS

- **OCONUS**
  - Active Duty
  - Non-Active Duty
  - Total OCONUS

Exhibit PB-11B Medical Workload and Productivity Data

(Page 3 of 5)
### DEFENSE HEALTH PROGRAM
#### Medical Workload and Productivity Data

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**Private Sector Workload**

Managed Care Support Contracts (TRICARE Prime)
- Inpatient Admissions
- Inpatient Relative Weighted Product (RWPs)
- Outpatient Visits
- Outpatient Relative Value Units (RVUs)

TRICARE Extra/Standard
- Inpatient Admissions
- Inpatient Relative Weighted Product (RWPs)
- Outpatient Visits
- Outpatient Relative Value Units (RVUs)

Overseas CHAMPUS
- Inpatient Admissions
- Inpatient Relative Weighted Product (RWPs)
- Outpatient Visits
- Outpatient Relative Value Units (RVUs)

**Pharmacy – Purchased Care**

Retail:
- Number of Scripts
- Number of Users

Mail Order:
- Number of Scripts
- Number of Users
## DEFENSE HEALTH PROGRAM
### Medical Workload and Productivity Data

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### TRICARE Dental Program
- Enrollment - Single Plan
- Enrollment – Family Plan
- Enrollment - Survivor Single Plan
- Enrollment - Survivor Family Plan

**NOTE:** TRICARE Dental Program reporting methodology changed for FY 2010 and is not comparable to previous submissions

### Uniformed Services Family Health Plan
- Enrollees (Non-Medicare eligible DoD only)
- Enrollees (Medicare eligible DoD Only)