## Naval hospital guam facility

Sociology



In connection with TRICARE, there was a reference to the 1998 document from the Assistant Secretary of Defense. The Department of Defense (DoD) Utilization Management (UM) Policy for the Direct Care System provides a framework for systematic business and clinical processes. Regional UM and Quality Management processes are developed at the Lead Agent level. The Lead Agent establishes joint plans with the Managed Care Support (MCS) Contractors. The National Committee for Quality Assurance (NCQA) standards or the Joint Committee on Accreditation of Health Care Organizations (JCAHCO) standards provide the basis for the flexible development of processes that are multidisciplinary, cost-efficient, and designed to optimize patient care (Assistant Secretary of Defense, 1998). The goals and objectives include attention to the cost efficiency, timeliness, and quality of care as well as the optimal partnership with MCS Contractors. Process performance, process improvement, and system improvement analysis are an integral part of the plan and appropriate measurement and statistical methods are included in the plan.

Key elements of the plan are education, utilization review, demand referral management, case and disease management, discharge planning, and health promotion. These provide a basis for the evaluation of care and the development of best practices including practice guidelines, critical pathways, and critical outcome studies.

TRICARE has developed a Provider Handbook by Region to supply information on key operational aspects of the program and program options.

Mandated Requirements:

According to the Assistant Secretary of Defense (1998), integration of UM in

the Direct Care System (DCS) with the contractor's network, other regional Military Treatment Facilities (MTF),