UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

PERSONNEL AND
READINESS

The Honorable Carl Levin
Chairman
Committee on Armed Services
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

As required by section 712 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009, the enclosed report provides an update on the status of the Department of Defense's (DoD) demonstration program to evaluate the efficacy of providing military retirees and their family members with monetary incentives to encourage healthy behaviors. I apologize for the delay with this submission as we have been looking at ways to incentivize proper behavior but were caught in the drawdown of the budget.

Each demonstration site is utilizing one of two Health Risk Assessment tools: the Health Assessment Review Tool developed by the DoD, or a similar commercially available product. These self-assessment tools are designed to identify health behaviors or risk factors that may predispose beneficiaries to certain medical illnesses. To encourage participation and healthy behaviors, beneficiaries are being offered a monetary incentive award for full compliance with the demonstration's requirements. Single participants are being offered an award of $115.00 annually, and participants with family members are being offered an award of $230.00 annually.

Following completion of the demonstration in March 2012, TRICARE Management Activity shall compile and review the final outcomes and submit recommendations to Congress regarding the future utility of this program.

Thank you for your interest in the health and well-being of our Service members, veterans, and their families.

Sincerely,

Clifford L. Stanley

Enclosure:
As stated

cc:
The Honorable John McCain
Ranking Member

UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

PERSONNEL AND
READINESS

DEC 21 2011

The Honorable Jim Webb
Chairman
Subcommittee on Personnel
Committee on Armed Services
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

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cc:
The Honorable Lindsey Graham
Ranking Member

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PERSONNEL AND
READINESS

The Honorable Howard P. "Buck" McKeon
Chairman
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

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cc:
The Honorable Adam Smith
Ranking Member

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4000 DEFENSE PENTAGON
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PERSONNEL AND
READINESS

The Honorable Joe Wilson
Chairman
Subcommittee on Military Personnel
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

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cc:
The Honorable Susan A. Davis
Ranking Member

UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
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PERSONNEL AND
READINESS

The Honorable Daniel K. Inouye
Chairman
Committee on Appropriations
United States Senate
Washington, DC 20510

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cc:
The Honorable Thad Cochran
Vice Chairman

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PERSONNEL AND
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The Honorable Daniel K. Inouye
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Subcommittee on Defense
Committee on Appropriations
United States Senate
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Vice Chairman

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WASHINGTON, DC 20301-4000

PERSONNEL AND
READINESS

The Honorable Harold Rogers
Chairman
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

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As stated

cc:
The Honorable Norman D. Dicks
Ranking Member

UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

PERSONNEL AND
READINESS

The Honorable C.W. Bill Young
Chairman
Subcommittee on Defense
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

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As stated

cc:
The Honorable Norman D. Dicks
Ranking Member

DEPARTMENT OF DEFENSE

MILITARY HEALTH RISK MANAGEMENT DEMONSTRATION PROJECT

A report to Congress on the status of a demonstration project for non-Medicare eligible retired personnel and their family members under TRICARE Prime

Preparation of this study/report cost the
Department of Defense a total of approximately
$4188.50 dollars in Fiscal Year 2011.

TRICARE Military Health Risk Management Demonstration Project

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Section 712 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009 requires the Department of Defense to implement a Military Health Risk Management demonstration project designed to evaluate the efficacy of providing monetary and/or non-monetary incentives to encourage healthy behaviors on the part of non-Medicare eligible retired beneficiaries and their family members.

The Health Risk Management demonstration shall include the following:

- Self-reported health risk assessment
- Physiological and biometric measures, including at least
    - Blood pressure
    - Glucose level
    - Lipids
    - Nicotine Use
    - Weight

Section 712 further stipulates that the demonstration project shall be conducted in at least three geographic areas within the United States where TRICARE Prime is offered to eligible beneficiaries.

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EXECUTIVE SUMMARY

Current research studies have indicated that the prevalence of multiple risk factors in a population significantly increases the likelihood of developing chronic health conditions and higher health care costs. Encouraging and sustaining healthy behavior change is a key factor in improving population health, productivity, and managing health care costs. Health behavior research has shown that assisting people to identify threats to their health facilitates the process of healthy behavior change. Therefore, introducing a comprehensive health risk assessment process to TRICARE beneficiaries should lead to a reduction in risk and an overall improvement in health for this population.

INTRODUCTION

In 1994, the Air Force Office of Prevention and Health Service Assessment (OPHSA) developed the Health Evaluation Assessment Review (HEAR) to facilitate population health management initiatives and project resource utilization. With ongoing process improvement, the tool evolved from a paper-based questionnaire to an automated assessment survey. During this evolutionary process, inefficiencies with the tool, disparities in data collection and invalid questions were identified and appropriately addressed, resulting in a valuable instrument for health assessment.

In 2007, the Office of the Assistant Secretary of Defense (Health Affairs) (OASD (HA) authorized a project to further enhance this self-assessment tool, and renamed it the Health Assessment Review Tool (HART). The HART Project facilitates the efficient and timely capture and analysis of self-reported health information which impacts beneficiaries across the Military Health System (MHS). The Department of Defense HART is web-based, accessible via the TRICARE Online website, and designed to identify areas where beneficiaries may be at risk for developing a variety of chronic illnesses and conditions. A comprehensive menu of reports provides all of the information and tools required to identify key population risks and follow through with appropriate health interventions and wellness programs. The Health Assessment Review Tool (HART) is the first step in developing a comprehensive health management program for TRICARE beneficiaries.

This report provides the status of the TRICARE Military Health Risk Management Demonstration Project. This project will assess the impact of providing incentives to beneficiaries on overall health status by reviewing results from annual health risk assessments and select biometric and physiologic measures. The information contained in this report describes the overall programmatic methodology and requirements preceding execution of the demonstration.

TRICARE PROGRAM IMPLEMENTATION

Comprehensive Structure

TRICARE has designed a comprehensive Military Health Risk Management Demonstration project implementation plan that fully supports the requirements as prescribed in Section 712 of the Duncan Hunter National Defense Authorization Act for Fiscal Year 2009. In addition, the program has been designed with scientific rigor, and has been approved by an Institutional Review Board (IRB) to ensure that any research is conducted in an ethical manner that protects the rights and welfare of participants in the research.

Key Elements

1. *Host Geographical Demonstration Project Service Areas*

Section 712 directs that the demonstration be conducted in three geographic areas. The National Naval Medical Center, Medical Home Program, Bethesda, MD; the Designated Provider Program at Martin's Point, Portland, ME; and the Designated Provider Program at CHRISTUS Health, Houston, TX, are currently participating as the pilot demonstration sites for the purpose of this program. TRICARE Management Activity shall maintain a cooperative partnership with the demonstration sites throughout the duration of the study, providing quarterly status updates through prescheduled teleconferences.

2. *Beneficiary Enrollment and Tracking*

As required by Section 712, TRICARE designed a plan and methodology to determine the efficacy of providing monetary and/or non-monetary incentives to encourage healthy lifestyle behaviors among enrolled members. The plan incorporates the use of a self-reported health risk assessment survey and physiologic/biometric measures to effectively evaluate this study. Two of the demonstration sites will utilize DoD's HART survey tool, and one demonstration site will utilize a comparable commercial product. Key to the success of this demonstration, however, is the enrollment of participants and the collection of their health risk assessment survey and biometric measure data over time. Each of the demonstration project service area coordinators selected a group of non-Medicare eligible retired beneficiaries to invite for participation in the project. To effectively coordinate communication with the participants, track protected health information, ensure incentive awards are appropriately managed, and fully analyze all of the data, an administrative services contract was awarded.

Participant compliance with the requirements of this demonstration will be measured using nationally recognized standards for population health risk assessment and the *Healthy People 2010* initiatives as recommended by the Office of Disease Prevention and Health Promotion, United States Department of Health and Human Services and by review of pertinent physiological and biometric measures.

3. *Development of the Health Assessment Review Tool (HART)*

The Health Assessment Review Tool is a self-reported survey instrument designed to provide TRICARE beneficiaries' health status reports to the Military Health System regarding physical activity, overweight and obesity, tobacco and substance abuse, mental health, and other health behavior practices and risk factors.

This tool is now readily available for the purpose of this demonstration. TRICARE beneficiaries may access the automated web-based HART survey through the TRICARE Online (TOL) Web Portal. The HART data provided by a beneficiary via TOL will be sent to the Clinical Data Repository (CDR) for review.

4. Government-Sponsored Contract

A research-based vendor, Westat, Rockville, MD, was awarded a contract to provide administrative assistance in support of this effort. With the approval of a Data Use Agreement, the contractor designed a program to recruit participants to enroll in the study and to provide informational guidance through established internet websites, email and toll free telephone lines. The contractors are currently establishing the process for collecting the Health Assessment Risk Tool reports and physiologic data for analysis and have developed a state of the art tracking system that will facilitate the evaluation of the collected data and aggregate reports. Upon receipt of all the participant's consent forms and Health Insurance Portability and Accountability Act (HIPAA) authorization forms, the contractor shall obtain health data information from the MHS data systems for calendar year 2010 to establish a baseline for comparison against the data compiled for calendar year 2011. The participants shall be monitored for compliance from January 2011 until December 2011. The contractor shall determine if the participants have rightfully earned the incentive award based on the mandated demonstration requirements and inform the Program Office for disbursement of the payments. The contractor will coordinate with appropriate TMA budgetary entities to ensure payments are executed and tracked. The payments are projected for disbursement no later than April 2012.

Program Evaluation

Section 712 requires the Secretary of Defense to submit to Congress a report on the status of the demonstration project one year after the enactment of the Act, and subsequent reports shall be submitted for each year of the demonstration project, with the final report being submitted no later than 90 days after the termination of the demonstration project. The annual report will discuss the effectiveness of the health risk management demonstration project in motivating an enrolled cohort of TRICARE beneficiaries to develop and maintain healthy lifestyle behaviors, thus improving their health risk measures as a result of participation in the demonstration project.

This interim report, serves to summarize implementation and execution activities to date. With the support of the abovementioned government-sponsored contract, TRICARE actively began implementation of the demonstration project on October 22, 2010, by inviting a cohort of eligible beneficiaries selected by the three demonstration service sites to consent to participate in

the demonstration. However, there are currently no aggregate data available to report. We do anticipate that there will be data available to report in the final Report to Congress as prescribed.