MHS Strategic Plan

I. OVERVIEW

The Military Health System (MHS) is positioned to be the benchmark health care delivery system of the 21st Century, emphasizing readiness, health promotion, and managed care for all Armed Forces personnel, their families and others eligible for care. This strategic plan demonstrates the commitment of our Tri-Service teams to face, together, the challenges inherent in our changing roles and missions, as well as those being brought on by revolutionary changes within the health care community. These joint efforts support and promote collaboration, team building, and reengineering across the continuum to enhance quality, curb costs, and ensure access to all entrusted to our care.

By setting clear goals, preparing for possible eventualities, and assessing our resources and missions, we will be prepared to support both our operational and peacetime responsibilities. This "living document" will remain flexible while promoting a constancy of purpose for long-term strategic guidance. The mission, values, vision, goals, and strategies reflect our joint commitment to continuous improvement as we strive to integrate all aspects of this plan into our daily operations.

LTG Ronald R. Blanck
Surgeon General of the Army

VADM Harold M. Koenig
Surgeon General of the Navy

Lt Gen Charles H. Roadman, III
Surgeon General of the Air Force

Edward D. Martin, M.D.
Acting Assistant Secretary of Defense
(Health Affairs)

NOTE: The MHS was previously titled the Military Health Services System (MHSS). The word services has been dropped in recognition that health, as a desired outcome, encompasses much more than just the provision of services.

II. MISSION, VALUES AND VISION

Mission:

The Military Health System (MHS) supports the Department of Defense (DoD) and our nation's security by providing health support for the full range of military deployments and sustaining the health of members of the Armed Forces, their families, and others to advance our national security interests.

Values:

We are dedicated to the traditional military values of duty, honor, courage, and loyalty in service to our Nation. As members of the MHS, we are also faithful to the following values:

Integrity: Doing the right thing, for the right reasons, with credibility and candor.
Commitment: Selfless service, loyalty to others, and performance anchored by principle.
Caring: Compassion, regard, and respect for others - reaching out and treating others as we expect to be treated.
Excellence: Outstanding performance of duty characterized by technical and tactical proficiency, imagination, and innovation in a climate of continual learning.

Our values bind the organizations and individuals of the MHS. Every member of the MHS -- active, reserve, and civilian -- must understand and live by all of these values.

Vision:

An enterprise providing health support for the Nation's security, the MHS:

- Fields a uniquely trained, equipped, and qualified team to meet the health needs of the fighting forces anytime, anywhere.
- Projects military health forces worldwide to advance our national security interests.
- Promotes a model health system valued by commanders, and all others we serve.
- Functions as an integrated and accountable health team.
- Develops leaders through continuous individual and organizational learning.
- Takes advantage of research and technology to advance health and readiness.
- Promotes health through the best practices of prevention and intervention.

III. GOALS AND STRATEGIES

GOAL 1—Joint Medical Readiness

We will help to ensure that military members of the Armed Forces attain an optimal level of fitness and health and are protected from the full spectrum of medical and environmental hazards. Our medical forces will meet the challenges of a rapidly changing continuum of Service-specific, joint, and combined military operations anywhere at anytime.

The continuum of military operations covers a myriad of medical readiness requirements. These requirements must be executed in an environment of increasing uncertainty and diminishing resources. The primary mission of the MHS is to ensure that our combatant commands have the most capable medical readiness support to meet their ever-changing mission. Our strategies must ensure that we are doctrinally prepared; can support operational requirements; and are well trained, resourced and ready to meet the challenges of our overall mission.

Strategies

- Strive to improve the health and fitness levels of our Armed Forces on a continuing basis.
- Deploy a doctrinally sound medical force that is well trained and equipped to accomplish its mission.
- Advocate research and technology that can optimize human performance and enhance force medical protection.

GOAL 2—Benchmark Health System

We will be the world's best integrated health system.

The MHS spans the continuum of health care from the operational and readiness mission to the delivery of the health benefit. To accomplish this, we must optimize use of the three Service medical departments to meet the MHS mission. Only in this way can we be health- and fitness-focused and responsive to customer needs where cost, quality, and access are paramount.

Strategies

- Communicate the TRICARE benefit so our customers will be educated and responsible consumers.
- Promote prevention and wellness as the foundation of the system.
- Deliver state-of-the-art, outcome-oriented, compassionate care.
- Measure health outcomes and customer satisfaction to identify opportunities for improvement.
- Measure MHS leadership, management, and technical skills.

GOAL 3—Healthy Communities

We will forge partnerships to create a common culture that values health and fitness and empowers individuals and organizations to actualize those values.

The complexity and tempo of military operations requires optimal human performance (reflecting complete physical, mental, and social well-being). In addition, diminishing resources must be targeted to maintain and promote healthy individuals, workplaces, and communities.

Strategies

- Utilize comprehensive, population-based, medical information systems as a foundation for evidence-based disease prevention and health decision making.
- Develop partnerships among the MHS, other Government agencies, and the private sector to create healthier environments and workplaces.
- Provide necessary health information to commanders, policy makers, and individuals who can act to influence health and prevent diseases and injuries.
- Sustain the prevention culture at home and abroad, in peace and war.

GOAL 4—Resources and Structure

We will identify and prioritize resource requirements and establish effective and efficient organizations to support the readiness and benefit missions.

The identification and prioritization of resource requirements and efficient organizations is critically important to the ultimate acquisition of resources to support MHS programs.

Strategies

- Identify and resource medical readiness requirements to meet the rapidly changing continuum of military operations.
- Develop and use analytical models to determine resource requirements for manpower, education and training, facilities, materiel, and equipment.
- Use cost/benefit analysis to determine when outsourcing and privatization are appropriate alternatives for achieving the MHS mission.
- Use best-practice models to achieve maximum efficiencies.

- Employ organizational structures that best support the readiness, efficiency, and effectiveness of the MHS.

GOAL 5—Training and Skills Development

We will train and develop our people for their roles in war and peace.

Well-trained people are the bedrock of a successful health system. Achieving our strategic goals will require developing plans to educate, train, and retain highly qualified and diverse personnel at all levels of the system.

Strategies

- Provide an integrated system of education, training, and professional development to produce skilled leaders and managers at all levels.
- Provide education and training programs to maximize the quality of the medical force.
- Establish requirements-based training criteria to support the MHS mission.
- Pursue opportunities to consolidate, integrate, privatize, and/or outsource training programs.
- Encourage and support a policy of inclusion and advancement for persons representing a variety of backgrounds.
- Promote technology and innovation for education and training.

GOAL 6—Technology Integration

We will integrate technologies into best practices designed to achieve high quality clinical outcomes, decrease health care delivery costs, and improve management processes.

To obtain the full benefit of new technology, we are committed to a value analysis of all requirements. For the integration of new technology to truly succeed, we must provide a measurable performance result that is connected to improvement, increased efficiency, information dominance, and mission accomplishment.

Strategies

- Identify the full range of technologies needed to accomplish the MHS mission.
- Plan for, assess, obtain, install, and maintain technologies to provide cost beneficial, interoperable solutions to meet MHS requirements.
- Train to insert and sustain new technologies.

THE PLAN REVISION PROCESS

The initial strategic plan for the MHS was published in May 1995. The forum and the Hoshin Planning Methodology used in the development of that document were maintained. Some changes in personnel have occurred, but the process has remained intact. This process is the mechanism by which the guiding members of the MHS envision its future and develop the necessary procedures and operations to attain that future.

In March 1997, the strategic planning workgroup embarked on the first revision of the strategic plan. At that time, the workgroup felt there was sufficient impetus to support a re-look at the original MHS Strategic Plan. This impetus came from a number of sources. First, there was a charge from the Executive Members of the Strategic Planning Committee to reevaluate the plan. Second, there was input from the MHS 2020 initiative. This was an extensive futures exercise that peered 25 years into the future. It was a one-year effort that involved over 200 military and private-sector health professionals, along with world-renowned futurists. This process developed four alternative futures and traced 10 critical elements through each of these futures. The group then addressed what near-term steps could be taken that would facilitate the realization of a preferred future rather than merely waiting for the future to happen. Part of the charter of this group was to evaluate the MHS Strategic Plan to see whether it provided the near-term stepping stones toward the preferred future. The group provided valuable input to the strategic planning process. Finally, there was feedback from the February 1997 TRICARE Conference where two focus groups convened and provided responses to specific questions regarding the MHS Strategic Plan.

The workgroup reviewed and incorporated this input/feedback to produce an initial draft revised plan. The draft, though similar in content to the first plan, had some significant differences, including a Statement of Values, that was strongly recommended by the MHS 2020 initiative. Additionally, the workgroup felt the need to break out the concept of health and fitness into a separate goal. The draft went through two additional feedback iterations with the field before finalization. The MHS leadership felt strongly that feedback was essential to elicit ownership and buy-in from the field.

MAJOR STRENGTHS, WEAKNESSES, OPPORTUNITIES, or THREATS CONSIDERED

The workgroup reviewed all activities related to internal and external factors that had been accomplished for the initial strategic plan. In reviewing the environment to be considered, a multitude of internal and external factors were identified. They were classified into categories of major strengths, weaknesses, opportunities, or threats (SWOT), which helped the workgroup to focus effectively on key areas of concern.

The workgroup sought to prioritize these categories in order to best focus their attention on the key issues. Throughout the plan, emphasis was continually placed in the following major areas:

- Readiness—utilizing joint operations and reserves
- Wellness versus illness
- Managed Care growth—Lead Agent role
- Changes in medical care focus from specialty to primary care
- Technology and business process improvements—outcomes measurement, planning
- Changes identified in mission
- Change in resourcing focus
- Health and fitness

Even after drafting the goals for the MHS, during the development of strategies for particular breakthrough issues, the group continued to consistently identify the above areas for ongoing attention. The interdependency between all these areas has been identified throughout the workgroup's activities and has reinforced the original SWOT activities and the focus for the future.

PLANNING TEAM MEMBERS

Rear Admiral Edward D. Martin, M.D., PHS AASD(HA)
Mr. Gary Christopherson, APDASD(HA)
Lieutenant General Ronald R. Blanck, MC, USA
Vice Admiral Harold M. Koenig, MC, USN
Lieutenant General Charles H. Roadman, II, USAF, MC

AIR FORCE
Maj Gen Michael Wyrick
Lt Col Patricia Lewis*
Brig Gen Linda Stierle*
Col Martin Harper*
Col Mike Benge*

ARMY
MG John Cuddy
COL Richard Ursone*
BG John Parker*
COL Herbert Coley*
COL Stuart Baker*

NAVY
RADM S. Todd Fisher
CAPT David Fisher*
RADM Edward Phillips*
CAPT Vernon Peters*
CAPT Paul Tibbits*

HEALTH AFFAIRS
MG Robert Claypool*
Mr. Charles Monfort*
Ms. Gwen Brown*
Dr. John Mazzuchi
Ms. Diana Tabler
Mr. James Reardon
CAPT M. Jane Markley*
Ms. Seileen Mullen
HMCM Karen Sayers*
Ms. Stephanie Blaydes

J-4
RADM Michael Cowan*
CDR Richard Cocrane*

OTHER
BG Patrick Sculley
Mr. Chris LaLonde
Mr. Al Bemis
LTC Patti Hamill*
Col Mary Martin*
CDR Thomas Buffington*
Mr. John Casciotti
CAPT Robert Brawley*
Lt Col Russell Eggert*
Ms. Lynn Pahland*
CMSgt David Bayliss
CSM Walter Scott
HMCM(SS) Michael Stewart

COMMAND SURGEON
RADM J.H. Black
Col Charles Green

LEAD AGENT
Maj Gen Paul Carlton
BG George Brown

* Member of the Planning Work Group

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