The U.S. Coast Guard Office of Health Services Strategic Plan

2011-2015





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MEMORANDUM

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Reply to

CG-112

Attn of:

CDR D. Masters

202 475-5188

To:

Distribution

Subi:

COAST GUARD HEALTH SERVICES PROGRAM - STRATEGIC PLAN

- 1. The purpose of this memo is to provide an updated Strategic Plan. Since the initial plan was implemented in 2008 there have been significant changes to the healthcare landscape. Overall, the plan is a useful resource that dramatically improved coordination, effectiveness and agility across our system. The foundation is solid and the initial goals set forth remain intact, with only a few minor adjustments being incorporated in this update.
- 2. The enclosed Coast Guard Health Services Strategic Plan (2011 2015) is intended to compliment the Health, Safety and WorkLife (HSWL) Service Center's Strategic Plan implemented in 2010. Together, these framework documents provide direction to support a comprehensive annual business planning cycle necessary to set priorities, identify resource needs and forecast demand in a period of constrained resources. The importance of this process cannot be overemphasized; we must continuously improve our ability to meet the needs of Coast Guard beneficiaries while supporting mission execution.
- 3. The Balanced Scorecard remains an active management tool, included as Attachments (A) and (B) to the plan. However, the measurement focus at this time is on development of a smaller set of measures that will provide visibility to key activities. These measures will be solidified upon the "roll out" of the Epic® Electronic Healthcare Record to Coast Guard clinics and implementation of the Patient Centered Medical Home initiative.
- 4. At present there is much uncertainty on current year funding and future budget environments remain unclear. It is vital that our efforts be directed at: providing high quality, timely HSWL services, identification of emerging threats and improvements to Coast Guard population health. Ultimately a key outcome of these efforts is to create value within the organization. Every member of the Coast Guard's HSWL enterprise needs to fully understand our duty to look for ways to improve healthcare delivery while also seeking best uses of limited funds.
- 5. My POC for this matter is CDR Derrick Masters (CG-1123).

Dist: CG Medical Officers

CG Dental Officers CG Clinic Pharmacists CG Clinic Administrators

CG Regional Practice Managers

CG Independent Duty Health Services Technicians (IDHS)

CG Health Services Technicians

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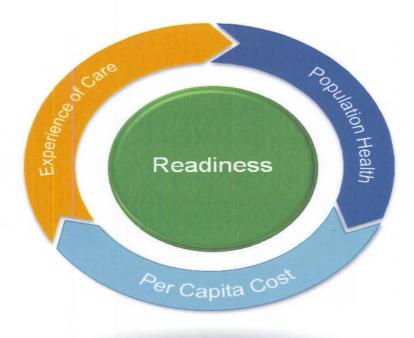
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EXECUTIVE SUMMARY

The Coast Guard's Health Services Program is charged with providing technical expertise, medical oversight and resource architecture that ensures medical readiness and operational capability for mission execution. Maintaining a healthy and protected workforce is a major organizational priority. Ensuring all members receive adequate, timely and quality services are key principles to successfully meeting our mission. It is also paramount that the working environment incorporates the Military Health System (MHS) Quadruple Aim.



Our goals remain effectively unchanged - (1) Ensuring medical readiness, (2) Maintain and further develop contingency response capabilities, (3) Provide quality, accessible and efficient care, (4) Create Chief Financial Officer compliant processes, and (5) Achieve full operational capability and modernization of Coast Guard Mission Support.

This plan is intended to provide the necessary direction for Health, Safety and Work-Life personnel to continue to serve Coast Guard beneficiaries while pursuing continual improvement to increase our contribution to the organization. Additionally, the contents of this plan are intended to be consistent with the recently developed HSWL Service Center Strategic Plan.

OUR MISSION

The mission of the Health Services Program is to:

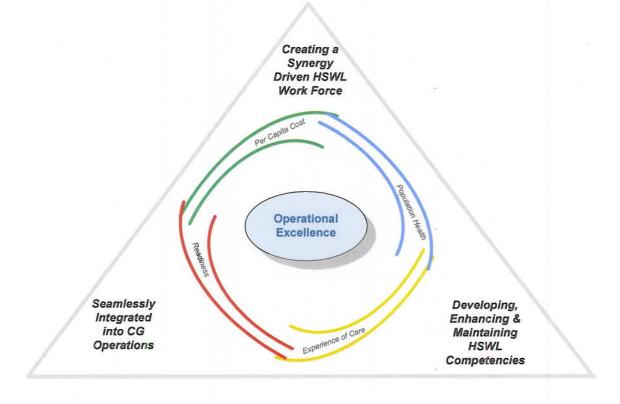
- Provide health care to members in support of Coast Guard missions;
- To ensure health readiness of all members to maintain worldwide deployment status;
- To continually develop and maintain a highly competent Health Service Technician workforce to serve operational assets required to operate in remote locations for extended periods;

• To ensure the availability of quality, cost effective health care for all eligible beneficiaries.



OUR VISION

The vision of Coast Guard Health Services Program is to continually improve and optimize the care and services we provide to our beneficiaries in order to support the full range of Coast Guard missions and sustain the health of those entrusted to our care.



OUR CORE VALUES

We are a values-based, operationally focused organization. Our core values are the never changing foundation that reflect who we are and drive our behavior every day. The values of Coast Guard Health Services are Mission Always, Selfless Service, Leadership and Teamwork, Integrity, Professionalism, and Stewardship. Coast Guard Medicine is committed to promoting these values.

Mission Always. We are committed to supporting the Coast Guard mission. We will be responsive to all threats and all hazards. (*Readiness*)

Selfless Service: We are honored to serve the Coast Guard Active Duty and Reserve Members and beneficiaries who trust us to always meet their needs, anytime, anywhere. *(Readiness)*

Leadership and Teamwork. We lead with passion, respect, and loyalty because this is the best way to achieve our goals and meet our high expectations. We work jointly in close collaboration with line leadership to meet our operational and health support mission. We lead through example, mentoring, and serving others, recognizing that strong leadership is paramount to the delivery of high quality health care. (Experience of Care)

Integrity. We adhere to the highest ethical standards of care and are committed to the principles of patient autonomy, beneficence, nonmaleficence, and justice. (Experience of Care)

Professionalism: We achieve excellence through consistent application of our knowledge, skills and high standards; therefore, education, training and mentoring are a high priority. (Experience of Care, Population Health)

Stewardship: We know effective management and wise use of resources is necessary to achieve our goal of meeting the needs of our customers. (*Per Capita Cost of Care*)

OUR PRINCIPLES

There are common principles that are essential for accomplishing our mission and achieving our vision. They must be embedded into our processes and culture so they are a natural part of everything we do.

Interoperable, interdependent/Joint -- anytime, anywhere. We will define appropriate capacities for each site and work in synergy to efficiently and effectively provide, with network partners, required services where needed.

Flexible & agile capabilities – continually improving while adapting to change. We will move quickly to take advantage of opportunities and stay ahead of the rapidly changing worlds of health care and Coast Guard missions.

Culture of innovation with aligned authority & accountability. We will manage resources and take calculated risks to achieve innovative advances in meeting our mission.

Incentives to promote performance based, cost effective, efficient, customer focused services. We will apply sound management principles to wisely utilize resources and will reward improvements that reduce costs or increase value.

Continuous improvement in health and fitness. We will work to improve health and fitness through prevention and evidence-based disease treatment – keys to operational force effectiveness and improvement in the quality of life for our beneficiaries.

Coast Guard Health Home. We will be patient-centered and employ the best practices in health care delivery as we partner with our patients to make them a member of the team focused on improving their health.

OUR CUSTOMERS

We serve two major customer groups with different needs and must simultaneously employ two strategies to focus our efforts on what is most important to each group. Our customer groups are not mutually exclusive.

Commanders and Service Members collaborate with us to achieve individual medical readiness and enhanced performance. They expect and deserve responsive, capable, coordinated medical services anywhere, anytime. No other health system in the world can provide what we provide. Because we face a rapidly changing multi-mission/multi-threat environment, we must excel at developing and deploying innovative products and services that meet mission requirements. This is part of the overall Military Health System (MHS) "product leadership" strategy.

Our Beneficiaries desire health services that are convenient and tailored to their individual health needs. Providing superb, evidence-based care in a seamless way across our health system of military providers and strategic partners will enable us to partner with our beneficiaries, resulting in behavior that promotes health and conserves resources. The key success factor is our ability to do the simple things well every time. Stated simply, if our beneficiaries are satisfied with us every time they "touch" our system, they will be much more likely to help us help them manage their health over the long term.

OUR STAKEHOLDERS and STRATEGIC PARTNERS

Our Stakeholders and Strategic Partners expect the best medical support for the Coast Guard Member. Our stakeholders include the Congress, President of the United States, Secretary of Homeland Security, Secretary of Defense, Coast Guard Commandant, Service Secretaries, Managed Care Support Contractors and Coast Guard Unit Commanders.



OUR PRIORITIES

Readiness—Aligned and Agile: Our mission is readiness. To be ready, Coast Guard medical personnel must be responsive, agile, and aligned with the operational forces. We must have the right people with the right capabilities continually ready to deploy in support of Coast Guard missions. Our integration into Homeland Security has challenged us to broaden our view of readiness. Our clinics and sickbays must be prepared to support Coast Guard operations during any contingency, to provide expert care to casualties, and to support the Nation's needs for humanitarian relief, disaster assistance and national health emergencies.

Shaping Tomorrow's Force: Our human capital strategy must provide the right force to accomplish our mission. This means refining and shaping our force by recruiting, training and retaining the right mix of health professionals (officer, enlisted and civilian) to ensure delivery of the highest quality care. We must seamlessly integrate the talents and strengths of our entire workforce to accomplish our mission of force health protection.

Quality, Economical Health Services: Coast Guard Health Services will continue to provide the finest, cost-effective health services to Coast Guard active duty members, reservists and family members. In addition, Coast Guard Health Services personnel will serve as the lead advocate for our retirees and family members to ensure availability to health care. In most cases our role for "other than active duty" will be via the TRICARE Civilian Network and Department of Defense Military Treatment Facilities.

Joint Medical Capabilities: Coast Guard Medicine will continue to collaborate with our service counterparts to ensure mission success. We will interface with local, State and Federal agencies as needed to respond to homeland security threats. Since the MHS plays a critical role in national security, we will be trained and fully interoperable with our DoD colleagues and ready to respond-anywhere, anytime.

KEY GOALS

Our strategic goals translate Coast Guard Health Services' mission, vision, values, principles and priorities into a framework for measuring success. By focusing efforts on these strategic goals, Coast Guard Health Services personnel will exceed expectations, which will ultimately drive success. At the highest level of accountability, Coast Guard Health Services has five strategic goals:

- (1) Provide for medically ready and protected Coast Guard Active Duty and Reserve Members.
- (2) Maintain and further develop a contingency response capability and operationally ready Coast Guard Medical Force.
- (3) Provide quality, accessible, efficient, evidence based care, to include implementation of Patient Centered Medical Home and Quadruple Aim concepts.
- (4) Create a Chief Financial Officer (CFO) compliant Coast Guard Healthcare system by emphasizing operational controls and business planning for the Coast Guard's Organic Health Care Delivery System.
- (5) Achieve full operational capability and modernization of Coast Guard Mission Support, to include investments in Information Technology and training/development of workforce.

Each strategic goal will have corresponding strategic objectives. Progress towards attaining strategic objectives will be based on the performance of Health Services activities. Each of the activities deemed critical towards achieving a strategic objective will be measured through performance benchmarks and initiatives.

Performance Measure Framework

Current Initiatives

During the current interval, several major initiatives underway will dramatically alter the state of the Coast Guard's medical program and the ability to achieve the key tenets of this plan. Three of the most significant efforts are briefly described below:

New Health Information System (HIS): In FY10 the Coast Guard procured the Epic® Electronic Health Care Record, which will be the cornerstone of the new HIS. In the early stages of this plan, activities will be directed toward implementing workflows/ processes and business rules, training staff, installing equipment and other activities required to fully implement the HIS in all clinic locations. This is a major undertaking and represents a different direction than the Department of Defense for implementing the Virtual Lifetime Electronic Record (VLER). Epic® will provide the Coast Guard with a cutting edge, industry leading system, which is patient-centric and leverages the latest technology. The software captures all clinical, financial and operational data related to a patient and organizes it into a consistent record accessible to users across the care continuum. Clearly, the ability to monitor daily clinical activities, improve outcomes and reduce overall risk to Coast Guard members will be dramatically enhanced.

Patient Centered Medical Home: Efforts to design, develop and implement a Patient Centered Medical Home (PCMH) are currently underway. PCMH is a health care setting that facilitates partnerships between individual patients, their personal physicians, and when appropriate, the patient's family by tailoring practices to the patient's needs/desires (historically, practices have been physician centered). Each patient has an ongoing relationship with their personal physician, who is trained to provide first contact, continuous and comprehensive care. The physician is responsible for providing for all the patient's health care needs or taking responsibility for appropriately arranging care with other qualified professionals. This includes care for all stages of life: acute care, chronic care and preventive services. Care is coordinated and/or integrated across all elements of the health care system. Care is facilitated by registries, information technology, health information exchange and other means to assure that patients get the indicated care when and where they need it. Quality and Patient Safety are hallmarks of a PCMH.

Implementation of Quadruple Aim – Also, during the current interval, the Military Health System's Quadruple Aim concept will be completely integrated into the Coast Guard medical program. The key tenets of the Quadruple Aim are: Readiness, Population Health, Patient Experience and Per Capita Cost. Placing emphasis on the combined relationships of these key areas is at the heart of this Strategic Plans intent.

Performance Measure Framework

Measurement Focus

In light of these major initiatives the following information is intended to provide a framework to monitor success as this Strategic Plan is carried out, enabling value creation opportunities and building momentum toward organizational excellence. Notes are provided in parenthesis (red text) below to link them with existing measure in the Balanced Scorecard.

| Quad Aim | Strategic Imperative | Performance Measure(s) | Initiatives |
|--------------------|--|---|---|
| Medical Readiness | Individual Medical Readiness Family Readiness | Readiness compliance (S1 measure) EHR Utilization Work-Life Survey | Reserve Health Readiness Program (RHRP) for Periodic Health Assessment & Dental Screening for Reservists (S1 measure) Track/identify deployment limiting conditions (S1 measure) Patient Centered Medical Home Implementation (SG 3 measure) Epic Electronic Health Record Implementation (SG 1,3,4,5 measures) Work-Life Family Readiness programs |
| Me | Healthy workforce (Psychological) | Identify % completed of post deployment health medical needs | Conduct/track Pre and post deployment assessments (PDHA, PDHRA) (S2 measure) Others to be developed Operational Stress Continuum adoption (SG 1 measure) |
| Population Health | Engaging workforce in healthy behaviors Influenza management Adopt HEDIS measures Percentage of population over fat | | Maintain influenza prevention program (S1 measure) Monitor tobacco use Monitor weight program Integrate health lifestyle program HEDIS Women's health measures Identify and prepare for other emerging health threats Implement Population Health Portal access (IP5 measure) Quad Aim/PCMH – Population Health (SG 1 measure) |
| Experience of Care | Evidence-based care 24/7 access to your team (C2 measure) | Enrollee Preventive Health metric HEDIS Index Internal/external EPIC/MRRS Number of referrals by clinic provider (F1 measure) External Accreditation (C3 measure) | Develop system wide policy for access to Medical Home Effective Appointment template Management (F1 measure) Monitor Medical Home initiative Identify elements of patient behavior, e.g. primary & specialty care visits per member per year Adopt NCQA Certification of Medical Home (tentative) |
| Exp | Case Management Personal relationship with your provider | Effectiveness of care for complex Med/Social problems Satisfaction with health care (C1 measure) | Continue Patient Satisfaction Survey and Peer Review; Medical Encounter Review System (MERS) (S3, C1, IP3 measures) Implement Medical Home Continue HSWL SC Case Management Program |

Performance Measure Framework

| | Strategic | Performance | Initiatives | | | | |
|--|---|---|---|--|--|--|--|
| | Imperative | Measure(s) | | | | | |
| Per Capita Cost (Responsible Stewardship) | Optimize all product lines by using standard business planning processes | CG-11/HSWL Budget Execution/Performances Enrollment utilization of ER services Reduce PMPM costs for healthcare Identify provider excess capacity for reallocation of responsibilities | Approval of clinic business plan submission Maximize opportunities to identify and implement solutions that gain efficiency Develop/implement staffing standard (R3 measure) Ensure AFC-57 FRMM Compliance (R1 measure) Adhere to AFC-57 Budget Model | | | | |
| Per C (Responsib | CFO Act compliance | Achieve Audit Compliance in Financial Processes (F2 measure) | Complete Electronic billing MOU with DoD Achieve MERHCF billing (F1 measure) Achieve OHI Billing Capability (F1 measure) Resolve weaknesses identified within DoD MTF claims processing Identify and counter internal weaknesses in business processes (F2 measure) | | | | |
| | Functional EHR | Implementation of CG EHR (IP7 measure) Provider satisfaction with EHR | Sustain EHR Maintain HIPAA Compliance Conduct MIS Program Review Board Enhance Coding Accuracy Conduct periodic Staff Satisfaction surveys | | | | |
| &Growing | Using research to improve performance | Product and Product Services | Implement an in-house IRB | | | | |
| Learning & G | Fully capable CG workforce | Complete EHR Training | Monitor training database (IP4 measure) Track organizational competency development Complete Health Service Corps Analysis Identify IT enhancements to support provider effectiveness Improve deployment capability for contingency response Add professional training courses | | | | |

Balanced Scorecard

Balanced Scorecard

The balanced scorecard is a strategic planning and management tool that is used to align business activities to the vision and strategy of the organization, improve internal and external communications, and monitor organization performance against strategic goals. The balanced scorecard suggests that we view the organization from four perspectives, and to develop metrics, collect data and analyze it relative to each of these perspectives:

The Learning & Growth Perspective

This perspective includes employee training and corporate cultural attitudes related to both individual and corporate self-improvement. In a knowledge-worker organization, people -- the only repository of knowledge -- are the main resource. In the current climate of rapid technological change, it is becoming necessary for workers to be in a continuous learning mode. Learning and growth constitute the essential foundation for success of any knowledge-worker organization.

The Business Process Perspective

This perspective refers to internal business processes. Metrics based on this perspective allow us to know how well the business activities are running, and whether our products and services conform to customer requirements (the mission).

The Customer Perspective

Recent management philosophy has shown an increasing realization of the importance of customer focus and customer satisfaction in any business. These are leading indicators: if customers are not satisfied, they will eventually find other suppliers that will meet their needs. Our healthcare delivery system must adhere to the same principles to satisfy beneficiaries and to develop processes that are efficient and effective.

The Financial Perspective

Timely and accurate funding data will always be a priority, and we must do whatever is necessary to provide it. With the implementation of the Epic® Electronic Medical Record, standardized business planning and other initiatives, it is hoped that more of the processing can be centralized and where possible automated. There is a major organizational emphasis on financials to maintain the ability to meet operational mission requirements. There is a need to include additional financial-related data, such as risk assessment and cost-benefit data, in this category

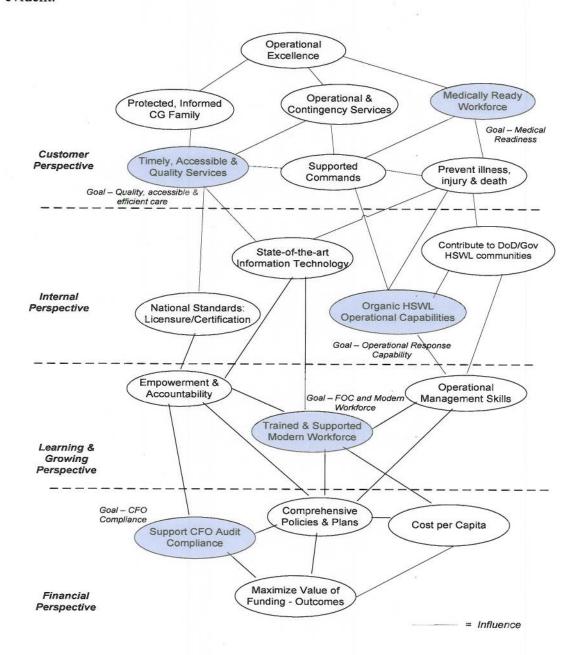
The following two sections seek to: (1) provide some clarity on measures being developed and how the intersect with the Balanced Scorecard perspectives, and (2) provide a visual Strategy Map to help illustrate how our activities are influenced within the perspectives.

Measures of Primary Emphasis

| | Strategic Goal 1 | Strategic Goal 2 | Strategic Goal | Strategic Goal 4 | Strategic Goal 5 |
|------------------------------------|--|--|--|--|--|
| Balanced Scorecard Perspectives | Provide for a Medically Ready & Protected Coast Guard Active Duty & Reserve Member Workforce | Maintain & develop an operational response capability & operationally ready Coast Guard Medical Force. | Provide quality, accessible & efficient care. | Create Chief Financial Officer (CFO) compliant Coast Guard Health Care Financial Management System and an overall increased emphasis on business planning for the Coast Guard's Organic Health Care Delivery System. | Achieve full operational capability & modernization of Coast Guard Mission Support. |
| Customer Perspectives | Readiness Compliance Internal/external EPIC/MRRS Percentage of population over fat | Deploy with CG and DoD assets in training environments | Satisfaction with health care Number of referrals by clinic provider | Staffing Standard | Patient Centered Medical Home implementation |
| Internal Process Perspective | Post deployment health medical needs Enrollee Preventive Health metric MRRS/CGBI data feeds, monitoring, and communication | Track and manage CG/DoD deployments to ensure breadth of knowledge across the organization | Work-Life Survey Effectiveness of care for complex Med/Social problems HEDIS Index Adopt HEDIS measures HSWL SC HPAP surveys | External Accreditation (AAAHC/NCQA) Internal QA process (HPAP) Regional Practice Business Planning Process/Budget Build | Influenza management PCMH/EHR Maintain achieved gains of HSWL SC implementation Leverage regional practice concept for accountability, communication, standardization |
| Learning and Growth: | EHR Utilization PCMH implementation training | Implementation of CG EHR Complete EHR Training Develop Training tracking database and proactively manage training quotas | Provider satisfaction with EHR | Tracking and reconciliation of training quotas Tracking/optimizing utilization of training quotas | HSWL FO Guide/Org Man |
| Financial Perspective | Prioritize funding to Readiness programs for ensured continuity | Dedicate deployment/training quotas targeting operational experiences | Enrollment utilization of ER services | Achieve Audit Compliance in Financial Processes | CG-11/HSWL Budget Execution/Performances |

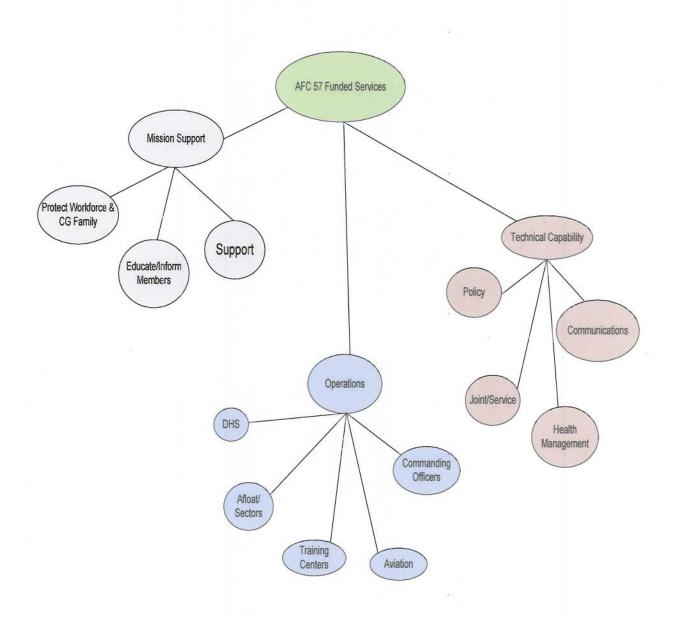
STRATEGIC MAP

The Strategy Map below provides a high level view of how HSWL activities influence each other, illustrated in the context of Balanced Scorecard perspectives. For additional emphasis, the actions that directly support Key Goals are noted. The synergy within HSWL is visible within the Customer Perspective; tenets of Safety and Work-Life are evident.

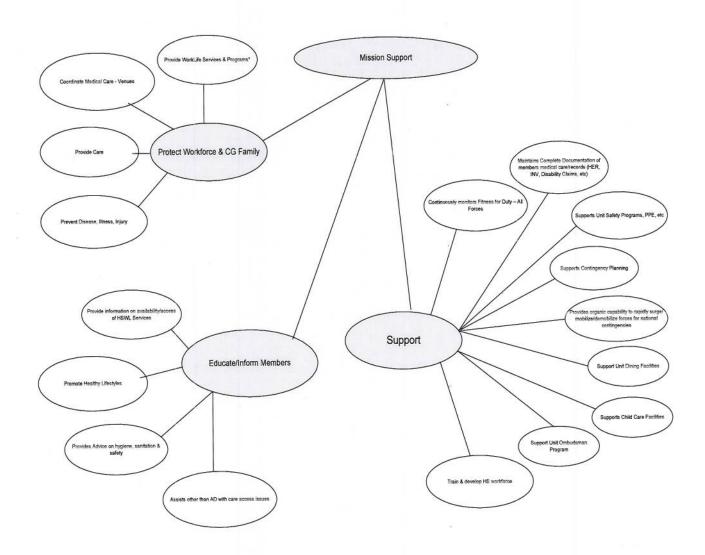


Overview of AFC-57 Funded Services

The following images are provided to illustrate the complexity of the AFC-57 Funded Services of the Coast Guard healthcare delivery system and shows how HSWL services are integrated into overall Coast Guard operational activities.



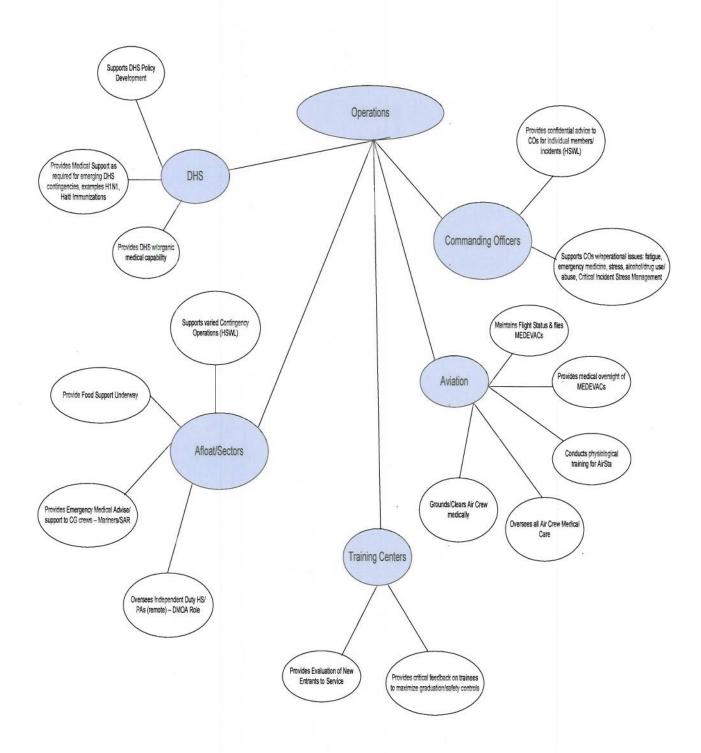
Overview of AFC-57 Funded Services - Mission Support



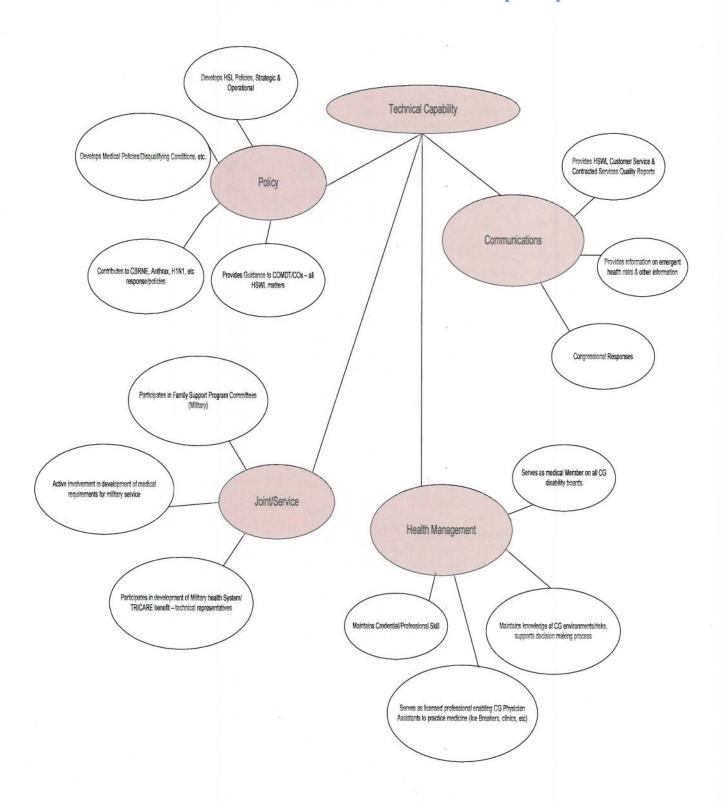
WorkLife Programs*

Health Promotion, Substance Abuse Prevention and Response, Employee Assistance, Workplace Violence, Suicide Prevention, Personal Financial Counseling, Transition and Relocation Assistance, Spouse Employment Assistance, Adoption Reimbursement, Child and Elder Care, Scholarships, Special Needs for Family Members, Family Advocacy (Domestic Violence, Neglect and Abuse), Crisis Intervention, and Sexual Assault Prevention and Response.

Overview of AFC-57 Funded Services - Mission Support



Overview of AFC-57 Funded Services – Technical Capability



IMPLEMENTATION

The information contained in this plan is intended to provide strategic direction to guide and shape development of the Coast Guard Health Services Program into the future. Despite the challenges on the horizon, there are unprecedented opportunities to enhance all aspects of the Coast Guard Healthcare Delivery System. It is the duty of every member of the Coast Guard HSWL team to be familiar with the contents of this plan, while actively contributing each day to make the system more efficient, effective and supportive to the beneficiaries and commands.

The operational period of this plan is five years, however as major initiatives are completed or events occur altering the environment, additional updates or modifications may be required. The Medical Resource Working Group will serve a vital role in monitoring the success of this plan and is responsible for making recommendations as necessary to keep the plan viable.

APPENDIX (A)

Balanced Scorecard Strategic Objectives

This is a list of all available Coast Guard Health Services Strategic Objectives as categorized utilizing the Balanced Scorecard.

Stakeholder Perspective

To meet our Stakeholder's expectations, what must the Coast Guard Office of Health Services accomplish?

S1 Coast Guard forces are medically ready to deploy, their performance is enhanced through medical interventions, and Coast Guard beneficiary communities are protected from medical threats to the extent possible.

The Coast Guard Office of Health Services will identify and make available relevant information and methods necessary to promote health and improve performance so that service members are fit and mission ready.

S2 Death, injuries and diseases are reduced and performance is enhanced during and after Coast Guard operations.

The Coast Guard Office of Health Services will ensure that when service members are sick or injured, they will be treated and returned to duty, or stabilized in a timely manner.

S3 Coast Guard beneficiaries are satisfied with their health care.

Coast Guard will operate an efficient and effective medical system that is user-friendly to the beneficiaries. The system will self-solve problems that arise at the lowest level and minimize administrative burdens for the beneficiaries. The system will maintain the privacy and security of all protected health information.

S4 The Coast Guard Office of Health Services creates healthy communities.

The Coast Guard Health Care Program will promote health through education and partnership with beneficiaries, protect communities from environmental and industrial hazards, and provide high quality care.

S5 The Coast Guard Health Program is reorganized its command and control and billet structure to ensure overall Coast Guard Support Command unity of effort.

The Coast Guard Office of Health Services will lead CG-11 efforts to reorganize the command and control and billet structure of Coast Guard health care facilities and personnel.

Financial Perspective

To meet our shareholders expectations, what must financial outcomes must the Coast Guard Office of Health Services accomplish?

F1 Coast Guard Health Care costs are managed efficiently.

The Coast Guard health care delivery system will be engineered to achieve optimal efficiency and mission effectiveness. The Coast Guard Office of Health Services will reinforce appropriate use of resources and demand for services, and will engage the individual to actively manage his/her health.

F2 The Coast Guard Financial Management Program is compliant with CFO Act and other relevant Federal Financial Management statutory requirements (Organic Clinic System).

The Coast Guard Office of Health Services will coordinate CFO Act remediation efforts and develop an action plan leading to a future unqualified audit opinion.

Customer Perspective

To meet our customer's expectations, what must the Coast Guard Office of Health Services accomplish?

C1 "I am a partner with my healthcare team. We know and care about improving my health."

Coast Guard providers will listen to Coast Guard members, treat all with dignity and provide them with the information they need to manage their health. The Coast Guard health care team will be available to me when the workforce demands them.

C2 "It feels like the Coast Guard and Military Health System was designed just for me."

Coast Guard members will be able to care when they need it. My health team will help me maximize my health.

C3 "I have responsive, capable and coordinated medical services anywhere, anytime."

Coast Guard members will know how to get high quality medical care for themselves and their shipmates anywhere, anytime. Any appropriate, approved provider will meet the Coast Guard's medical needs.

C4 "The Coast Guard Office of Health Services supports me in achieving individual medical readiness and enhancing performance."

The Coast Guard will have a streamlined process for assuring IMR takes the least amount of time away from other mission priorities, and the customer will understand the value of IMR as part of the mission. The customer will support it because the information is available to him/her and the measures will be relevant to him/her as a Coast Guard service member.

Internal Processes Perspective

What must Coast Guard Health Services excel at to meet our Strategic Goals?

IP1 Evidence based medicine is used to improve quality, safety, and appropriate utilization of services

All medical staff will know what most likely will produce the best health outcomes for beneficiaries. This knowledge will be shared with the beneficiaries to develop individual health plans that manage utilization and maximize patient self-care.

IP2 Beneficiaries collaborate with us to improve health outcomes

Through patient education and individualized care, we will work with beneficiaries to improve their understanding of their individual health needs. Together we will change behaviors to promote better health.

IP3 Our health care processes are patient centered, safe, effective and efficient

We will treat every patient with dignity and respect and provide the care that the patient wants, delivered when he/she desires it, in a way that is convenient and comfortable. This will be accomplished in the appropriate setting using the appropriate resources – "Right setting, Right resources, Reasonable cost".

IP4 Joint, interoperable, and interdependent processes effectively deliver care anytime, anywhere

Coast Guard health care providers will be trained and postured to provide world class operational health care at both underway and ashore units. All deployable medical equipment and training will be interoperable and support mission requirements.

IP5 Comprehensive, globally accessible health and business information enables medical surveillance, evidence-based medicine, and effective healthcare operations.

A globally accessible electronic health record (EHR) containing situation ally relevant medical information supporting continuity of care across the theater locale and the spectrum of medical settings will be supported by the MHS. The EHR will support the effective, efficient delivery of health care while capturing data to support medical surveillance, evidence based medicine and better decision-making capabilities.

IP6 Coast Guard Commanding Officer Force Health Protection needs are effectively supported.

Environmental surveillance, combined with development of effective medical countermeasures will support homeland security.

IP7 New products, processes and services will be rapidly developed and deployed to support the mission.

The Coast Guard will coordinate with DoD efforts to rapidly deploy advances in biomedical science and technology that support mission requirements.

IP8 Continuous, efficient health status monitoring focuses health improvement activities

Throughout the life cycle of a Service member, the system will capture and analyze health information and identify health hazards associated with the operational environment enabling focused health promotion and disease prevention.

IP9 Medical Information Security is assessed and managed to prevent privacy and security compromises.

Coast Guard Medical and Database Administrators will ensure all health Services personnel have been adequately trained and vetted prior to receiving access to the Electronic Healthcare Record or other similar systems containing protected health and identity information.

Learning and Growth Perspective

To ensure Coast Guard Health Services Personnel meet stakeholder and customer requirements, what organization culture must exist?

L1 Employees create success for customers

Through incentives, staff will be developed who place customer requirements first when designing processes & accomplishing business activities

L2 The Coast Guard Health Care System embodies performance-based management and a culture of innovation focused on results

Local activities will have the capability and authority to manage to achieve results according to standard measures of success. Incentives will be aligned with desired performance.

L3 Culture of jointness and interagency cooperation

Tri-Service or interagency interdependence will take precedence over independence; cost effective partnerships with other federal or commercial entities will be encouraged. All new processes will be designed for interoperability.

L4 Authority and accountability are aligned throughout the Coast Guard Health Care System

Alignment of responsibility and accountability will be achieved through streamlined organization and governance in an increasingly joint environment.

L5 Personnel are recruited, trained, educated, and retained to meet requirements

The Coast Guard will accurately forecast the demand for people based on mission and market requirements. Through the use of appropriate incentives, people will be recruited, selected, trained, developed, promoted, compensated, retained, transitioned to another element of the Total Force, let go, or retired. Incentives will reward innovation and improved performance.

L6 IM/IT is leveraged to enhance capabilities

Requirements for new information technology will be tied to performance improvement; effective business process redesign will maximize the effectiveness of new IT services and will precede their implementation.

Resources Perspective

To ensure resources are managed properly, what must the Coast Guard be good at?

R1 Resources are predictably available, aligned and transparent

- 1. Our business planning and budget processes will work seamlessly to predict and justify our true needs.
- 2. We will maintain effective relationships with our stakeholders ensuring their continued financial support.
- Funds will be made available to Coast Guard Health Services needs in a timely and predictable manner.
- 4. The use of those funds will be tracked and monitored to ensure accountability for financial management.

R2 Infrastructure is maintained and improved to optimize performance.

Facilities will be sized to meet mission and market requirements. State of the art designs will enable efficient joint operations. Sufficient resources will be available for construction and maintenance.

R3 Human Resource capital is managed effectively.

APPENDIX (B)

ESTABLISH MEASURES OF SUCCESS

Mapping Balanced Scorecard Objectives to a Strategic Goal

To ensure the Coast Guard Office of Health Services makes progress towards its strategic goals, it must track progress towards attaining individual Balanced Scorecard strategic objectives. To effectively track this progress, each Balanced Scorecard objective was mapped to a strategic goal category.

| Balanced Scorecard Perspectives | Strategic Goal 1 Medically Ready and Protected Coast Guard Active Duty and Reserve Member Workforce | Strategic Goal 2 Maintaining and Developing a Deployable, Agile Medical Capability and Operationally Ready Coast Guard Medical Force | Strategic Goal 3 Provide Quality, Accessible and Efficient Health Care | Strategic Goal 4 Transform Coast Guard Health Care Financial Management to be compliant with CFO Act Audit Requirements | Strategic Goal 5 Realign Coast Guard Health Care Command and Control Infrastructure |
|------------------------------------|--|---|---|--|--|
| Stakeholders Perspective | S1, S2, S4 | S1, S2, S4, S5 | S3, S4 | none apply | S5 |
| Financial Perspective | F1 | F1 | F1 | F2 | F1 |
| Customer Perspectives: | C3 | C3 | C1, C2, C3 | C3 | C3 |
| Internal Process Perspective | IP7, IP8, IP6, IP5, IP4, IP1 | IP7, IP8, IP6, IP5, IP4, IP1 | IP9, IP7, IP8, IP6, IP5, IP1 IP4, IP3, IP2 | IP7 | IP4 |
| Learning and Growth: | L1, L2, L3, L4, L5, L6 | L1, L2, L3, L4, L5, L6 | L1, L2, L3, L4, L5, L6 | L1 | L2, L3, L4, L5, L6 |
| Resource Management | R1, R2, R3 | R1, R2, R3 | R1, R2, R3 | R1 | R1, R2, R3 |

Balanced Scorecard Strategic Objectives to be Measured

Ideally, each Balanced Scorecard objective would be measured to ensure progress towards attaining a strategic goal. However, due to resource constraints, this is not possible. Therefore, each objective was prioritized. Those objectives deemed critical to measure have been highlighted below in red.

| Balanced Scorecard Perspectives | Strategic Goal 1 Medically Ready and Protected Coast Guard Active Duty and Reserve Member Workforce | Strategic Goal 2 Maintaining and Developing a Deployable, Agile Medical Capability and Operationally Ready Coast Guard Medical Force | Strategic Goal 3 Provide Quality, Accessible and Efficient Health Care | Strategic Goal 4 Transform Coast Guard Health Care Financial Management to be compliant with CFO Act Audit Requirements | Strategic Goal 5 Realign Coast Guard Health Care Command and Control Infrastructure |
|------------------------------------|--|---|---|--|--|
| Stakeholders Perspective | S1, S2, S4 | \$1, \$2, \$4, \$5 | S3, S4 | none apply | S5 |
| Financial Perspective | F1 | F1 | F1 | F2 | TBD |
| Customer Perspectives: | C3 | C3 | C1, C2, C3 | СЗ | TBD |
| Internal Process Perspective | IP7, IP8, IP6, IP5, IP4, IP1 | IP7, IP8, IP6, IP5, IP4, IP1 | IP9, IP7, IP8, IP6, IP5, IP1 IP4, IP3, IP2 | IP7 | IP4 |
| Learning and Growth: | L1, L2, L3, L4, L5, L6 | L1, L2, L3, L4, L5, L6 | L1, L2, L3, L4, L5, L6 | L1 | L2, L3, L4, L5, L6 |
| Resource Management | R1, R2, R3 | R1, R2, R3 | R1, R2, R3 | R1 | R1, R2, R3 |

Universe of Performance Metrics and Initiatives

The following is a list of performance metrics and initiatives that were considered for the measurement of strategic objectives. The rows highlighted in yellow were deemed critical as they measure the aforementioned high priority strategic objectives.

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|---|--------|----------------------------------|-------------------------------------|------------------------------------|--------------------------|-----------------------|-----------------------|
| C1 | Customer Satisfaction Surveys | 1 | <75% project completion | 75% - 99% project completion | >100% project completion | Monthly | CG-1122 | |
| C2 | Access to Care Standard Met: Specialty (28 average days or less) | 2 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| C2 | Access to Care Standard Met: Dental Routine (21 average days or less) | 3 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| C2 | Access to Care Standard Met: Routine (7 average days or less) | 4 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| C2 | Access to Care Standard Met: Acute (24 average hours or less) | 5 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| C2 | Access to Care Standard Met: Wellness (28 average days or less) | 6 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| C3 | Credentialing and Privileging Compliance (For Providers) | 7 | <75% | 75% - 99% | 100% | Monthly | CG-1122 | |
| C3 | AAAHC Certification for all CG Clinics | 8 | Failure | Less than 3 years | Full . | Monthly | CG-1122 | Monitor and Report |

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|--|--------|---|---|------------------------------------|--------------------------|-----------------------|-----------------------------|
| | | | | | | | | |
| C3 | DMOA: Oversight and Assessment | 9 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote ¹ . |
| C3 | Peer Review Program Compliance | 10 | <75% | 75% - 99% | 100% | Monthly | CG-1122/ HSWL SC | See Footnote. |
| R3 | Clinic Contract Dental Officer Productivity (1.0 c- FTE) | 12 | <1,320 Patient Encounters per year | >1320 - 1759 Patient Encounters per year | >=1760 Patient Encounters | Monthly | HSWL SC | Monitor and Report |
| R3 | Clinic Contract Dental Hygienist Productivity (1.0 c- FTE) | 14 | <1,290 Patient Encounters per year | >1290 - 1719 Patient Encounters per year | >=1720 Patient Encounters | Monthly | HSWL SC | Monitor and Report. |
| R3 | Clinic Contract Medical Provider Productivity (1.0 c- FTE) | 15 | <2475 Patient Encounters per year | >2475 - 3299 Patient Encounters per year | >=3300 Patient Encounters | Monthly | HSWL SC | Monitor and Report. |
| F1 | Medicare Eligible Retiree Health Care Fund Billing Program Implemented | 16 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote. ² |
| R3 | Clinic Active Duty Medical Provider Productivity (1.0 c- FTE) | 17 | <1,920 Patient Encounters per year | >1920 - 2559 Patient Encounters per year | >=2560 Patient Encounters | Monthly | HSWL SC | Monitor and Report. |
| R3 | Clinic Active Duty Dentist Officer Productivity (1.0 c- FTE) | 18 | <1,020 Patient Encounters per year | >1020 - 1359 Patient Sittings per year | >=1360 Patient Sittings | Monthly | HSWL SC | Monitor and Report. |

¹DMOA Oversight monitoring will be completed through Coast Guard Health Information System. ² Effort underway with TMA UBO to determine feasibility of MERHCF billing.

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|--|--------|----------------------------------|-------------------------------------|------------------------------------|--------------------------|-----------------------|-----------------------------|
| F1 | Measure number of clinic TRICARE referrals (e.g. referrals by provider, etc.) | 19 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-1123 | See Footnote.3 |
| F1 | Clinic Appointment Management: Template Management ⁴ | 20 | <75% | 75% - 89% | >90% | Monthly | HSWL SC | TBD |
| F1 | Clinic Appointment Management: No show rate | 21 | >7% | 5% - 7% | <5% | Monthly | HSWL SC | TBD |
| F1 | Referral Management: Implement MCSC metrics. | 22 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | |
| F1 | Referral Management: Measure number of Clinic TRICARE referrals by Branch of service | 23 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | |
| F1 | OHI Billing Program implemented | 24 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote ⁵ . |
| F2 | Health Care Accounts CFO Act OMB A-123 Compliance | 25 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-1012 | See Footnote. |

³ Functionality within Epic System and implementation of Patient Centered Medical Home initiative will provide increased visibility to monitor referral activity.

⁴ Proportion of all open access (acute) appointments booked for a given month that are requested & booked on the

same day
5 Effort underway to determine feasibility to develop billing architecture within Epic System
6 CG-1123 provides representation to Actuarial Medical Liability Workgroup

| Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---|---|---|--|--|---|--|--|
| TBD | 26 | TBD | TBD | TBD | TBD | TBD | TBD |
| Clinic QIIG Compliance as measured by HPAP | 27 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | HSWL SC | See Footnote. ⁷ |
| Peer Review Feedback | 28 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| Patient Advisory Committee Policy Compliance | 29 | <75% | 75% - 89% | >=90% | Monthly | HSWL SC | Monitor and Report |
| TRICARE Customer Service Survey | 30 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| Improve Health Services Communication | 31 | <75% | 75% - 90% | >90% | Monthly | CG-1121/ HSWL SC | |
| HPAP - Skills Training Matrix Compliance through the HPAP | 32 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1121/ HSWL SC | TBD |
| Population Health Portal Deployment, Access and Usage | 33 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| Monthly Medical Account Briefings to CG-11 by CG-10 | 34 | No Briefing Occurred | N/A | Briefing Occurred | Monthly | CG-1012 | Monitor and Report |
| | Clinic QIIG Compliance as measured by HPAP Peer Review Feedback Patient Advisory Committee Policy Compliance TRICARE Customer Service Survey Improve Health Services Communication HPAP - Skills Training Matrix Compliance through the HPAP Population Health Portal Deployment, Access and Usage Monthly Medical Account Briefings | Clinic QIIG Compliance as measured by HPAP Peer Review Feedback Patient Advisory Committee Policy Compliance TRICARE Customer Service Survey Improve Health Services Communication HPAP - Skills Training Matrix Compliance through the HPAP Population Health Portal Deployment, Access and Usage Monthly Medical Account Briefings 34 | TBD 26 TBD Clinic QIIG Compliance as measured by HPAP 28 TRICARE Customer Service Survey 29 Communication 27 TRICARE Customer Service Survey 30 Training Matrix Compliance 475% project completion 31 Training Matrix Compliance 475% project completion 32 Training Matrix Compliance 475% project completion 31 Training Matrix Compliance 475% project completion 33 Training Matrix Compliance 475% project completion 475% project completion 575% project complet | TBD 26 TBD TBD Clinic QIIG Compliance as measured by HPAP 28 TRICARE Customer Service Survey 29 TRICARE Completion 29 TRICARE Customer Service Survey 31 Training Matrix Compliance through the HPAP 32 Training Matrix Compliance through the HPAP 33 Total Deployment, Access and Usage 34 Rocal Parents Policy Completion 34 Rocal Policy Completion 35 Population Health Portal Deployment, Access and Usage 34 Rocal Policy Completion 36 Renchmark: Yellow Yellow Yellow Yellow Project completion 375% - 99% project completion 275% project completion 275% - 99% project completion 27 | Renchmark: Red Renchmark: Yellow Renchmark: Green | Renchmark: Red Renchmark: Red Renchmark: Green Requirement | Renchmark: Red Renchmark: Red Requirement Office |

⁷ Implementation of Epic System and use of "Templates and Best Practices" will enhance efforts.

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|---|--------|----------------------------------|-------------------------------------|------------------------------------|--------------------------|-----------------------|---------------------------|
| IP6 | Epic® deployment | 35 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123/ HSWL SC | |
| IP7 | Coding Accuracy | 36 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote ⁸ |
| IP7 | Monthly MIS Program Review Board Meetings | 37 | No Meeting | n/a | Meeting held on time | Monthly | CG-1123 | Monitor and Report |
| IP8 | TBD | 38 | TBD | TBD | TBD | TBD | TBD | TBD |
| IP9 | Epic® Role-Based Security Program | 39 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-1123 | See Footnote.9 |
| IP9 | HIPAA training requirements compliance | 40 | <75% | 75% - 89% | >90% | Quarterly | CG-1122 | Monitor and Report |
| L1 | Health Services Awards Program Compliance | 41 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | TBD |
| L2 | New Performance Based Management Culture. | 42 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-112 | |
| L3 | Number of new agreements entered and approved. | 43 | TBD | TBD | TBD | TBD | CG-112 | TBD |
| L4 | Transformation Initiatives | 44 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-112 | Monitor and Report |

⁸ Coding is expected to be improved through hiring of Certified Coders and Audit Review process within Epir®.

⁹ Security and User Roles will be managed via the Help Desk contract.

| Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|--|--|---|-------------------------------------|------------------------------------|--|---|---------------------------------------|
| Training Database | 45 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote ¹⁰ . |
| MIS Procurement | 46 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote. 11 |
| AFC-57 Budget Model Development | 47 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote. 12 |
| AFC-57 Resource Proposals Actively Managed and Defended | 48 | TBD | TBD | TBD | Monthly | CG-1123 | Monitor and Report |
| AFC-57 Financial Resources Management Manual (FRMM) Compliance | 49 | <75% | 75% - 90% | >90% | Monthly | CG-1123 | Monitor and Report |
| | MIS Procurement AFC-57 Budget Model Development AFC-57 Resource Proposals Actively Managed and Defended AFC-57 Financial Resources Management Manual (FRMM) | Training Database 45 MIS Procurement 46 AFC-57 Budget Model Development 47 AFC-57 Resource Proposals Actively Managed and Defended 48 AFC-57 Financial Resources Management Manual (FRMM) | Training Database 45 | Training Database 45 | Renchmark: Red Renchmark: Red Renchmark: Yellow Renchmark: Green Renchmark: Yellow Renchmark: Yellow | Benchmark: Red Benchmark: Yellow Benchmark: Green Requirement | Benchmark: Red Requirement Office |

¹⁰ CG health services program needs to assess its mission requirements and current level of qualification. Our training program is very fragmented, needs to be corrected. Each Force Manager to provide the BOD a brief on the state of their respective forces once a

quarter

11 Complete activities for CG Healthcare Information Systems procurement and maintenance

12 Full implementation of Business Planning requirement for budget development/execution to be with use of Object Class as framework.

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|--|----------------|----------------------------------|-------------------------------------|------------------------------------|------------------------------------|-----------------------|--------------------------------------|
| R1 | TBD | 50 | TBD | TBD | TBD | TBD | TBD | TBD |
| R2 | Tracking Minor and Major AC&I projects | 52 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | TBD |
| R3 | A-76 Compliance | 54 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123 | See Footnote ¹³ |
| R3 | Clinic Staffing Standards Policy Development | 55 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1123/ HSWL SC | See Footnote. 14 PCMH Implementation |
| S1 | Periodic Health Assessment Compliance: Coast Guard Active Duty and Reserve | 56 | <75% project completion | 75% - 99% project completion | 100% project completion | Medical Readiness Continuous | CG-1121 | |
| S1 | PHA Compliance (a) CG AD & Reserve (b) CG Health Services Personnel | 57 | <75% | 75% - 90% | >90% | Continuous | CG-1121 | |
| S1 | Immunization Status Compliance: (a) CG AD & Reserve (b) CG Health Services Personnel | 58(a) 58(b) | <75% <90% | 75% - 90% 90% - 98% | >90% | Monthly | CG-1121 | Monitor and Report |

CG-1123 to work closely with workgroup developing Manpower Reporting System to ensure A-76 data integration.

Working Group: Create Staffing Standards Working Group. Draft implement, and enforce new standard. Group also to develop new CG Health Program Manpower Reporting System.

| BSC Objective | Performance Metric (PM) | PM Ref | Performance Benchmark: Red | Performance Benchmark: Yellow | Performance Benchmark: Green | Reporting Requirement | Responsible Office | Initiative |
|---------------|--|----------------|----------------------------------|-------------------------------------|------------------------------------|--------------------------|-----------------------|-----------------------|
| S1 | No Deployment Limiting Condition Compliance | 59 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-1121 | |
| S1 | Dental Readiness Compliance: (a) CG AD & Reserve (b) CG Health Services Personnel | 60(a) 60(b) | <75% <90% | 75% - 90% 90% - 98% | >90% >98% | Monthly | CG-1121 | Monitor and Report |
| S1 | Medical Readiness Lab Test Compliance: Coast Guard Active Duty and Reserve | 61 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| S1 | Individual Medical Equipment Compliance | 62 | <75% Project completions | 75% to 99% Project completion | 100% Project completion | Monthly | CG-1121 | TBD |
| S2 | Medical Encounter Electronic Documentation Compliance | 63 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-1123 | |
| S2 | Pre and Post Deployment Health Assessments Compliance | 64 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| S3 | Customer Satisfaction Survey Program | 65 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| S4 | Population Health Surveillance for CG AD and Reserve, as reported through Peer Review Process | 66 | <75% project completion | 75% - 99% project completion | 100% project completion | Monthly | CG-1122 | |
| \$5 | CG Human Resources Transformation Compliance | 67 | <75% project completion | 75% - 99% project completion | 100% project completion | TBD | CG-112 | |