Background
The foundation of population health management is descriptive analysis of the demographics, health status and needs of the enrolled population. Profiling the number of provider encounters related to chronic conditions or diseases provides an indicator of the health status of the population and demand for services. Such information assists in designing or purchasing services to prevent the progression of disease. Military Treatment Facility (MTF) based services as case management and evidence-based protocols can then be directed toward high-volume conditions.

Congestive Heart Failure (CHF) Prevalence

Measure Definition:
The proportion of MTF enrollees, 18 years and older, with CHF subject to DoD/VA guidelines clinical management.

Benchmark:
N/A

Numerator:
MTF enrollees age 18 years and older identified (see Data Sources & Codes) as having CHF during the 12 months prior to the end of the reporting period.

Denominator:
All MTF enrollees, 18 years and older, at the time of the reporting period.

Data Sources:
- Defense Eligibility Enrollment Registration System (DEERS)
- Standard Inpatient Data Record (SIDR) (M2)
- Standard Ambulatory Data Record (SADR) (M2)
- Comprehensive Ambulatory/Professional Encounter Record (CAPER) (M2)
- Purchased Care Claims Data (NETWORK) (M2)
- Composite Health Care System (CHCS) Managed Care Platform National Enrollment Database (NED) module
Methodology:

- Use DEERS to identify patients enrolled to MTFs.
- Use CAPER (M2), SADR (M2) and NETWORK (M2) data to identify patients who had 2 or more outpatient visits for CHF (non-Emergency Department (ED) visits).
- Use CAPER (M2), SADR (M2) and NETWORK (M2) outpatient data to identify patients with 2 or more ED visits with CHF as the primary diagnosis.
- Use SIDR (M2) and NETWORK (M2) data to identify patients with hospitalizations for CHF.
- Use CHCS Managed Care Platform NED module ad hoc report to identify PCM.

Data Sources & Codes:

Criteria to identify patients with CHF:

- At least one encounter from SIDR (M2) and/or Network (M2) inpatient with one of the listed diagnoses below as primary diagnosis
- At least two encounters (non-ED) from CAPER (M2) / SADR (M2) or Network (M2) outpatient with one of the listed diagnoses below as primary diagnosis
- At least two encounters from Emergency Departments with one of the listed diagnoses below as primary diagnosis

<table>
<thead>
<tr>
<th>Description</th>
<th>ICD-9-CM Codes</th>
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<tbody>
<tr>
<td>CHF</td>
<td>398.91, 402.0, 402.01, 402.11, 402.91, 404.01, 404.03, 404.11, 404.13, 404.91, 404.93, 428.0, 428.1, 428.9</td>
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Prevalence Report:

MTF list of all TRICARE Prime/Plus enrolled patients by PCM with at least one inpatient, two outpatient encounters (primary diagnosis), or two ED encounters (primary diagnosis) for CHF.¹

Prevalence Report Data Elements:

- ACG RUB (only AF users: see ACG methodology)
- Patient's name
- Sponsor's Social Security Number
- Family Member Prefix (FMP)
- Date of Birth
- Age
- Gender
Beneficiary Category (BENCAT)

PCM

Provider Group

Outpatient Visits

Inpatient Visits

ER Visits

Source

Contact Information

Defense Medical Information System (DMIS)

Notes detail for CHF and/or Generic notes entered by users

Recommended Action

Review chronic disease burden data to project health needs associated with chronic diseases/conditions

Consider utilizing condition management programs

Consider implementation of DOD/VA (or other) clinical practice guidelines

Notes:

1 Due to the record reporting lag time, not all of the previous months’ records may be included in this reporting period.

2 DoD/VA guidelines can be located at https://www.qmo.amedd.army.mil/pguide.htm