

## SCOPE

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### FOREWORD

All Defense Enrollment Eligibility Reporting System (DEERS) data provided by the Defense Manpower Data Center (DMDC) to the TRICARE Management Activity (TMA) for the use of determining medical eligibility, enrollment and medical claims payment are subject to the Privacy Act of 1974, as amended.

Release is made to you in accordance with the provisions of the Act allowing for intra-Department release when an appropriate "need to know" exists. As such, the authorized organizations are responsible for using the protected Privacy Act data in accordance with the applicable provisions of the Act.

This Includes:

Only personnel (military, civilian, contractor) with a need to know in the official performance of their duties may be given access, and

The data may only used for the specific purposes agreed to by DMDC, and TMA.

The organization to which these data are provided must insure that sufficient physical and procedural safeguards are in place to satisfy the requirements of the Act.

These data should be returned to DMDC or destroyed when the approved use has been accomplished and no copies should be retained.

Any additional intended uses must first be submitted through TMA to DMDC for approval and are prohibited unless and until favorably coordinated with DMDC.

In addition, DMDC only provides the DEERS data for the specific purposes defined:

- Enrollment data is for the authorized enrollment of beneficiaries into valid health care plans as defined under the provisions of this [Request For Proposal \(RFP\)](#).
- Eligibility data is for reporting the eligibility of a beneficiary on DEERS as of the time of the eligibility inquiry.
- Claims data is for the processing and resolution of claims submitted for reimbursement of medical care received.

## 1.0. PURPOSE

The purpose of this chapter is to outline the systems and technical procedures to be followed in carrying out the data interchange between the Defense Enrollment Eligibility Reporting System (DEERS) and contractor systems for TRICARE benefit eligibility, enrollment, other health insurance (OHI), and catastrophic caps and deductibles with DEERS.

This document provides specifications for the Managed Care Support Contractors' (MCSCs) and the Uniformed Services Family Health Plan (USFHP) providers interface with DEERS. Additionally, the DEERS Business Rules document is a companion document to this chapter.

This document details the following:

- Terminology used within DEERS (see Chapter 3, [Addendums A and B](#))
- Methodology for identifying individuals within DEERS
- Functional events from the MCSCs and the USFHP providers that trigger a request to inquire and/or update data within DEERS
- "Rules of the road" for accessing and updating data within DEERS

## 2.0. SYSTEM OVERVIEW

### 2.1. Program Description

DEERS serves as a centralized Department of Defense (DoD) data repository of personnel and medical data **and is the definitive data source of identify and the verification of affiliation with the DoD**. The DEERS database contains detailed personnel eligibility information for benefits and entitlements distribution to Uniformed Services<sup>1</sup> members; United States (U.S.) sponsored foreign military members; DoD and Uniformed Services civilians; other personnel as directed by the DoD; and their eligible family members. DEERS supports essential day-to-day operations in a broad range of functional areas, including personnel, medical, and finance.

DEERS is updated by batch transactions from the Uniformed Services' automated personnel, finance, medical, and mobilization management systems, the Department of Veterans Affairs (VA), and the Centers for Medicare and Medicaid Services (CMS). DEERS is also accessed and updated by online DEERS client applications, such as the Real-Time Automated Personnel Identification System (RAPIDS), and interfacing client systems of the Military Health System (MHS), such as the Composite Health Care System (CHCS). DEERS helps detect and prevent fraud and abuse in DoD benefits and entitlements distribution.

DEERS provides and receives updates to enrollment and eligibility verification data from existing DEERS' applications and interfacing information systems, as well as from other

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<sup>1</sup> The seven Uniformed Services are: U.S. Army, U.S. Navy, U.S. Marine Corps, U.S. Air Force, U.S. Coast Guard, their National Guard and Reserve components, U.S. Public Health Service (USPHS), and the National Oceanic and Atmospheric Administration (NOAA) Commissioned Corps.

DoD, Uniformed Services, and non-DoD information systems, in accordance with DoD Directive (DoDD) 8000.1, "Defense Information Management (IM) Program," dated 27 October 1992, Reference (1). It provides statistical and demographic data to support DoD and Uniformed Services peacetime and wartime missions. DEERS maintains casualty identification data on members of the Uniformed Services, and other personnel as designated by DoD, to support casualty identification and verification of entitlement eligibility for surviving family members.

DEERS maintains information that helps make administration of the MHS more effective and efficient, along with other benefit and entitlement systems which derive basic eligibility information from DEERS. DEERS also provides and maintains medical and personnel readiness information on Uniformed Services members and other personnel as designated by the DoD. It maintains data on Uniformed Services members and retired sponsors to facilitate eligibility verification for Government educational programs, for example, the Montgomery GI Bill (MGIB). DEERS helps make Uniformed Services members, other personnel as designated by the DoD, and their family members more aware of their benefits and entitlements, which are verified through DEERS. It improves the timeliness of providing DoD benefits and entitlements to Uniformed Services members, other personnel as designated by the DoD, and their family members.

DEERS serves as DoD's centralized personnel locator service, in accordance with Section 113 of 10 United States Code (USC)<sup>2</sup> by maintaining current addresses for members of the Armed Forces, and providing those addresses upon request to the Federal Parent Locator Service of the Department of Health and Human Services' Office of Child Support Enforcement. It maintains the right index fingerprint<sup>3</sup> of all eligible individuals in a pay or annuity status, including active duty and Reserve military personnel, retired sponsors, survivors receiving annuity payments derived from the service of a deceased person, and civilian employees with identification cards issued through RAPIDS. The Undersecretary of Defense (USD) (Comptroller) uses these fingerprints to improve service member identification and verification techniques.

## 2.2. DEERS Users

DEERS supports multiple functional communities, as well as multiple user levels within those communities. DEERS users include Federal (DoD and non-DoD) Government agencies and organizations, state government agencies, and Government support contractors who access DEERS data through DEERS' client applications or the user's interfacing client system.

DEERS data users include:

- Benefits and entitlements providers for eligibility verification in conjunction with claims processing and providing or denying services
- The Designated Providers (DPs)

<sup>2</sup> Section 113 of Title 10, United States Code, "Enforcement of Child Support Obligations of Members of the Armed Forces," Reference (4).

<sup>3</sup> The right index fingerprint will be kept for use by the USD (Comptroller), as authorized by USD (P&R) memorandum, "Fingerprint Capture Policy," dated 15 July 1997, Reference (5).

- Uniformed Services personnel activities, recruit reception centers, and academies that add or update individual beneficiary DEERS data and issue the Uniformed Services identification (ID) cards
- Health care managers, health benefits advisors (HBAs), and specialists in DoD medical and dental communities
- DMDC Support Office (DSO) staff who perform beneficiary and user support operations
- DoD and Uniformed Services executive community, which uses DEERS statistics and demographic data for a number of functions
- Military Health system (MHS) Data Repository (MDR)

The Office of the Undersecretary of Defense (OUSD) for Personnel and Readiness (P&R) and the DMDC maintain contact with DEERS users through the Joint Uniformed Services Personnel Advisory Committee (JUSPAC), the Joint Uniformed Services Medical Advisory Committee (JUSMAC), and the Joint Uniformed Services Dental Advisory Committee (JUSDAC). These committees are composed of functional members from the personnel, medical, and dental communities within the active duty, National Guard, and Reserve components. Members of the personnel, medical, and dental communities who function at the level of the Office of the Secretary of Defense (OSD) support these committees.

### 2.3. History

The DoD provides certain benefits and entitlements, such as medical and dental care, commissary, exchange, and morale, welfare, and recreation (MWR) privileges, to its Uniformed Services members, retired sponsors, certain civilian employees, and family members. DEERS was initiated to improve the control and management of how these benefits and entitlements are distributed.

Originally, DoD medical care was provided only by military hospitals and dental clinics. Medical care provided by civilian sources was first authorized for eligible family members of active duty Uniformed Services members (including National Guard and Reserve component members on active duty in excess of 30 days) on December 7, 1957. During January 1967, civilian medical care was extended to retired service members, and their eligible family members, as well as to widows and widowers of deceased service members. In 1981, civilian medical care was extended to family members of North Atlantic Treaty Organization (NATO)-sponsored foreign military members serving in the U.S. The program providing medical care by civilian sources was called the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) until 1996, when it was renamed DoD Managed Care Program, TRICARE. TRICARE is currently governed by 32 Code of Federal Regulations (CFR) Part 199, Reference (7).

Based on several General Accounting Office (GAO) investigative audits of accountability deficiencies in the CHAMPUS program, the GAO published "Potential for Improvements in the Civilian Health and Medical Program of the Uniformed Services (Summary Report)," dated 19 July 1971, Reference (9). This report identified the use of the Uniformed Services ID cards issued to Uniformed Services members, retired sponsors, DoD and Uniformed Services civilians, State Department employees, NATO-sponsored foreign

military members, and their eligible family members, as insufficient tools to manage military medical care and contain the growth of CHAMPUS costs. The report provided recommendations for improving military medical care and CHAMPUS program management.

In response to the GAO report, the OASD for Health and Environment (H&E) created the Health Personnel All-Volunteer Task Force to study the report's conclusions and recommendations, and to offer corrective solutions to Congress. Between 1971 and 1975, studies conducted by the Health Personnel All-Volunteer Health Task Force; the Center for Advanced Studies; the GAO; and the Assistant for Audit Operations, OASD (H&E) (Comptroller), indicated that fraudulent use of military health care services cost the DoD approximately \$60 million annually. This \$60 million included approximately \$20 million in unauthorized direct care services provided at military treatment facilities (MTFs), and approximately \$40 million in unauthorized CHAMPUS claims payments.

Based on the findings in these reports, the House Appropriations Committee Report for Fiscal Year (FY) 1975 (No. 93-1255), Reference (9), directed the DoD to: (1) initiate a program to improve the control and distribution of available military health care services; (2) project and allocate costs for health care programs; and (3) minimize fraudulent use of military health care benefits and entitlements by unauthorized persons.

After two years of study, the OASD (H&E) Health Studies Task Force published The Health Beneficiary Enrollment Eligibility System for the Department of Defense working paper in February 1977, Reference (10). This paper concluded that the best method to deter fraudulent use of medical services was to institute eligibility verification. This verification required that an automated, centralized system be established to contain the names of all eligible beneficiaries and match or link those beneficiaries to specific sponsors.

The working paper acknowledged that the DoD and the seven Uniformed Services already had a basic eligibility verification vehicle in place, namely the Application for the Uniformed Services Identification and Privilege Card (Department of Defense [DD] Form 1172)<sup>4</sup>. This form was completed by the sponsor and used by the Uniformed Services to authorize issuance of the DoD Uniformed Services Identification and Privilege Card (DD Form 1173) to family members. The DD Form 1173 authorized the family member's access not only to medical care, but also to DoD commissary, exchange, and MWR benefits or entitlements. The DD Form 1172 could serve as the enrollment form for the centralized beneficiary system, and the DD Form 1173 could serve as the membership card certifying eligibility for benefits or entitlements. Since DoD and Uniformed Services procedures were already in place to issue both DD Form 1172 and DD Form 1173, using these forms would not require additional training for the Uniformed Services personnel completing or processing the forms.

The next steps were to identify the functional and technical requirements for an automated centralized beneficiary system that would support the beneficiary enrollment and eligibility verification concept, and to build a demonstration model. The Enrollment Demonstration System was completed in 1978. Based on the Enrollment Demonstration

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<sup>4</sup> The DD Form 1172 was redesigned in 1981 and renamed the "Uniformed Services Identification Card and DEERS Enrollment."

System's successful operation, both the House and Senate Appropriations Committee Reports of December 1979 (for FY 1980) recommended funding for DoD enrollment and eligibility verification project. Following congressional approval of the funding, the OASD (HA) and the OASD for Manpower, Installations, and Logistics (MI&L) established the DEERS Project.

In early 1980, the DEERS Project evolved into the DEERS Program. On October 14, 1981, the Deputy Secretary of Defense (DepSecDef) published DoDD 1341.1, "Defense Enrollment Eligibility Reporting System (DEERS)," Reference (11), that officially established the DEERS Program; the DEERS PM position; the DEERS Program Office (DPO); and assigned overall policy and procedural responsibilities for the DEERS Program jointly to the Assistant Secretary of Defense (Health Affairs) (ASD(HA)) and the Assistant Secretary of Defense for Manpower, Reserve Affairs, and Logistics (ASD (MRA&L)).

On March 2, 1982 the Deputy Secretary of Defense (DepSecDef) published DoD Instruction (DoDI) 1341.2, "Defense Enrollment Eligibility Reporting System Procedures," Reference (12), which: (1) further delineated the specific responsibilities of the DPO PM; and (2) created the DEERS Steering Group, DEERS Steering Group Secretariat, DEERS Work Groups and Work Group Committees, and the Configuration Control Board.

In 1982, the DoD expanded the DEERS Program to include verification of beneficiary eligibility for non-medical benefits and entitlements to commissary, exchange, and MWR. This expansion was based on the need to control fraud, waste, and abuse in the management of DoD non-medical benefits and entitlements that were previously mandated by Congress in Title 10 USC, Chapter 54. Since DD Form 1172 and the ID card were already in use to validate these benefits and entitlements, as well as to verify eligibility for medical entitlements, it made sense to include verification for all benefits and entitlements in DEERS.

In 1985, the OASD (HA) established the Reportable Disease Database (RDDDB) to collect information on reportable infectious diseases. This DEERS client application collects information on Human Immunodeficiency Virus (HIV) infection test results from all service military members and from certain DoD and Uniformed Services civilian employees. The RDDDB can collect information on other diseases, such as hepatitis. The negative or positive results of these HIV tests are reported to the DEERS Division for test registration into DEERS. The data in the RDDDB is extremely sensitive and can only be accessed online by designated persons in the Offices of the Surgeons General of the Uniformed Services. The DEERS database reports a Yes flag for the HIV test, which indicates only that a test was taken, and the date the test went on file. Personnel community users are restricted to viewing only *Yes* or *No* flags and test registration dates for this medical data.

In 1986, the DEERS mission was expanded by Congress<sup>5</sup> to include enrolling non-active duty National Guard and Reserve members and their eligible family members. This enrollment supported the DoD mission to project future military medical costs in the event of the activation and/or mobilization of these National Guard and Reserve members; and to estimate future Military Treatment Facility (MTF), CHAMPUS, and space available (contract) dental care costs for their family members. Additionally, this enrollment supported eligibility

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<sup>5</sup> National Defense Appropriations Bill for Fiscal Year 1986.

verification for commissary, exchange, and MWR benefits or entitlements which Title 10 USC, Chapter 54 authorized for this population.

Also in 1986, for FY 1987<sup>6</sup>, Congress modified Title 10 USC, Chapter 55 to direct the DoD to develop and implement a dental insurance plan for CHAMPUS-eligible family members of active duty and National Guard and Reserve sponsors who were on active duty orders for at least 24 months. The DEERS mission was again expanded to support eligibility verification for this program, which was titled the Uniformed Services Active Duty Dependent Dental Plan (DDP), and subsequently renamed the TRICARE Active Duty Family Member Dental Plan (TFMDDP) program.

Between 1986 and 1990, DEERS expanded further when several client applications (interfacing client systems) were developed to support the medical community. These client applications were and are still used to add and update tumor data, and to add the storage location of the duplicate dental pan-oral radiograph (Panograph) used for casualty identification. Personnel community users are restricted to viewing the date of the most recently received Panograph. The client applications and interfacing client systems allowed the medical community user to view beneficiary eligibility data in read-only mode, and to update beneficiary residential addresses and telephone numbers.

Because certain DoD military installations were to be closed, the National Defense Authorization Act (NDAA) for FY 1993 required the DoD to include a mail order and retail pharmacy program in all managed care programs initiated, awarded, or renewed after January 1993. This program is referred to as the Base Realignment and Closure (BRAC) Pharmacy program. The BRAC Pharmacy program applies to DoD beneficiaries, including Medicare-eligibles, residing in the vicinity of a BRAC-closed installation. The BRAC Pharmacy contractor uses a proprietary application to view the BRAC enrollment data. Mail-order pharmacy benefits are currently administered through the National Mail Order Pharmacy (NMOP). The TRICARE Mail Order Pharmacy Program (TMOP) succeeded NMOP in the fall 2003.

In July 1997, the DEERS mission was once again expanded to store the right index fingerprint<sup>7</sup> of all eligible individuals in a pay or annuity status, including active duty and Reserve military personnel; retired sponsors; survivors receiving annuity payments derived from the service of a deceased person; and entitled civilian employees to be used by the USD (Comptroller). This improved service member identification and verification techniques. In October 1997, DEERS was tasked to serve as the Department's centralized personnel locator service in accordance with Section 113 of 10 USC<sup>8</sup> by maintaining current addresses for members of the Armed Forces, and providing addresses upon request to the Federal Parent Locator Service of the Department of Health and Human Services' Office of Child Support Enforcement. The TRICARE Selected Reserve Dental Program (TSRDP) was also implemented in 1997. In 1998, the TRICARE Retiree Dental Program (TRDP) was

<sup>6</sup> National Defense Appropriations Bill for Fiscal Year 1987.

<sup>7</sup> The right index fingerprint will be kept for use by the USD (Comptroller), as authorized by the USD (P&R) memorandum, "Fingerprint Capture Policy," dated 15 July 1997, Reference (f).

<sup>8</sup> Section 113 of Title 10, United States Code, "Enforcement of Child Support Obligations of Members of the Armed Forces," Reference (e).

implemented. The DEERS mission expanded to support eligibility determination for both dental programs.

Earlier attempts at a partial DEERS redesign included an application merge effort to consolidate online applications accessing the Eligibility Database, and an Enrollment Sponsor Redesign, initiated to modularize and incorporate tables in the existing Enrollment Database's software. In 1994, DEERS was designated as an OUSD (P&R) migration system. To ensure DEERS' orderly evolution to an open systems environment and conformance with DoD standards, the Enrollment Eligibility Reconciliation (E2R) project was begun in January 1995. This project was initiated to reengineer the DEERS data model. The new data model would implement new business rules using rules-based tables to derive Uniformed Services benefits/entitlements, and capitalize upon many advances in hardware, software, and system design techniques. This new data model would improve data quality and overcome DEERS' limitations of inflexibility, high maintenance and modification costs, and inefficiency. Analyzing benefit categories and the rules of eligibility applied to them clearly indicated that the benefits/entitlements rules could be defined to support automated determination of the benefits/entitlements eligibility set.

Because RAPIDS is the primary means for updating eligible family member information in the DEERS Eligibility Database, it was chosen as the first client application to be reengineered for compatibility with the DEERS environment. Together, DEERS and RAPIDS reengineering efforts were known as the DEERS Redesign Project.

From 1998 through 1999 DEERS continued to coordinate the TMA directed requirements for the expanded Eligibility, Enrollment, OHI, and Claims Coverage included in the DEERS/Medical Interface Operational Description of November 5, 1999. In addition, during this period the TMA along with DEERS investigated how to make the TRICARE health plans portable across the individually managed geographic regions and contracts. The direction, from the Joint Chiefs of Staff, to make the program plans portable for the benefit of the enrolled beneficiary population, and the standing Congressional mandate to develop a central enrolled database for the TRICARE programs, led to the development of the National Enrollment Database (NED).

DEERS phased in elements of the NED with the implementation of the Defense Online Eligibility and Enrollment System (DOES) in support of the Federal Employee Health Benefit Plan (FEHBP) enrollment in 2000. The DOES is the standard enrollment application developed by DEERS to verify eligibility and perform enrollment related functions into any DEERS maintained Health Care Delivery Program (HCDP). DOES became the eligibility and enrollment application for the TRICARE Senior Supplement Demonstration (TSSD) project.

During the period of 1999 DEERS\RAPIDS was assigned a role in the development of the DoD Smart Card using Integrated Circuit Chips (ICCs) and Public Key Infrastructure (PKI) certification and intelligent data chip on the card. This project evolved into the DoD Common Access Card (CAC) for DoD affiliated sponsors. The DMDC formed the Access and Authentication Technology Division (AATD) from DEERS to focus on the DoD CAC project, which was implemented worldwide in the fall of 2001.

In the spring of 2005, AATD was renamed Card Technology and Identity Solutions (CTIS). Also, based on the NDAA FY 2000, Public Law 106-65, sec. 711, Chapter 55 of title 10,

USC 1076a., 32 CFR 199.13 the TRICARE Active Duty Family Member Dental Plan (TFMDP) and the Guard/Reserve Dental Program were consolidated into one inclusive dental insurance program with expanded coverage for the Guard/Reserve sponsors and their family members. The consolidated program, the TRICARE Dental Program (TDP), became the first implementation of the expanded business process using DOES as the eligibility and enrollment application, automated notifications back to the enrolling entity, and claims coverage inquiries for the processing of TDP dental claims. The TDP became the first medical program to operate all business processes in the NED.

On July 16, 2001 the NED was successfully implemented to TRICARE medical-facilities worldwide using a central eligibility and enrollment application platform (DOES), a central enrollment database of record NED and the portability of health care coverage and fees across the geographically managed health care contracts. At the same time DEERS became the issuing source for the TRICARE universal beneficiary health care enrollment card. This card is issued to each TRICARE-enrolled beneficiary upon initial enrollment, transfer across contracts, change of enrollment program, and may be reissued when the card is lost or damaged. This is the first time the enrollment card is issued centrally with a standard format in support of the health care portability initiatives.

On July 19, 2004, the Deputy Secretary of Defense signed DoDD 1000.25, the Personnel Identity Protection (PIP) Program, which directs the Department to use emerging technologies to support the protection of individual identity and safeguard DoD physical assets and logical systems. In conjunction with this directive, DEERS is identified as the official identification system for the DoD. The Identity Authentication Office was established to focus on identity services to support physical and logical access needs across the DoD.

On September 24, 2005, the final step to ensuring enrollment portability was achieved with the Final Policy Consolidation. DMDC converted all enrollment policies to DoD level policies rather than contractor-based policies.

While legislative updates and Congressional mandates often expand current programs and business processes, DEERS keeps focused on providing responsive service to the DoD beneficiary population.

### 3.0. DOCUMENT OVERVIEW

This document is divided into the following sections:

- Chapter 3, Section 1.1 describes the scope of this document.
- [Chapter 3, Section 1.2](#) lists the documents that are referenced within this document.
- [Chapter 3, Section 1.3](#) presents the basic terms and concepts necessary to understand DEERS and its interfaces.
- [Chapter 3, Section 1.4](#) presents an overview of the interface design.
- [Chapter 3, Section 1.5](#) details the functions supported by the DEERS interface.
- [Chapter 3, Section 1.6](#) describes DEERS Technical Support Operations (Help Desk Support).

- [Chapter 3, Section 1.7](#) details the Test and production Environments.