



DEFENSE BASE CLOSURE AND REALIGNMENT COMMISSION DCN: 12051
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July 13, 2005
JCS # 14

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Executive Director:
Charles Battaglia

Mr. Bob Meyer
Director
BRAC Clearinghouse
1401 Oak St.
Roslyn VA 22209

Dear Mr. Meyer:

I respectfully request a written response from the Department of Defense concerning the following requests submitted for the Medical Joint Cross-Service clearinghouse team:

The recommendations reduce the number of facilities that medical enlisted staff can use to obtain their Phase II inpatient care experience. How do the services plan to provide the necessary inpatient care given the reduced numbers of facilities available? What alternatives have been proposed and what are the timelines for the implementation of any alternatives? Please provide in as much detail as possible.

Additionally, the reduced number of facilities will also impact on the services ability to provide other medical education such as training of residents and specialized training necessary for deployment--have alternatives been proposed?

What will be the source of medics/how will billets be resourced when or if expeditionary force is required? Given the planned consolidation of training from four locations to one at Fort Sam Houston, will there be any potential problems in fielding the require medics needed by the services especially for the increased demand for medics in expeditionary force requirements.

If many bases are transitioning from in-patient care to ambulatory care, what will be the process for training the medical staff for deployment and in-patient care?

Given that Fort Carson does not show a cost savings, what is the benefit for implementing the recommendation?

As plans are formulated to downsize inpatient services, will the over 65 population affect the decision for either maintaining or constructing facilities to accommodate this workload? Have you considered the ripple effect of eliminating the inpatient function at the hospitals identified in the recommendations and has there been any effort to identify the extent of this ripple effect at said hospitals. If this ripple effect has been identified please list the hospitals that will be affected? DCN: 12051

Given that there are many more hospitals that could have been recommended for realigning inpatient services and creating outpatient clinics with ambulatory surgery centers what criteria was used for selecting these ten?

Please describe how it was determined in all the areas affected by changes to medical services that the private sector could accommodate military beneficiaries.

What is the cost for tearing down Walter Reed and rebuilding in place? How would this be accomplished?

What is the cost of refurbishing/upgrading Walter Reed and maintaining it and the Armed Forces Institute of Pathology?

I would appreciate your response by July 19, 2005. Please provide a control number for this request and do not hesitate to contact me if I can provide further information concerning this request.

Yours sincerely,

Frank Cirillo
Director
Review & Analysis