DCN 1382

BSAT BASE STRUCTURE ANALYSIS TEAM

4401 Ford Avenue • Post Office Box 16268 • Alexandria, Virginia 22302-0268 • (703) 681-0490

MEMORANDUM

October 13, 1994

The attached sheets reference the sources of information in DON Data Call for Medical used to develop the data and scores transmitted to the Joint Group. There were two calls issued (1) Capacity or CAP and (2) Military Value or M. The page and question numbers refer to those in the original data call as issued to field activities.

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

				SOURCE	
CRITERION 1. MISSION			DATA CALL	PAGE	QUES N
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS		CAPACITY	3	1
A1	CIVILIAN PRIMARY CARE RATIO				
	(a)	CIVILIAN PRIMARY CARE PROVIDERS	CAPACITY	9	5
	(b)	TOTAL POPULATION (MILITARY AND CIVILIAN)	CAPACITY	10	6
		RATIO			
A2	CIVILIAN INPATIENT CAPABILITY				
	(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	CAPACITY	11&12	7&7A
	(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	CAPACITY	12	ERR
	(c)	# OF OPERATING BEDS AT MTF	CAPACITY	4	2
		RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN THE MTF			
CRITERION 2: FACILITIES					
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)		MILITARY VALUE	12	7C
F2	INSTALLATION REAL PROPERTY RATING		MILITARY VALUE	10	7
F3	WEIGHTED AGE		MILITARY VALUE	10	7
F4	JCAHO LIFE SAFETY SCORE		MILITARY VALUE	15	7E
CRITERION 3: CONTINGENCY					
MC1	DISTANCE TO AN AIR HUB		MILITARY VALUE	16	8E
MC2	BED EXPANSION CAPABILITY		CAPACITY	4	2
CRITERION 4: COST/MANPOWER					
C1	COST / MANPOWER				
	(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	CHAMPUS DATA CALL FROM HA		
	(b)	MTF COST PER RWP	MILITARY VALUE	24	14A
		RATIO OF CHAMPUS COST TO MTF COST			

LINEAR PROGRAMMING MODEL DATASET

	DMIS ID	BRANCH	FACILITY NAME	INSTALLATION	ST	MTF BEDS	AV MTF BEDS	EXP BEDS	TOTAL HOSP	AVAIL CIVBEDS	AV BED RATIO	PHY/POP RATIO	AD+ADFAM	OTHERS	FUNCT VALUE	TYPE FAC	EAST WEST
DATA CALL						CAP	CAP	CAP	CAP	CAP	CAP	CAP	CAP	CAP	SCORE SHEET	N/A	N/A
PAGE						4	4	4	11&12	11&12	11&12	9&10	3	3			
QUESTION NO						2	2	2	7&7A	7&7A	7&7A	5&6	1	1			

DEPARTMENT OF THE NAVY
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20350-1000

MM-0352-F7
BSAT/CD
19 October 1994

MEMORANDUM FOR CHAIR, MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

Subj: PROVISION OF CERTIFIED NAVY DATA TO BRAC-95 MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

In compliance with the Internal Control Plan for Managing the Identification of DoD Cross-Service Opportunities as Part of the DoD 1995 Base Realignment and Closure Process, dated 13 April 1994, and as authorized by the Executive Secretary, BRAC-95 Steering Group by memorandum dated 23 August 1994, I am forwarding the enclosed data and information to be used for analysis by the Military Treatment Facilities and Graduate Medical Education Joint Cross-Service Group. This data was obtained by the Department of the Navy in response to the Military Treatment Facilities and Graduate Medical Education Joint Cross-Service Group's request for information issued on 25 April 1994 and was certified in accordance with the DON BRAC-95 policy and procedures.

The documents enclosed consist of a certified copy of the data call responses received from the activities as listed on the attachment. The only changes authorized for the enclosed responses will be any technical corrections made in errors identified by internal DON verification checks, or for any additional clarifying information requested by the Joint Cross-Service Group. In either circumstance, another formal transmission will be made by the Department of the Navy for any such data submitted to the Joint Cross Service Group.

Charles P. Nemfakos
Vice Chairman,
Base Structure Evaluation Committee

Attachments

MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

Revisions to the Department of the Navy Capacity and Military Value Data Calls for the following activities:

National Naval Medical Center, Bethesda
Naval Medical Center, Portsmouth
Naval Medical Center, San Diego
Naval Hospital, Bremerton
Naval Hospital, Pensacola
Naval Hospital, Jacksonville
Naval Hospital, Camp Pendleton
Naval Hospital, Great Lakes
Naval Hospital, Cherry Point
Naval Hospital, Twentynine Palms
Naval Hospital, Oak Harbor
Naval Hospital, Corpus Christi
Naval Hospital, Beaufort
Naval Hospital, Lemoore
Naval Hospital, Groton
Naval Hospital, Charleston
Naval Hospital, Patuxent River
Naval Hospital, Millington
Naval Hospital, Newport

Attachment

PENDLETON

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	74,874	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	3,047					
(b)	TOTAL POPULATION (MILITA	3	2,768,902					
	RATIO		908	2	15%	0.30	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	24					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	~~2,064~~ 16.66					
(c)	# OF OPERATING BEDS AT M	1	120					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		~~17.37~~ 13.88	1	15%	0.15	40%	0.06
	TOTAL:					7.45	40%	2.98
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	92	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.99	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	17.61	5	40%	2.00	20%	0.40
F4	JCAHO LIFE SAFETY SCORE	1	3	5	30%	1.50	20%	0.30
	TOTAL:			30		6.50	20%	1.30
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	3.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	265	6	50%	3.00	20%	0.60
	TOTAL:					8.00	20%	1.60
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$5,264.21					
(b)	MTF COST PER RWP	1	$4,700.63 4,726.76					
	RATIO OF CHAMPUS COST TO MTF CO		1.12	7.00	100%	7.00	20%	1.40
	TOTAL:			7.00		7.00	20%	1.40
	TOTAL FUNCTIONAL SCORE:							7.28

	DATA
SET-UP BEDS	102
AVAILABLE BEDS	222

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	117,900	15,764	133,664
	ASSIGNED	35,955	4,601	40,556
	REGION	0		0

SAN DIEGO
I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRA MEDICAL CENTERS

	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION						
P1 ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	365,307 ~~365,513~~	7.00	100%	7.00	40%	2.80
A1 CIVILIAN PRIMARY CARE RATIO						
(a) CIVILIAN PRIMARY CARE PROVIDERS	2,797					
(b) TOTAL POPULATION (MILITARY AND CIVI	2,674,000					
RATIO	956					
A2 CIVILIAN INPATIENT CAPABILITY						
(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	23	20				
(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	2,069	1941				
(c) # OF OPERATING BEDS AT MTF	422					
RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN THE	4.90	4.60				
TOTAL:				7.00	40%	2.80
CRITERION 2: FACILITIES						
F1 FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	98.10	99.7 10	15%	1.50	20%	0.30
F2 INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.50	20%	0.30
F3 WEIGHTED AGE	7.13	7	40%	2.80	20%	0.56
F4 JCAHO LIFE SAFTEY SCORE	2	8	30%	2.40	20%	0.48
TOTAL:				8.20	20%	1.64
CRITERION 3: CONTINGENCY						
MC1 DISTANCE TO AN AIR HUB	3.00	10	50%	5.00	20%	1.00
MC2 BED EXPANSION CAPABILITY	583	6	50%	3.00	20%	0.60
TOTAL:				8.00	20%	1.60
CRITERION 4: COST/MANPOWER						
C1 COST / MANPOWER						
(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$6,440.49					
(b) MTF COST PER RWP (SEE INSTRUCTION	$4,940.85 4,887.86					
RATIO OF CHAMPUS COST TO MTF COS	1.30 1.32	9.00	100%	9.00	20%	1.80
TOTAL:		9	100%	9.00	20%	1.80
TOTAL FUNCTIONAL SCORE:						7.84

	DATA
SET-UP BEDS	393
AVAILABLE BEDS	~~845~~ 617

	RETIRED	OTHERS	TOTAL
RETIREE CATCHMENT	120,297	25,341	145,638
ASSIGNED	95,733	16,691	112,424
REGION	279,325	46,934	326,259

Review F.V.

SAN DIEGO AS A COMMUNITY HOSPITAL

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE*	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	188,255	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR(	3	2,797					
(b)	TOTAL POPULATION (MILITAI	3	2,674,000					
	RATIO		956	2	15%	0.30	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 M CATCHMENT AREA	3	~~22~~ 20					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	1,941					
(c)	# OF OPERATING BEDS AT M	1	~~572~~ 422					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN TH		~~3.39~~ 4.60	~~10~~ 2	15%	1.50	40%	0.60
	TOTAL:					8.80	40%	~~3.52~~ 3.04
CRITERION 2: FACILITIES		ALABAMA, FOX REDSTONE						
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	98	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATIN	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	7.13	7	40%	2.80	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	1	2	8	30%	2.40	20%	0.48
	TOTAL:			35		8.20	20%	1.64
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	3.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	583	10	50%	5.00	20%	1.00
	TOTAL:					10.00	20%	2.00
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$6,440.49					
(b)	MTF COST PER RWP	1	$4,940.85					
	RATIO OF CHAMPUS COST TO MTF CO		1.30	9.00	100%	9.00	20%	1.80
	TOTAL:			9.00		9.00	20%	1.80
	TOTAL FUNCTIONAL SCORE:							~~8.96~~ 8.48

Redo F.V.

TWENTYNINE PALMS

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	23,000	5	70%	3.50	40%	1.40
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	15					
(b)	TOTAL POPULATION (MILITA	3	39,400					
	RATIO		2,627	8	15%	1.20	40%	0.48
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	1					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	20					
(c)	# OF OPERATING BEDS AT M	1	~~29~~ 30					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		0.68	10	15%	1.50	40%	0.60
	TOTAL:					6.20	40%	2.48
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	100	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	1.00	10	70%	7.00	40%	2.80
F4	JCAHO LIFE SAFETY SCORE	1	NO SCR	NA	30%	0.00	0%	0.00
	TOTAL:			30		10.00	20%	2.00
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	* 5.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	40	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,999.58					
(b)	MTF COST PER RWP	1	$3,449.93					
	RATIO OF CHAMPUS COST TO MTF CO		1.45	10.00	100%	10.00	20%	2.00
	TOTAL:			10.00		10.00	20%	2.00
	TOTAL FUNCTIONAL SCORE:							7.58

3,551.80
1.4076
1.407

		DATA
SET-UP BEDS		0
AVAILABLE BEDS		~~29~~ 70

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	5,011	0	5,011
	ASSIGNED	5,011	0	~~5,011~~ 52,50
	REGION	0	0	0

* Per Capt. Golembieski. FAX from facility to come.

LEMOORE

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	22,516	5	70%	3.50	40%	1.40
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	361					
(b)	TOTAL POPULATION (MILITA	3	969,651					
	RATIO		2,686	8	15%	1.20	40%	0.48
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	3					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	~~459~~ 51					
(c)	# OF OPERATING BEDS AT M	1	37					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		~~12.41~~ 1.38	19	15%	0.15	40%	0.06
	TOTAL:					4.85	40%	~~1.94~~ 2.42
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	87	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATI	1	1.23	3	15%	0.45	20%	0.09
F3	WEIGHTED AGE	1	31.50	3	40%	1.20	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			25		6.00	20%	1.20
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	7.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	~~2~~ 3	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,731.38					
(b)	MTF COST PER RWP	1	$7,195.32	7,302.67				
	RATIO OF CHAMPUS COST TO MTF CO		0.66 .647	2.00	100%	2.00	20%	0.40
	TOTAL:			2.00		2.00	20%	0.40
	TOTAL FUNCTIONAL SCORE:							~~4.64~~ 5.12

	DATA
SET-UP BEDS	32
AVAILABLE BEDS	69

RETIREES		RETIRED	OTHERS	TOTAL
	CATCHMENT	9,537	2,493	12,030
	ASSIGNED	9,537	2,493	12,030
	REGION	0	0	0

GROTON

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	20,151	5	70%	3.50	40%	1.40
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PR	3	894					
	(b) TOTAL POPULATION (MILITA	3	1,088,279					
	RATIO		1,217	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	3					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	195					
	(c) # OF OPERATING BEDS AT M	1	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		7.80	1	15%	0.15	40%	0.06
	TOTAL:					4.10	40%	1.64
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	96	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	1.94	~~6~~ 5	15%	0.90	20%	0.18
F3	WEIGHTED AGE	1	22.76	4	40%	1.60	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	3	5	30%	1.50	20%	0.30
	TOTAL:			25		5.50	20%	~~1.10~~ 1.07
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	45.00	9	50%	4.50	20%	0.90
MC2	BED EXPANSION CAPABILITY	1	96	2	50%	1.00	20%	0.20
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$5,026.61					
	(b) MTF COST PER RWP	1	$4,027.88	? 4021.10				
	RATIO OF CHAMPUS COST TO MTF CO		1.25	8.00	100%	8.00	20%	1.60
	TOTAL:			8.00		8.00	20%	1.60
	TOTAL FUNCTIONAL SCORE:							~~6.44~~ 5.41

		DATA
SET-UP BEDS		75
AVAILABLE BEDS		100

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	20,597	2,519	23,116
	ASSIGNED	14,709	2,660	17,369
	REGION	0	0	0

PENSACOLA

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	47,769	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	163					
(b)	TOTAL POPULATION (MILITA	3	344,406					
	RATIO		2,112	6	15%	0.90	40%	0.36
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	8					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	916					
(c)	# OF OPERATING BEDS AT M	1	104					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		8.81	1	15%	0.15	40%	0.06
	TOTAL:					8.05	40%	3.22
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	89	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATI	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	18.98	5	40%	2.00	20%	0.40
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			34		7.85	20%	1.57
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	7.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	161	4	50%	2.00	20%	0.40
	TOTAL:					7.00	20%	1.40
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,107.34					
(b)	MTF COST PER RWP	1	$4,448.93	4990.19				
	RATIO OF CHAMPUS COST TO MTF CO		0.92	5.00	100%	5.00	20%	1.00
	TOTAL:			5.00		5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:							7.19

	DATA
SET-UP BEDS	117
AVAILABLE BEDS	221

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	33,957	4,558	38,515
	ASSIGNED	33,957	4,537	38,494
	REGION	0	0	0

JACKSONVILLE

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	64,858	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PR	3	872					
	(b) TOTAL POPULATION (MILITA	3	1,090,273					
	RATIO		1,252	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	7					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	879					
	(c) # OF OPERATING BEDS AT M	1	131					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		6.71	1	15%	0.15	40%	0.06
	TOTAL:					7.60	40%	3.04
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	96	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.88	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	29.14	3	40%	1.20	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			33		7.20	20%	1.44
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	2.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	228	5	50%	2.50	20%	0.50
	TOTAL:					7.50	20%	1.50
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,224.27					
	(b) MTF COST PER RWP	1	$4,653.73	4,714.69				
	RATIO OF CHAMPUS COST TO MTF CO		0.91 .89	5.00	100%	5.00	20%	1.00
	TOTAL:			5.00		5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:							6.98

	DATA
SET-UP BEDS	45
AVAILABLE BEDS	176

RETIREES		RETIRED	OTHERS	TOTAL
	CATCHMENT	41,460	8,802	50,262
	ASSIGNED	41,460	8,802	~~50,262~~ 56,262
	REGION	0	0	0

GREAT LAKES

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	37,555	8	70%	5.60	40%	2.24
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	10,881					
(b)	TOTAL POPULATION (MILITA	3	5,106,784					
	RATIO		469	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	67					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	7,100					
(c)	# OF OPERATING BEDS AT M	1	136					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		52.20	1	15%	0.15	40%	0.06
	TOTAL:					5.90	40%	2.36
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	99	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	34.00	3	40%	1.20	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	2	8	30%	2.40	20%	0.48
	TOTAL:			31		6.60	20%	1.32
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	10.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	718	10	50%	5.00	20%	1.00
	TOTAL:					10.00	20%	2.00
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,740.16					
(b)	MTF COST PER RWP	1	$5,884.36	5,966.49				
	RATIO OF CHAMPUS COST TO MTF CO		0.81 .79	4.00 3.00	100%	4.00	20%	0.80
	TOTAL:			4.00		4.00	20%	0.80
	TOTAL FUNCTIONAL SCORE:							6.48

	DATA
SET-UP BEDS	92
AVAILABLE BEDS	228

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	22,068	8,306	30,374
	ASSIGNED	22,068	6,877	28,945
	REGION	0	0	0

BETHESDA

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRA MEDICAL CENTERS

		RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION							
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	413,679	8.00	100%	8.00	40%	3.20
A1	CIVILIAN PRIMARY CARE RATIO						
(a)	CIVILIAN PRIMARY CARE PROVIDERS	6,012					
(b)	TOTAL POPULATION (MILITARY AND C	4,~~620~~,349					
	RATIO	~~770~~ 725					
A2	CIVILIAN INPATIENT CAPABILITY						
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	~~50~~ 53					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	~~3,870~~ 4048					
(c)	# OF OPERATING BEDS AT MTF	~~384~~ 342					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T	~~10.07~~ 11.84					
	TOTAL:				8.00	40%	3.20
CRITERION 2: FACILITIES							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	93.90	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATING	2.96	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	25.77	4	40%	1.60	20%	0.32
F4	JCAHO LIFE SAFTEY SCORE	2	8	30%	2.40	20%	0.48
	TOTAL:				7.00	20%	1.40
CRITERION 3: CONTINGENCY							
MC1	DISTANCE TO AN AIR HUB	20.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	779	8	50%	4.00	20%	0.80
	TOTAL:				9.00	20%	1.80
CRITERION 4: COST/MANPOWER							
C1	COST / MANPOWER						
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,757.01					
(b)	MTF COST PER RWP (SEE INSTRUCTI	$6,008.23	$6040.36				
	RATIO OF CHAMPUS COST TO MTF C	0.96	5.00	100%	5.00	20%	1.00
	TOTAL:		5	100%	5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:						7.40

Redo F.V.

		DATA
SET-UP BEDS		75
AVAILABLE BEDS		459

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	160,289	31,708	191,997
	ASSIGNED	40,018	7,058	47,076
	REGION	544,770	130,708	675,478

BETHESDA AS A COMMUNITY HOSPITAL

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE*	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	42,361	9	70%	6.30	40%	2.52
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PRC	3	6,012					
(b)	TOTAL POPULATION (MILITA!	3	4,360,349					
	RATIO		725	2	15%	0.30	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 M CATCHMENT AREA	3	~~60~~ 53					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	~~3,870~~ 4048					
(c)	# OF OPERATING BEDS AT M	1	342					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN TH		~~11.32~~ 11.84	~~10~~ 1	15%	1.50	40%	0.60
	TOTAL:					8.10	40%	~~3.24~~ 2.42

Redo F.V.

ALABAMA, FOX REDSTONE

CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	94	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATIN	1	2.96	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	25.77	4	40%	1.60	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	2	8	30%	2.40	20%	0.48
	TOTAL:			32		7.00	20%	1.40
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	20.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	779	10	50%	5.00	20%	1.00
	TOTAL:					10.00	20%	2.00
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$5,757.01					
(b)	MTF COST PER RWP	1	$6,008.23					
	RATIO OF CHAMPUS COST TO MTF CO		0.96	5.00	100%	5.00	20%	1.00
	TOTAL:			5.00		5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:							~~7.64~~ 6.62

PATUXENT RIVER

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	8,995	2	70%	1.40	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PR	3	~~40~~ 54					
	(b) TOTAL POPULATION (MILITA	3	228,500					
	RATIO		~~5.712~~ 4231	10	15%	1.50	40%	0.60
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	~~8~~ 2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	~~110~~ 72					
	(c) # OF OPERATING BEDS AT M	1	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		~~5.51~~ 3.60	~~1~~ 4	15%	0.15	40%	0.06
	TOTAL:					3.05	40%	~~1.22~~ 1.40
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	64	7	15%	1.05	20%	0.21
F2	INSTALLATION REAL PROPERTY RATI	1	2.74	~~10~~ 9	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	26.59	4	70%	2.80	40%	1.12
F4	JCAHO LIFE SAFETY SCORE	1	NO SCR	NA	~~30%~~	0.00	0%	0.00
	TOTAL:			21		5.35	20%	~~1.07~~ 1.04
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	0.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	32	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,768.63					
	(b) MTF COST PER RWP	1	$8,103.54 $8,268.21					
	RATIO OF CHAMPUS COST TO MTF CO		0.59 .57	1.00	100%	1.00	20%	0.20
	TOTAL:			1.00		1.00	20%	0.20
	TOTAL FUNCTIONAL SCORE:							~~3.89~~ 3.74

	DATA
SET-UP BEDS	0
AVAILABLE BEDS	20

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	10,321	1,093	11,414
	ASSIGNED	5,913	193	6,106
	REGION	0	0	0

Redo F.V.

LEJEUNE

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	79,722	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	522					
(b)	TOTAL POPULATION (MILITA	3	640,000					
	RATIO		1,226	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	2					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	83					
(c)	# OF OPERATING BEDS AT M	1	176					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		0.47	10	15%	1.50	40%	0.60
	TOTAL:					8.95	40%	3.58
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	98	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.97 ~~3.00~~	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	11.5 ~~11.30~~	6	40%	2.40	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			36		8.40	20%	1.68
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	12.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	238	5	50%	2.50	20%	0.50
	TOTAL:					7.50	20%	1.50
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$3,783.70					
(b)	MTF COST PER RWP	1	$3,923.91 ? 3973.13					
	RATIO OF CHAMPUS COST TO MTF CO		0.96 .95	5.00	100%	5.00	20%	1.00
	TOTAL:			5.00		5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:							7.76

	DATA
SET-UP BEDS	48
AVAILABLE BEDS	224

RETIREES		RETIRED	OTHERS	TOTAL
	CATCHMENT	19,876	1,336	21,212
	ASSIGNED	19,876	1,336	21,212
	REGION	0		0

~~Redo I.C.R.R.~~ + ~~Redo F.V.~~

CHERRY POINT

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE*	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	27,792	6	70%	4.20	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	341					
(b)	TOTAL POPULATION (MILITA	3	337,655					
	RATIO		990	2	15%	0.30	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MI CATCHMENT AREA	3	2					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	116					
(c)	# OF OPERATING BEDS AT M	1	~~26~~ 40					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN THE		~~4.46~~ 2.9	~~10~~ 6	15%	1.50	40%	0.60
	TOTAL:					6.00	40%	~~2.40~~ 2.16
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	37	4	15%	0.60	20%	0.12
F2	INSTALLATION REAL PROPERTY RATI	1	1.20	2	15%	0.30	20%	0.06
F3	WEIGHTED AGE	1	47.00	1	40%	0.40	20%	0.08
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			17		4.30	20%	0.86
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	2.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	27	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$3,780.03					
(b)	MTF COST PER RWP	1	$5,743.53 5,898.42					
	RATIO OF CHAMPUS COST TO MTF COS		0.66 .64	2.00	100%	2.00	20%	0.40
	TOTAL:			2.00		2.00	20%	0.40
	TOTAL FUNCTIONAL SCORE:							~~4.76~~ 4.52

	DATA
SET-UP BEDS	0
AVAILABLE BEDS	~~26~~ 40

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	22,816	2,197	25,013
	ASSIGNED	12,501	1,420	13,921
	REGION	0		0

FCFD
IFPP

NEWPORT

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	10,927	3	70%	2.10	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	789					
(b)	TOTAL POPULATION (MILITA	3	1,003,464					
	RATIO		1,271	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	5					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	320					
(c)	# OF OPERATING BEDS AT M	1	0					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		320.00	1	15%	0.15	40%	0.06
	TOTAL:					2.70	40%	1.08
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	* 65	7	15%	1.05	20%	0.21
F2	INSTALLATION REAL PROPERTY RATI	1	1.80	5	15%	0.75	20%	0.15
F3	WEIGHTED AGE	1	65.45	1	40%	0.40	20%	0.08
F4	JCAHO LIFE SAFETY SCORE	1	2	8	30%	2.40	20%	0.48
	TOTAL:			21		4.60	20%	0.92
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	20.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	0	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3						
(b)	MTF COST PER RWP	1	$2,086.36 ?					
	RATIO OF CHAMPUS COST TO MTF CO		0.00	1.00	100%	1.00	20%	0.20
	TOTAL:			1.00		1.00	20%	0.20
	TOTAL FUNCTIONAL SCORE:							3.30

	DATA
SET-UP BEDS	0
AVAILABLE BEDS	0

RETIREES	RETIRED	OTHERS	TOTAL
CATCHMENT	24,019	6,157	30,176
ASSIGNED	16,423	4,892	21,315
REGION	0	0	0

* Small data input error. Would not affect score so correction not made.

NOTE: Decision made not to include in model. No further verification necessary.

CHARLESTON

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	26,954	6	70%	4.20	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	650					
(b)	TOTAL POPULATION (MILITA	3	500,000					
	RATIO		769	2	15%	0.30	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	8					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	621					
(c)	# OF OPERATING BEDS AT M	1	90					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		6.90	1	15%	0.15	40%	0.06
	TOTAL:					4.65	40%	1.86
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	95	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.09	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	1	23.45	4	40%	1.60	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	3	5	30%	1.50	20%	0.30
	TOTAL:			26		5.65 560	20%	1.1 1.10
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	7.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	90	2	50%	1.00	20%	0.20
	TOTAL:					6.00	20%	1.20
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,008.92					
(b)	MTF COST PER RWP	1	$3,598.34 3621.71					
	RATIO OF CHAMPUS COST TO MTF CO		1.11	7.00	100%	7.00	20%	1.40
	TOTAL:		1.1069	7.00		7.00	20%	1.40
	TOTAL FUNCTIONAL SCORE:							5.59 5.56

		DATA
SET-UP BEDS		0
AVAILABLE BEDS		90

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	34,659	0	34,659
	ASSIGNED	34,659	0	34,659
	REGION	0		0

BEAUFORT

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERIA WEIGHT	CRITERI SCORE
CRITERION 1. MISSION						
P1 ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	~~17,987~~ 17078	4	70%	2.80	40%	1.12
A1 CIVILIAN PRIMARY CARE RATIO						
(a) CIVILIAN PRIMARY CARE PROVIDERS	151					
(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	166,789					
RATIO	1,105	3	15%	0.45	40%	0.18
A2 CIVILIAN INPATIENT CAPABILITY						
(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	2					
(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	113					
(c) # OF OPERATING BEDS AT MTF	49					
RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN THE MTF	2.31	7	15%	1.05	40%	0.42
TOTAL:				4.30	40%	1.72
CRITERION 2: FACILITIES						
F1 FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	84	9	15%	1.35	20%	0.27
F2 INSTALLATION REAL PROPERTY RATING	2.69	~~10~~ 9	15%	1.50	20%	0.30
F3 WEIGHTED AGE	45.4 ~~46.17~~	~~1~~ 2	40%	0.40	20%	0.08
F4 JCAHO LIFE SAFETY SCORE	2	8	30%	2.40	20%	0.48
TOTAL:		28		5.65	20%	~~1.13~~ 1.18
CRITERION 3: CONTINGENCY						
MC1 DISTANCE TO AN AIR HUB	7.00	10	50%	5.00	20%	1.00
MC2 BED EXPANSION CAPABILITY	54	2	50%	1.00	20%	0.20
TOTAL:				6.00	20%	1.20
CRITERION 4: COST/MANPOWER						
C1 COST / MANPOWER						
(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,914.84					
(b) MTF COST PER RWP	$5,297.54 ? 5435.15					
RATIO OF CHAMPUS COST TO MTF COST	0.74 .72	3.00	100%	3.00	20%	0.60
TOTAL:		3.00		3.00	20%	0.60
TOTAL FUNCTIONAL SCORE:						~~4.85~~ 4.70

	DATA
SET-UP BEDS	31
AVAILABLE BEDS	80

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	13,411	1,718	15,129
	ASSIGNED	7,431	872	8,303
	REGION	0		0

PORTSMOUTH

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRA MEDICAL CENTERS

		RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION							
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	518,210	10.00	100%	10.00	40%	4.00
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	~~237~~ 742					
	(b) TOTAL POPULATION (MILITARY AND CI	1,417,907					
	RATIO	~~5,982~~ 1893					
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	17 ~~18~~					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	~~1,600~~ 1538					
	(c) # OF OPERATING BEDS AT MTF	431					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN TH	~~3.73~~ 3.57					
	TOTAL:				10.00	40%	4.00
CRITERION 2: FACILITIES							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	92.20	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATING	2.35	~~8~~ 7	15%	1.20	20%	0.24
F3	WEIGHTED AGE	34.36	3	40%	1.20	20%	0.24
F4	JCAHO LIFE SAFTEY SCORE	5	1	30%	0.30	20%	0.06
	TOTAL:				4.20	20%	~~0.84~~ .81
CRITERION 3: CONTINGENCY							
MC1	DISTANCE TO AN AIR HUB	15.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	176	2	50%	1.00	20%	0.20
	TOTAL:				6.00	20%	1.20
CRITERION 4: COST/MANPOWER							
C1	COST / MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,428.59					
	(b) MTF COST PER RWP (SEE INSTRUCTIO	$4,479.33					
	RATIO OF CHAMPUS COST TO MTF CO	0.99	5.00	100%	5.00	20%	1.00
	TOTAL:		5	100%	5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:						~~7.04~~ 7.01

Must Review F.V.

PORTSMOUTH

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRA MEDICAL CENTERS

		RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION							
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	518,210	10.00	100%	10.00	40%	4.00
A1	CIVILIAN PRIMARY CARE RATIO						
(a)	CIVILIAN PRIMARY CARE PROVIDERS	237					
(b)	TOTAL POPULATION (MILITARY AND CI	1,417,907					
	RATIO	5,982					
A2	CIVILIAN INPATIENT CAPABILITY						
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	15					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	1,153					
(c)	# OF OPERATING BEDS AT MTF	431					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN TH	2.67					
	TOTAL:				10.00	40%	4.00
CRITERION 2: FACILITIES							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	92.20	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATING	1.80	5	15%	0.75	20%	0.15
F3	WEIGHTED AGE	62.29 ?	0	40%	0.00	20%	0.00
F4	JCAHO LIFE SAFTEY SCORE	5	1	30%	0.30	20%	0.06
	TOTAL:				2.55	20%	0.51
CRITERION 3: CONTINGENCY							
MC1	DISTANCE TO AN AIR HUB	15.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	176	2	50%	1.00	20%	0.20
	TOTAL:				6.00	20%	1.20
CRITERION 4: COST/MANPOWER							
C1	COST / MANPOWER						
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,428.59					
(b)	MTF COST PER RWP (SEE INSTRUCTIO	$4,479.33	$4,383.09				
	RATIO OF CHAMPUS COST TO MTF CO	0.99	5.00 6.00	100%	5.00	20%	1.00
	TOTAL:		5	100%	5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:						6.71

REVISED

	DATA
SET-UP BEDS	6
AVAILABLE BEDS	437

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	118,606	10,163	128,769
	ASSIGNED	80,255	7,759	88,014
	REGION	221,758	19,919	241,677

PORTSMOUTH AS A COMMUNITY HOSPITAL

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE*	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	226,784	10	70%	7.00	40%	2.80
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PR(	3	749					
	(b) TOTAL POPULATION (MILITAI	3	1,417,907					
	RATIO		1,893	5	15%	0.75	40%	0.30
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/I 40 M CATCHMENT AREA	3	~~18~~ 17					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	~~1,600~~ 1538					
	(c) # OF OPERATING BEDS AT M	1	431					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN TH		~~3.71~~ 3.57	~~10~~ 4	15%	1.50	40%	0.60
	TOTAL:					9.25	40%	~~3.70~~ 3.34
		ALABAMA, FOX REDSTONE						
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	92	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATIN	1	~~1.80~~ 2.35	~~5~~ 7	15%	0.75	20%	0.15
F3	WEIGHTED AGE	1	~~62.29~~ 34.36	~~1~~ 3	40%	0.40	20%	0.08
F4	JCAHO LIFE SAFETY SCORE	1	5	1	30%	0.30	20%	0.06
	TOTAL:			17		2.95	20%	~~0.59~~ .81
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	15.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	176	4	50%	2.00	20%	0.40
	TOTAL:					7.00	20%	1.40
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,428.59					
	(b) MTF COST PER RWP	1	$4,479.33					
	RATIO OF CHAMPUS COST TO MTF CO		0.99	5.00	100%	5.00	20%	1.00
	TOTAL:			5.00		5.00	20%	1.00
	TOTAL FUNCTIONAL SCORE:							~~6.69~~ 6.55

Redo F.V.

MILLINGTON

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	7,002	2	70%	1.40	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	281					
(b)	TOTAL POPULATION (MILITA	3	996,473					
	RATIO		3,546	10	15%	1.50	40%	0.60
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	11					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	1,215					
(c)	# OF OPERATING BEDS AT M	1	66					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		18.41	1	15%	0.15	40%	0.06
	TOTAL:					3.05	40%	1.22
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	86 ~~87~~	~~10~~ 9	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.00	6	15%	0.90	20%	0.18
F3	WEIGHTED AGE	1	22.05	4	40%	1.60	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	2	8	30%	2.40	20%	0.48
	TOTAL:			28		6.40	20%	~~1.28~~ 1.25
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	1.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	106	3	50%	1.50	20%	0.30
	TOTAL:					6.50	20%	1.30
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,229.97					
(b)	MTF COST PER RWP	1	$5,435.13 5,499.70					
	RATIO OF CHAMPUS COST TO MTF CO		0.78 .769	3.00	100%	3.00	20%	0.60
	TOTAL:			3.00		3.00	20%	0.60
	TOTAL FUNCTIONAL SCORE:							~~4.40~~ 4.37

~~Redo - Incl. Dental Clinic~~ Need new FCAD Sheet

		DATA
SET-UP BEDS		36
AVAILABLE BEDS		102

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	22,742	0	22,742
	ASSIGNED	22,742	0	22,742
	REGION	0	0	0

CORPUS CHRISTI

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	8,433	2	70%	1.40	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	322					
(b)	TOTAL POPULATION (MILITA	3	445,827					
	RATIO		1,384	4	15%	0.60	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	12					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	551					
(c)	# OF OPERATING BEDS AT M	1	42					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		13.12	1	15%	0.15	40%	0.06
	TOTAL:					2.15	40%	0.86
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	98	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	19.81	5	40%	2.00	20%	0.40
F4	JCAHO LIFE SAFETY SCORE	1	1	10	30%	3.00	20%	0.60
	TOTAL:			35		8.00	20%	1.60
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	0.50	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	65	2	50%	1.00	20%	0.20
	TOTAL:					6.00	20%	1.20
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,049.82					
(b)	MTF COST PER RWP	1	$5,726.22	5798.00				
	RATIO OF CHAMPUS COST TO MTF CO		0.71 .698	3.00 2.00	100%	3.00	20%	0.60
	TOTAL:			3.00		3.00	20%	0.60
	TOTAL FUNCTIONAL SCORE:							4.26

	DATA
SET-UP BEDS	23
AVAILABLE BEDS	65

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	12,878	2,190	15,068
	ASSIGNED	7,960	1,600	9,560
	REGION	0	0	0

BREMERTON

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	35,687	8	70%	5.60	40%	2.24
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	184					
(b)	TOTAL POPULATION (MILITA	3	231,755					
	RATIO		1,259	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 CATCHMENT AREA	3	1					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	122					
(c)	# OF OPERATING BEDS AT M	1	109					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		1.12	10	15%	1.50	40%	0.60
	TOTAL:					7.55	40%	3.02
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE	1	100	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	2.96	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	15.16	6	40%	2.40	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	1	4	3	30%	0.90	20%	0.18
	TOTAL:			29		6.30	20%	1.26
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	15.00	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	139	3	50%	1.50	20%	0.30
	TOTAL:					6.50	20%	1.30
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,866.85					
(b)	MTF COST PER RWP	1	$4,254.23	$4,365.26				
	RATIO OF CHAMPUS COST TO MTF CO		1.14	7.00	100%	7.00	20%	1.40
	TOTAL:		1.11	7.00		7.00	20%	1.40
	TOTAL FUNCTIONAL SCORE:							6.98

2001 projection of 15062 has not been updated to the families so Navy used [illegible] # [illegible] (Navy) DoD's 1/10/94

	DATA
SET-UP BEDS	28
AVAILABLE BEDS	137

RETIREES		RETIRED	OTHERS	TOTAL
	CATCHMENT	22,728	3,343	26,071
	ASSIGNED	17,360	2,605	19,965
	REGION	0		0

OAK HARBOR

I. JOINT GROUP REQUIREMENTS COMPRISING ANALYTICAL FRAMEWORK

		SOURCE	RAW DATA	RAW SCORE	MOM WEIGHT	WEIGHTED MOM SCORE	CRITERI WEIGHT	CRITERI SCORE
CRITERION 1. MISSION								
P1	ACTIVE DUTY AND FAMILY MEMBER POPULATION W/I A 40 MILE RADIUS	3	18,918	4	70%	2.80	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO							
(a)	CIVILIAN PRIMARY CARE PR	3	61					
(b)	TOTAL POPULATION (MILITA	3	67,389					
	RATIO		1,104	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY							
(a)	# OF ACUTE CARE HOSPITALS W/I 40 MILE CATCHMENT AREA	3	2					
(b)	TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN / VA HOSPITALS	3	56					
(c)	# OF OPERATING BEDS AT M	1	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OPERATING BEDS IN T		2.24	7	15%	1.05	40%	0.42
	TOTAL:					4.30	40%	1.72
CRITERION 2: FACILITIES								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407 AT ENCL)	1	100	10	15%	1.50	20%	0.30
F2	INSTALLATION REAL PROPERTY RATI	1	3.00	10	15%	1.50	20%	0.30
F3	WEIGHTED AGE	1	22.24	4	70%	2.80	40%	1.12
F4	JCAHO LIFE SAFETY SCORE	1	NO SCR	NA	30%	0.00	0%	0.00
	TOTAL:			24		5.80	20%	1.16
CRITERION 3: CONTINGENCY								
MC1	DISTANCE TO AN AIR HUB	1	0.30	10	50%	5.00	20%	1.00
MC2	BED EXPANSION CAPABILITY	1	31	1	50%	0.50	20%	0.10
	TOTAL:					5.50	20%	1.10
CRITERION 4: COST/MANPOWER								
C1	COST / MANPOWER							
(a)	CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	3	$4,874.49					
(b)	MTF COST PER RWP	1	$4,315.61	4,395.10				
	RATIO OF CHAMPUS COST TO MTF CO		1.13	7.00	100%	7.00	20%	1.40
	TOTAL:		1.14	7.00		7.00	20%	1.40
	TOTAL FUNCTIONAL SCORE:							5.38

	DATA
SET-UP BEDS	25
AVAILABLE BEDS	~~30~~ 26

		RETIRED	OTHERS	TOTAL
RETIREES	CATCHMENT	7,939	1,439	9,378
	ASSIGNED	7,939	1,439	9,378
	REGION	0	0	0

Document Separator

3. DETAILED EXAMPLE: The following step-by-step description of the process is illustrated with data from Naval Hospital Portsmouth. The description is keyed to the spreadsheet shown in Attachment 2. Note that in this description, some results may not be exact due to rounding. Attachment 4 contains a similar spreadsheet for each of the 97 MTFs included in this analysis.

a. Start with Total MEPRS-A Expenses.

NH PORTSMOUTH

Total MEPRS-A Expense = $90,586,109

(Spreadsheet, Line 4I)

b. Deduct actual or estimated EBE and EBF (Category II GME and Education and Training) expenses stepped-down to MEPRS-A accounts. If these exact amounts are available from EAS-III, use them. If not, estimate as follows:

(1) Sum the total EBE and EBF expenses and divide this number by the total MTF MEPRS-E expenses (total for all E accounts). Label this number as "Percent of Total E".

NH PORTSMOUTH

Total expenses in EBE+EBF = $4,973,168.
Total of all E-Expenses = $67,042,786.

Percent of Total E = $4,973,168/$67,042,786 = 7.4179%.

(Spreadsheet, Line 6B-D)

(2) Determine the total E expenses included in the total A expenses for the MTF. This figure can be arrived at by summing the variable EXP_FRM_E from the DMIS table, MEPRS4A92. Label this number as "Total E in A".

NH PORTSMOUTH

Total E in A = $24,439,841.

(Spreadsheet, Line 8B)

(3) Multiply the "Total E in A" by "Percent of Total E." Label this number "E Expenses to Remove From A".

NH PORTSMOUTH

E Expenses to Remove = 7.4179% x $24,439,841 = $1,812,923.

(Spreadsheet Line 8B-I)

c. Add selected MEPRS-F expenses designated as Centralized Category III (FAA-Area Resource Labs and FAH - Clinical Investigation). These expenses are accumulated centrally from reporting MTFs and distributed across all CONUS MTFs based on relative share of total CONUS MWU workload, and then to inpatient care based on the ratio of IWU/MWU.

(1) Determine the individual MTF's percent inpatient care (IWU/MWU). Label this "MTF %INPAT." Determine the MTF's percent of total CONUS MWU workload. Label this "MTF % CONUS MWU."

NH PORTSMOUTH

MTF FY92 IWU = 29,607.1 MTF FY92 AWU = 35,548.3
MTF FY92 MWU = 29,607.1 + 35,548.3 = 62,155.5

MTF %INPAT = 29,607.1/62,155.5 = 47.6340%

TOTAL CONUS FY92 MWU = 1,763,113.8

MTF % CONUS MWU = 62,155.5/1,763,113.8 = 3.5253%

(Spreadsheet Line 12B-G)

(2) Determine total CONUS FAA and FAH expenses to be distributed to all CONUS MTF. Remove estimated EBE and EBF expenses contained in these MEPRS-F accounts. Notice that this "Net CONUS FAA/FAH" has been computed centrally and is provided here as input to further calculations.

NH PORTSMOUTH

Total CONUS FAA/FAH Expenses = $36,396,622

Estimated EBE/EBF Expenses in FAA/FAH = $740,537

Net CONUS FAA/FAH Expenses to Distribute = $35,656,085

(Spreadsheet Line 14C-E)

(3) Determine MTF-specific share of CONUS FAA/FAH expenses (based on "MTF % CONUS MWU") and amount to be allocated to the cost of inpatient care (based on "MTF %INPAT").

NH PORTSMOUTH

MTF SHARE OF FAA/FAH = 3.5253% x $35,656,085 = $1,256,992.

INPATIENT SHARE OF FAA/FAH = 47.6340% x $1,256,992 = $598,756

(Spreadsheet Line 14E-I)

d. Add the remaining F-Accounts as shown below.

(1) Sum the total FAL, FDD, FDE, and FDF MTF expenses. Label this total "Total Other F's".

(2) Again, using the MEPRS4F92 table from DMIS as in 3.b.(2) above, determine the total E expenses included in FAL, FDD, FDE, and FDF. Label this number "Total E in Other F's".

(3) Multiply "Total E in Other F's" by "Percent of Total E." Label this result "E to Remove From Other F's."

(4) Subtract "E to Remove From Other F's" from the "Other F's" total. Label this number "Net Other F's."

(5) Determine the MTF's inpatient share of "Net Other F's" by multiplying by "MTF %INPAT." Label this "Inpatient Share."

NH PORTSMOUTH

Total Other F Expenses = $2,067,754

Total E in Other F = $118,341

E to Remove from Other F = 7.4179% x $118,341 = $8,778.

Net Other F Expenses = $2,067,754 - $8,778 = $2,058,976.

Inpatient Share = 47.6340% x $2,058,976 = $980,773

(Spreadsheet Line 18B-I)

e. Total all of the above (A - E + F) to produce Total Category III MEPRS Expenses.

NH PORTSMOUTH

Total Cat III = $90,586,109 - $1,812,923 + $598,756 + $980,773

= $90,352,714

(Spreadsheet, Line 20I)

f. Adjust MEPRS expenses to Biometrics workload volume (upon which RWPs are based) by multiplying total expenses from the previous step by the ratio of Biometrics dispositions (BDISP) divided by MEPRS dispositions (MDISP). Notice that the same results are obtained by determining the cost per MEPRS disposition ($3,483.14) and multiplying by biometrics dispositions. Thus, the original unit cost per disposition is maintained.

NH PORTSMOUTH

MEPRS EXPENSE ADJUSTED TO BIOMETRICS VOLUME =

$90,352,714 x (25,317/25,940) = $88,182,717

(Spreadsheet, Line 23B-I)

g. Compute the unit cost per RWP. This becomes the unadjusted MEPRS-based unit cost which must be burdened with various non-MEPRS add-ons to produce the final estimated FY92 cost per RWP.

NH PORTSMOUTH

FY92 RWPs = 23,256

Unit Cost per RWP = $88,182,717/23,256 = $3,791.90

(Spreadsheet, Lines 23-26I)

h. Burden the unit cost for non-MEPRS add-ons.

(1) Convert the OMB directed DMDC/MEPRS conversion factor of $77 per occupied bed day (OBD) to a cost per RWP. Divide total biometrics Bed Days by total biometrics RWPs to determine average days per RWP. Multiply this result by $77.00 to determine the DMDC add-on.

NH PORTSMOUTH

Total Bed Days = 100,175 Days per RWP = 100,175/23,256 = 4.3076
DMDC Add-on = 4.3076 x $77 = $331.68 per RWP

(Spreadsheet, Line 29B-I)

(2) Determine total cost per RWP to distribute to expense categories for additional burdening, by summing the Inpatient Expense per RWP and the DMDC add-on.

NH PORTSMOUTH

Total Cost to Distribute = $3,791.90 + $331.68 = $4,123.59

(Spreadsheet, Line 31I)

(3) Distribute total cost per RWP to Civilian Pay (15%), Military Pay (56%), and Other (29%) categories based on centralized estimates from EAS-III. Note that identical distributions are currently used for all MTF.

NH PORTSMOUTH

CIVPAY = 15% x $4,123.59 = $618.54

MILPAY = 56% x $4,123.59 = $2,309.21

OTHER = 29% x $4,123.59 = $1,195.84

(Spreadsheet, Lines 33-36)

(4) Add 14.7% to CIVPAY for Government Share of Unfunded Civilian Retirement by multiplying by 1.147.

NH PORTSMOUTH

CIVPAY = $618.54 x 1.147 = $709.46

(Spreadsheet, Lines 36-38C)

(5) Add 4% to all three cost categories for Asset Use Charge by multiplying by 1.04.

NH PORTSMOUTH

CIVPAY = $709.46 x 1.04 = $737.84

MILPAY = $2,309.21 x 1.04 = $2,401.58

OTHER = $1,195.84 x 1.04 = $1,243.67

(Spreadsheet, Lines 41-45)

(6) Add cost components to produce the final estimated FY92 cost per RWP. *This is the denominator of the Measure of Merit ratio.*

NH PORTSMOUTH

Final Cost per RWP = $737.84 + $2,401.58 + $1,243.67

= $4,383.09

(Spreadsheet, Line 45I)

FY 92 COST PER RWP
FACILITY: BETHESDA
UIC: 00168

A	TOTAL MEPRS A	100837638
B	GME SUPPORT (EBE)	974072
C	EDUC PROGRAM SUPPORT (EBF)	1412873
D	TOTAL B AND C	2386945
E	TOTAL OF ALL E EXPENSES	99971845
F	% SELECTED E EXPENSES	0.023876172336321
G	TOTAL E EXPENSES IN A	24583196
H	E EXPENSES TO REMOVE FROM MEPRS A	586952.62427356
I	MTF IWU	17730.83
J	MTF AWU	
K	MTF MWU	33647.99
L	MTF % INPATIENT	0.52695064400578
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	542507
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	11037.847422
Q	NET FAA/FAH EXP TO DIST	531469.152578
R	MTF SHARE OF FAA/FAH	531469.1525
S	INPATIENT SHARE OF FAA/FAH	280058.01217908
T	CONTINUING HEALTH EDUCATION (FAL)	1511011
U	DECEDENT AFFAIRS (FDD)	65680
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	1576691
Y	E EXPENSES IN OTHER Fs	169597
Z	E TO REMOVE FROM OTHER Fs	4049.3271997231
AA	NET OTHER Fs	1572641.6728003
BB	INPATIENT SHARE	828704.54227243
CC	TOTAL CATEGORY III	101359447.93018 ?
DD	BIOMETRICS DISPOSITIONS	17364
EE	MEPRS DISPOSITIONS	17804
FF	RATIO BDISP/MEPRSDISP	0.97528645248259
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	98854496.397417 ?
HH	FY 92 RWPs	18655.72
II	UNITCOST PER RWP	5298.8840096987 ?
JJ	TOTAL BED DAYS	85676
KK	DAYS PER RWP	4.5924788751118 ?
LL	DMDC ADD-ON	353.62087338361 ?
MM	TOTAL COST TO DISTRIBUTE	5652.5048830823 ?
NN	DISTRIBUTE COST PER RWP TO CIVPAY	847.87573246235
OO	DISTRIBUTE COST PER RWP TO MILPAY	3165.4027345261
PP	DISTRIBUTE COST PER RWP TO OTHER	1639.2264160939
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	972.51346513432
RR	ASSET USE CHARGE CIVPAY	1011.4140037397
SS	ASSET USE CHARGE MILPAY	3292.0188439072
TT	ASSET USE CHARGE OTHER	1704.7954727376
UU	FINAL COST PER RWP	6008.2283203845

FY 92 COST PER RWP
FACILITY: PENSACOLA
UIC: 00203

A	TOTAL MEPRS A	18153843
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	585206
D	TOTAL B AND C	585206
E	TOTAL OF ALL E EXPENSES	17199715
F	% SELECTED E EXPENSES	0.034024168423721
G	TOTAL E EXPENSES IN A	2139758
H	E EXPENSES TO REMOVE FROM MEPRS A	72803.486578004
I	MTF IWU	6704.84
J	MTF AWU	
K	MTF MWU	13193.2
L	MTF % INPATIENT	0.50820422641967
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	156812
U	DECEDENT AFFAIRS (FDD)	36593
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	193405
Y	E EXPENSES IN OTHER Fs	10343
Z	E TO REMOVE FROM OTHER Fs	351.91197400655
AA	NET OTHER Fs	193053.08802599
BB	INPATIENT SHARE	98110.395258179
CC	TOTAL CATEGORY III	18179149.90868
DD	BIOMETRICS DISPOSITIONS	6095
EE	MEPRS DISPOSITIONS	6144
FF	RATIO BDISP/MEPRSDISP	0.99202473958333
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	18034166.454005
HH	FY 92 RWPs	4707
II	UNITCOST PER RWP	3831.3504257499
JJ	TOTAL BED DAYS	21651
KK	DAYS PER RWP	4.5997450605481
LL	DMDC ADD-ON	354.18036966221
MM	TOTAL COST TO DISTRIBUTE	4185.5307954121
NN	DISTRIBUTE COST PER RWP TO CIVPAY	627.82961931182
OO	DISTRIBUTE COST PER RWP TO MILPAY	2343.8972454308
PP	DISTRIBUTE COST PER RWP TO OTHER	1213.8039306695
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	720.12057335065
RR	ASSET USE CHARGE CIVPAY	748.92539628468
SS	ASSET USE CHARGE MILPAY	2437.653135248
TT	ASSET USE CHARGE OTHER	1262.3560878963
UU	FINAL COST PER RWP	4448.934619429

FY 92 COST PER RWP
FACILITY: PORTSMOUTH
UIC:00183

A	TOTAL MEPRS A	92576523
B	GME SUPPORT (EBE)	1732104
C	EDUC PROGRAM SUPPORT (EBF)	3203585
D	TOTAL B AND C	4935689
E	TOTAL OF ALL E EXPENSES	57488935
F	% SELECTED E EXPENSES	0.085854590974768
G	TOTAL E EXPENSES IN A	14164438
H	E EXPENSES TO REMOVE FROM MEPRS A	1216082.0308775
I	MTF IWU	27244.782
J	MTF AWU	
K	MTF MWU	46099.4357
L	MTF % INPATIENT	0.59100033625791
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	770313
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	15672.788298
Q	NET FAA/FAH EXP TO DIST	754640.211702
R	MTF SHARE OF FAA/FAH	754640.211702
S	INPATIENT SHARE OF FAA/FAH	445992.61886962
T	CONTINUING HEALTH EDUCATION (FAL)	1792810
U	DECEDENT AFFAIRS (FDD)	37312
V	INITIAL OUTFITTNG (FDE)	
W	URGENT MINOR CONSTRUCTION (FDF)	
X	TOTAL OTHER Fs	1830122
Y	E EXPENSES IN OTHER Fs	85916
Z	E TO REMOVE FROM OTHER Fs	7376.2830381881
AA	NET OTHER Fs	1822745.7169618
BB	INPATIENT SHARE	1077243.3316371
CC	TOTAL CATEGORY III	92883676.919629
DD	BIOMETRICS DISPOSITIONS	25317
EE	MEPRS DISPOSITIONS	25940
FF	RATIO BDISP/MEPRSDISP	0.97598303777949
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	90652893.160149
HH	FY 92 RWPs	23255
II	UNITCOST PER RWP	3898.2108432659
JJ	TOTAL BED DAYS	95408
KK	DAYS PER RWP	4.1026875940658
LL	DMDC ADD-ON	315.90694474307
MM	TOTAL COST TO DISTRIBUTE	4214.117788009
NN	DISTRIBUTE COST PER RWP TO CIVPAY	632.11766820135
OO	DISTRIBUTE COST PER RWP TO MILPAY	2359.905961285
PP	DISTRIBUTE COST PER RWP TO OTHER	1222.0941585226
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	725.03896542694
RR	ASSET USE CHARGE CIVPAY	754.04052404402
SS	ASSET USE CHARGE MILPAY	2454.3021997364
TT	ASSET USE CHARGE OTHER	1270.9779248635
UU	FINAL COST PER RWP	4479.320648644

FY 92 COST PER RWP
FACILITY: SAN DIEGO
UIC: 00259

A	TOTAL MEPRS A	119427651
B	GME SUPPORT (EBE)	432574
C	EDUC PROGRAM SUPPORT (EBF)	2530464
D	TOTAL B AND C	2963038
E	TOTAL OF ALL E EXPENSES	60513549
F	% SELECTED E EXPENSES	0.048964869008096
G	TOTAL E EXPENSES IN A	10177004
H	E EXPENSES TO REMOVE FROM MEPRS A	498315.66775487
I	MTF IWU	33069
J	MTF AWU	
K	MTF MWU	61970
L	MTF % INPATIENT	0.53362917540746
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	2023248
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	41165.003808
Q	NET FAA/FAH EXP TO DIST	1982082.996192
R	MTF SHARE OF FAA/FAH	1982082.996192
S	INPATIENT SHARE OF FAA/FAH	1057697.3148471
T	CONTINUING HEALTH EDUCATION (FAL)	1748894
U	DECEDENT AFFAIRS (FDD)	45814
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	1794708
Y	E EXPENSES IN OTHER Fs	76712
Z	E TO REMOVE FROM OTHER Fs	3756.1930313491
AA	NET OTHER Fs	1790951.8069687
BB	INPATIENT SHARE	955704.13594717
CC	TOTAL CATEGORY III	120942736.78304
DD	BIOMETRICS DISPOSITIONS	29008
EE	MEPRS DISPOSITIONS	29008
FF	RATIO BDISP/MEPRSDISP	1
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	120942736.78304
HH	FY 92 RWPs	28180
II	UNITCOST PER RWP	4291.7933563889
JJ	TOTAL BED DAYS	130480
KK	DAYS PER RWP	4.6302342086586
LL	DMDC ADD-ON	356.52803406671
MM	TOTAL COST TO DISTRIBUTE	4648.3213904556
NN	DISTRIBUTE COST PER RWP TO CIVPAY	697.24820856834
OO	DISTRIBUTE COST PER RWP TO MILPAY	2603.0599786551
PP	DISTRIBUTE COST PER RWP TO OTHER	1348.0132032321
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	799.74369522789
RR	ASSET USE CHARGE CIVPAY	831.73344303701
SS	ASSET USE CHARGE MILPAY	2707.1823778014
TT	ASSET USE CHARGE OTHER	1401.9337313614
UU	FINAL COST PER RWP	4940.8495521998

FY 92 COST PER RWP
FACILITY: BREMERTON
UIC: 68095

A	TOTAL MEPRS A	16173842
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	1050516
D	TOTAL B AND C	1050516
E	TOTAL OF ALL E EXPENSES	17514998
F	% SELECTED E EXPENSES	0.059978082783681
G	TOTAL E EXPENSES IN A	3925125
H	E EXPENSES TO REMOVE FROM MEPRS A	235421.47218629
I	MTF IWU	5163
J	MTF AWU	
K	MTF MWU	15154
L	MTF % INPATIENT	0.34070212485152
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	348099
U	DECEDENT AFFAIRS (FDD)	14868
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	362967
Y	E EXPENSES IN OTHER Fs	16977
Z	E TO REMOVE FROM OTHER Fs	1018.2479114185
AA	NET OTHER Fs	361948.75208858
BB	INPATIENT SHARE	123316.70892394
CC	TOTAL CATEGORY III	16061737.236738
DD	BIOMETRICS DISPOSITIONS	5861
EE	MEPRS DISPOSITIONS	5861
FF	RATIO BDISP/MEPRSDISP	1
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	16061737.236738
HH	FY 92 RWPs	4460.18
II	UNITCOST PER RWP	3601.1410384194
JJ	TOTAL BED DAYS	23240
KK	DAYS PER RWP	5.2105520405006
LL	DMDC ADD-ON	401.21250711855
MM	TOTAL COST TO DISTRIBUTE	4002.353545538
NN	DISTRIBUTE COST PER RWP TO CIVPAY	600.3530318307
OO	DISTRIBUTE COST PER RWP TO MILPAY	2241.3179855013
PP	DISTRIBUTE COST PER RWP TO OTHER	1160.682528206
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	688.60492750981
RR	ASSET USE CHARGE CIVPAY	716.1491246102
SS	ASSET USE CHARGE MILPAY	2330.9707049213
TT	ASSET USE CHARGE OTHER	1207.1098293343
UU	FINAL COST PER RWP	4254.2296588658

FY 92 COST PER RWP
FACILITY: BEAUFORT
UIC: 61337

A	TOTAL MEPRS A	7916064
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	464484
D	TOTAL B AND C	464484
E	TOTAL OF ALL E EXPENSES	11984280
F	% SELECTED E EXPENSES	0.038757772682214
G	TOTAL E EXPENSES IN A	5940014
H	E EXPENSES TO REMOVE FROM MEPRS A	230221.71234117
I	MTF IWU	2326.37
J	MTF AWU	
K	MTF MWU	5049.9
L	MTF % INPATIENT	0.46067644903859
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	130345
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	130345
Y	E EXPENSES IN OTHER Fs	5045
Z	E TO REMOVE FROM OTHER Fs	195.53296318177
AA	NET OTHER Fs	130149.46703682
BB	INPATIENT SHARE	59956.794318787
CC	TOTAL CATEGORY III	7745799.0819776
DD	BIOMETRICS DISPOSITIONS	2537
EE	MEPRS DISPOSITIONS	2565
FF	RATIO BDISP/MEPRSDISP	0.98908382066277
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	7661244.5500886
HH	FY 92 RWPs	1684.515
II	UNITCOST PER RWP	4548.0417509423
JJ	TOTAL BED DAYS	9535
KK	DAYS PER RWP	5.6603829588932
LL	DMDC ADD-ON	435.84948783478
MM	TOTAL COST TO DISTRIBUTE	4983.8912387771
NN	DISTRIBUTE COST PER RWP TO CIVPAY	747.58368581656
OO	DISTRIBUTE COST PER RWP TO MILPAY	2790.9790937152
PP	DISTRIBUTE COST PER RWP TO OTHER	1445.3284592454
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	857.4784876316
RR	ASSET USE CHARGE CIVPAY	891.77762713686
SS	ASSET USE CHARGE MILPAY	2902.6182574638
TT	ASSET USE CHARGE OTHER	1503.1415976152
UU	FINAL COST PER RWP	5297.5374822158

FY 92 COST PER RWP
FACILITY: CAMP LEJEUNE
UIC: 68093

A	TOTAL MEPRS A	21800904
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	851540
D	TOTAL B AND C	851540
E	TOTAL OF ALL E EXPENSES	19520387
F	% SELECTED E EXPENSES	0.043623110545913
G	TOTAL E EXPENSES IN A	3884113
H	E EXPENSES TO REMOVE FROM MEPRS A	169437.09077182
I	MTF IWU	7216.59
J	MTF AWU	
K	MTF MWU	15949.21
L	MTF % INPATIENT	0.4524731945971
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	273122
U	DECEDENT AFFAIRS (FDD)	14337
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	287459
Y	E EXPENSES IN OTHER Fs	17734
Z	E TO REMOVE FROM OTHER Fs	773.61224242122
AA	NET OTHER Fs	286685.38775758
BB	INPATIENT SHARE	129717.45324298
CC	TOTAL CATEGORY III	21761184.362471
DD	BIOMETRICS DISPOSITIONS	8768
EE	MEPRS DISPOSITIONS	8857
FF	RATIO BDISP/MEPRSDISP	0.98995145082985
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	21542516.031404
HH	FY 92 RWPs	6507.806
II	UNITCOST PER RWP	3310.2578705334
JJ	TOTAL BED DAYS	32229
KK	DAYS PER RWP	4.9523602885519
LL	DMDC ADD-ON	381.3317422185
MM	TOTAL COST TO DISTRIBUTE	3691.5896127519
NN	DISTRIBUTE COST PER RWP TO CIVPAY	553.73844191278
OO	DISTRIBUTE COST PER RWP TO MILPAY	2067.290183141
PP	DISTRIBUTE COST PER RWP TO OTHER	1070.560987698
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	635.13799287396
RR	ASSET USE CHARGE CIVPAY	660.54351258892
SS	ASSET USE CHARGE MILPAY	2149.9817904667
TT	ASSET USE CHARGE OTHER	1113.383427206
UU	FINAL COST PER RWP	3923.9087302616

FY 92 COST PER RWP
FACILITY: CHERRY POINT
UIC: 66094

A	TOTAL MEPRS A	5421387
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	338235
D	TOTAL B AND C	338235
E	TOTAL OF ALL E EXPENSES	5944638
F	% SELECTED E EXPENSES	0.056897493169475
G	TOTAL E EXPENSES IN A	1799911
H	E EXPENSES TO REMOVE FROM MEPRS A	102410.42382816
I	MTF IWU	1423.66
J	MTF AWU	
K	MTF MWU	6006.88
L	MTF % INPATIENT	0.2370049010468
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	423957
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	423957
Y	E EXPENSES IN OTHER Fs	35282
Z	E TO REMOVE FROM OTHER Fs	2007.4573540054
AA	NET OTHER Fs	421949.54264599
BB	INPATIENT SHARE	100004.10960156
CC	TOTAL CATEGORY III	5418980.6857734
DD	BIOMETRICS DISPOSITIONS	2290
EE	MEPRS DISPOSITIONS	2309
FF	RATIO BDISP/MEPRSDISP	0.9917713295799
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	5374389.6796973
HH	FY 92 RWPs	1047
II	UNITCOST PER RWP	5133.1324543432
JJ	TOTAL BED DAYS	3676
KK	DAYS PER RWP	3.5109837631328
LL	DMDC ADD-ON	270.34574976122
MM	TOTAL COST TO DISTRIBUTE	5403.4782041044
NN	DISTRIBUTE COST PER RWP TO CIVPAY	810.52173061566
OO	DISTRIBUTE COST PER RWP TO MILPAY	3025.9477942985
PP	DISTRIBUTE COST PER RWP TO OTHER	1567.0086791903
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	929.66842501616
RR	ASSET USE CHARGE CIVPAY	966.85516201681
SS	ASSET USE CHARGE MILPAY	3146.9857060704
TT	ASSET USE CHARGE OTHER	1629.6890263579
UU	FINAL COST PER RWP	5743.5298944451

FY 92 COST PER RWP
FACILITY: CAMP PENDLETON
UIC: 68094

A	TOTAL MEPRS A	24488266
B	GME SUPPORT (EBE)	70564
C	EDUC PROGRAM SUPPORT (EBF)	1113740
D	TOTAL B AND C	1184304
E	TOTAL OF ALL E EXPENSES	22202851
F	% SELECTED E EXPENSES	0.053340176898904
G	TOTAL E EXPENSES IN A	4310125
H	E EXPENSES TO REMOVE FROM MEPRS A	229902.82995639
I	MTF IWU	7118.52
J	MTF AWU	
K	MTF MWU	14712.75
L	MTF % INPATIENT	0.48383340979762
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	557807
U	DECEDENT AFFAIRS (FDD)	40287
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	598094
Y	E EXPENSES IN OTHER Fs	41787
Z	E TO REMOVE FROM OTHER Fs	2228.9259720745
AA	NET OTHER Fs	595865.07402793
BB	INPATIENT SHARE	288299.43054625
CC	TOTAL CATEGORY III	24546662.60059
DD	BIOMETRICS DISPOSITIONS	7840
EE	MEPRS DISPOSITIONS	7960
FF	RATIO BDISP/MEPRSDISP	0.98492462311558
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	24176612.410631
HH	FY 92 RWPs	6008.696
II	UNITCOST PER RWP	4023.6038585795
JJ	TOTAL BED DAYS	31114
KK	DAYS PER RWP	5.1781617841875
LL	DMDC ADD-ON	398.71845738243
MM	TOTAL COST TO DISTRIBUTE	4422.3223159619
NN	DISTRIBUTE COST PER RWP TO CIVPAY	663.34834739429
OO	DISTRIBUTE COST PER RWP TO MILPAY	2476.5004969387
PP	DISTRIBUTE COST PER RWP TO OTHER	1282.473471629
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	760.86055446125
RR	ASSET USE CHARGE CIVPAY	791.2949766397
SS	ASSET USE CHARGE MILPAY	2575.5605168162
TT	ASSET USE CHARGE OTHER	1333.7724104941
UU	FINAL COST PER RWP	4700.6279039501

FY 92 COST PER RWP
FACILITY: MILLINGTON
UIC: 60002

A	TOTAL MEPRS A	9708033
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	470116
D	TOTAL B AND C	470116
E	TOTAL OF ALL E EXPENSES	10886816
F	% SELECTED E EXPENSES	0.043182138836552
G	TOTAL E EXPENSES IN A	2009610
H	E EXPENSES TO REMOVE FROM MEPRS A	86779.258027324
I	MTF IWU	2591.58
J	MTF AWU	
K	MTF MWU	6428.64
L	MTF % INPATIENT	0.4031303666094 2
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	108119
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	108119
Y	E EXPENSES IN OTHER Fs	0
Z	E TO REMOVE FROM OTHER Fs	0
AA	NET OTHER Fs	108119
BB	INPATIENT SHARE	43586.052107444
CC	TOTAL CATEGORY III	9664839.7940801
DD	BIOMETRICS DISPOSITIONS	3104
EE	MEPRS DISPOSITIONS	3130
FF	RATIO BDISP/MEPRSDISP	0.99169329073482
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	9584556.7798162
HH	FY 92 RWPs	2023.714
II	UNITCOST PER RWP	4736.1221891118
JJ	TOTAL BED DAYS	9914
KK	DAYS PER RWP	4.8989135816622
LL	DMDC ADD-ON	377.21634578799
MM	TOTAL COST TO DISTRIBUTE	5113.3385348998
NN	DISTRIBUTE COST PER RWP TO CIVPAY	767.00078023497
OO	DISTRIBUTE COST PER RWP TO MILPAY	2863.4695795439
PP	DISTRIBUTE COST PER RWP TO OTHER	1482.8681751209
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	879.74989492951
RR	ASSET USE CHARGE CIVPAY	914.93989072669
SS	ASSET USE CHARGE MILPAY	2978.0083627256
TT	ASSET USE CHARGE OTHER	1542.1829021258
UU	FINAL COST PER RWP	5435.1311555781

FY 92 COST PER RWP
FACILITY: LEMOORE
UIC: 66095

A	TOTAL MEPRS A	5039860
B	GME SUPPORT (EBE)	300
C	EDUC PROGRAM SUPPORT (EBF)	234449
D	TOTAL B AND C	234749
E	TOTAL OF ALL E EXPENSES	4876240
F	% SELECTED E EXPENSES	0.048141395829574
G	TOTAL E EXPENSES IN A	683727
H	E EXPENSES TO REMOVE FROM MEPRS A	32915.572146367
I	MTF IWU	1083.27
J	MTF AWU	
K	MTF MWU	4909.46
L	MTF % INPATIENT	0.22064952153597
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	103725
U	DECEDENT AFFAIRS (FDD)	216
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	103941
Y	E EXPENSES IN OTHER Fs	35
Z	E TO REMOVE FROM OTHER Fs	1.6849488540351
AA	NET OTHER Fs	103939.31505115
BB	INPATIENT SHARE	22934.160134812
CC	TOTAL CATEGORY III	5029878.5879884
DD	BIOMETRICS DISPOSITIONS	1613
EE	MEPRS DISPOSITIONS	1621
FF	RATIO BDISP/MEPRSDISP	0.99506477483035
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	5005055.0045807
HH	FY 92 RWPs	765.9227
II	UNITCOST PER RWP	6534.6738053079
JJ	TOTAL BED DAYS	2334
KK	DAYS PER RWP	3.0473049042678
LL	DMDC ADD-ON	234.64247762862
MM	TOTAL COST TO DISTRIBUTE	6769.3162829366
NN	DISTRIBUTE COST PER RWP TO CIVPAY	1015.3974424405
OO	DISTRIBUTE COST PER RWP TO MILPAY	3790.8171184445
PP	DISTRIBUTE COST PER RWP TO OTHER	1963.1017220516
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	1164.6608664792
RR	ASSET USE CHARGE CIVPAY	1211.2473011384
SS	ASSET USE CHARGE MILPAY	3942.4498031823
TT	ASSET USE CHARGE OTHER	2041.6257909337
UU	FINAL COST PER RWP	7195.3228952543

FY 92 COST PER RWP
FACILITY: CORPUS CHRISTI
UIC: 000285

A	TOTAL MEPRS A	6541616
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	524183
D	TOTAL B AND C	524183
E	TOTAL OF ALL E EXPENSES	9851211
F	% SELECTED E EXPENSES	0.053210006363685
G	TOTAL E EXPENSES IN A	1885273
H	E EXPENSES TO REMOVE FROM MEPRS A	100315.38832728
I	MTF IWU	1681.3
J	MTF AWU	
K	MTF MWU	4314.69
L	MTF % INPATIENT	0.38966878269354
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	30621
U	DECEDENT AFFAIRS (FDD)	15225
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	45846
Y	E EXPENSES IN OTHER Fs	17781
Z	E TO REMOVE FROM OTHER Fs	946.12712315268
AA	NET OTHER Fs	44899.872876847
BB	INPATIENT SHARE	17496.078807016
CC	TOTAL CATEGORY III	6458796.6904797
DD	BIOMETRICS DISPOSITIONS	1622
EE	MEPRS DISPOSITIONS	1728
FF	RATIO BDISP/MEPRSDISP	0.93865740740741
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	6062597.3564573
HH	FY 92 RWPs	1278.58
II	UNITCOST PER RWP	4741.6644687522
JJ	TOTAL BED DAYS	10719
KK	DAYS PER RWP	8.383519216631
LL	DMDC ADD-ON	645.53097968058
MM	TOTAL COST TO DISTRIBUTE	5387.1954484328
NN	DISTRIBUTE COST PER RWP TO CIVPAY	808.07931726492
OO	DISTRIBUTE COST PER RWP TO MILPAY	3016.8294511224
PP	DISTRIBUTE COST PER RWP TO OTHER	1562.2866800455
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	926.86697690287
RR	ASSET USE CHARGE CIVPAY	963.94165597898
SS	ASSET USE CHARGE MILPAY	3137.5026291673
TT	ASSET USE CHARGE OTHER	1624.7781472473
UU	FINAL COST PER RWP	5726.2224323936

FY 92 COST PER RWP
FACILITY: CHARLESTON
UIC: 68084

A	TOTAL MEPRS A	22563540
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	999228
D	TOTAL B AND C	999228
E	TOTAL OF ALL E EXPENSES	19304564
F	% SELECTED E EXPENSES	0.051761231178285
G	TOTAL E EXPENSES IN A	3276662
H	E EXPENSES TO REMOVE FROM MEPRS A	169604.0592751
I	MTF IWU	8273.66
J	MTF AWU	
K	MTF MWU	16262.41
L	MTF % INPATIENT	0.50875977176815
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	983669
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	10505
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	994174
Y	E EXPENSES IN OTHER Fs	92126
Z	E TO REMOVE FROM OTHER Fs	4768.5551835307
AA	NET OTHER Fs	989405.44481647
BB	INPATIENT SHARE	503369.68829099
CC	TOTAL CATEGORY III	22897305.629016
DD	BIOMETRICS DISPOSITIONS	9415
EE	MEPRS DISPOSITIONS	9521
FF	RATIO BDISP/MEPRSDISP	0.98886671568113
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	22642383.415312
HH	FY 92 RWPs	7393.167
II	UNITCOST PER RWP	3062.6094899942
JJ	TOTAL BED DAYS	30983
KK	DAYS PER RWP	4.1907615504966
LL	DMDC ADD-ON	322.68863938824
MM	TOTAL COST TO DISTRIBUTE	3385.2981293824
NN	DISTRIBUTE COST PER RWP TO CIVPAY	507.79471940736
OO	DISTRIBUTE COST PER RWP TO MILPAY	1895.7669524542
PP	DISTRIBUTE COST PER RWP TO OTHER	981.7364575209
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	582.44054316025
RR	ASSET USE CHARGE CIVPAY	605.73816488666
SS	ASSET USE CHARGE MILPAY	1971.5976305523
TT	ASSET USE CHARGE OTHER	1021.0059158217
UU	FINAL COST PER RWP	3598.3417112607

FY 92 COST PER RWP
FACILITY: GROTON
UIC: 61726

A	TOTAL MEPRS A	6602937
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	678079
D	TOTAL B AND C	678079
E	TOTAL OF ALL E EXPENSES	10173174
F	% SELECTED E EXPENSES	0.06665363238651
G	TOTAL E EXPENSES IN A	898021
H	E EXPENSES TO REMOVE FROM MEPRS A	59856.361609366
I	MTF IWU	2059.19
J	MTF AWU	
K	MTF MWU	7008.36
L	MTF % INPATIENT	0.293819096051
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	8535
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	173.65311
Q	NET FAA/FAH EXP TO DIST	8361.34689
R	MTF SHARE OF FAA/FAH	8361.34689
S	INPATIENT SHARE OF FAA/FAH	2456.7233849887
T	CONTINUING HEALTH EDUCATION (FAL)	110095
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	110095
Y	E EXPENSES IN OTHER Fs	0
Z	E TO REMOVE FROM OTHER Fs	0
AA	NET OTHER Fs	110095
BB	INPATIENT SHARE	32348.013379735
CC	TOTAL CATEGORY III	6577885.3751554
DD	BIOMETRICS DISPOSITIONS	2328
EE	MEPRS DISPOSITIONS	2339
FF	RATIO BDISP/MEPRSDISP	0.995297135528
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	6546950.4717237
HH	FY 92 RWPs	1836.756
II	UNITCOST PER RWP	3564.4094652331
JJ	TOTAL BED DAYS	5367
KK	DAYS PER RWP	2.9219994381399
LL	DMDC ADD-ON	224.99395673677
MM	TOTAL COST TO DISTRIBUTE	3789.4034219699
NN	DISTRIBUTE COST PER RWP TO CIVPAY	568.41051329548
OO	DISTRIBUTE COST PER RWP TO MILPAY	2122.0659163031
PP	DISTRIBUTE COST PER RWP TO OTHER	1098.9269923713
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	651.96685874991
RR	ASSET USE CHARGE CIVPAY	678.04553309991
SS	ASSET USE CHARGE MILPAY	2206.9485529552
TT	ASSET USE CHARGE OTHER	1142.8840720661
UU	FINAL COST PER RWP	4027.8781581213

FY 92 COST PER RWP
FACILITY: GREAT LAKES
UIC: 00211

A	TOTAL MEPRS A	18315583
B	GME SUPPORT (EBE)	40771
C	EDUC PROGRAM SUPPORT (EBF)	593243
D	TOTAL B AND C	634014
E	TOTAL OF ALL E EXPENSES	30177282
F	% SELECTED E EXPENSES	0.02100964560029
G	TOTAL E EXPENSES IN A	4651228
H	E EXPENSES TO REMOVE FROM MEPRS A	97720.651886144
I	MTF IWU	3530.37
J	MTF AWU	
K	MTF MWU	7856.84
L	MTF % INPATIENT	0.44933713808605
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	502781
U	DECEDENT AFFAIRS (FDD)	42525
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	545306
Y	E EXPENSES IN OTHER Fs	35329
Z	E TO REMOVE FROM OTHER Fs	742.24976941263
AA	NET OTHER Fs	544563.75023059
BB	INPATIENT SHARE	244692.71703402
CC	TOTAL CATEGORY III	18462555.065148
DD	BIOMETRICS DISPOSITIONS	3638
EE	MEPRS DISPOSITIONS	3751
FF	RATIO BDISP/MEPRSDISP	0.96987470007998
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	17906365.05652
HH	FY 92 RWPs	3561.244
II	UNITCOST PER RWP	5028.1208073697
JJ	TOTAL BED DAYS	23488
KK	DAYS PER RWP	6.5954481074591
LL	DMDC ADD-ON	507.84950427435
MM	TOTAL COST TO DISTRIBUTE	5535.970311644
NN	DISTRIBUTE COST PER RWP TO CIVPAY	830.3955467466
OO	DISTRIBUTE COST PER RWP TO MILPAY	3100.1433745206
PP	DISTRIBUTE COST PER RWP TO OTHER	1605.4313903768
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	952.46369211835
RR	ASSET USE CHARGE CIVPAY	990.56223980309
SS	ASSET USE CHARGE MILPAY	3224.1491095015
TT	ASSET USE CHARGE OTHER	1669.6486459918
UU	FINAL COST PER RWP	5884.3599952964

FY 92 COST PER RWP
FACILITY: JACKSONVILLE
UIC: 00232

A	TOTAL MEPRS A	26774787
B	GME SUPPORT (EBE)	22110
C	EDUC PROGRAM SUPPORT (EBF)	1045584
D	TOTAL B AND C	1067694
E	TOTAL OF ALL E EXPENSES	24330042
F	% SELECTED E EXPENSES	0.043883771347374
G	TOTAL E EXPENSES IN A	5687038
H	E EXPENSES TO REMOVE FROM MEPRS A	249568.67523583
I	MTF IWU	8347.9144
J	MTF AWU	
K	MTF MWU	21932.4617
L	MTF % INPATIENT	0.38061912585034
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	492
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	10.010232
Q	NET FAA/FAH EXP TO DIST	481.989768
R	MTF SHARE OF FAA/FAH	481.989768
S	INPATIENT SHARE OF FAA/FAH	183.45452416497
T	CONTINUING HEALTH EDUCATION (FAL)	342165
U	DECEDENT AFFAIRS (FDD)	28956
V	INITIAL OUTFITTNG (FDE)	42632
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	413753
Y	E EXPENSES IN OTHER Fs	15287
Z	E TO REMOVE FROM OTHER Fs	670.8512125873
AA	NET OTHER Fs	413082.14878741
BB	INPATIENT SHARE	157226.96637584
CC	TOTAL CATEGORY III	26682628.745664
DD	BIOMETRICS DISPOSITIONS	9000
EE	MEPRS DISPOSITIONS	9062
FF	RATIO BDISP/MEPRSDISP	0.99315824321342
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	26500072.68936
HH	FY 92 RWPs	6448.194
II	UNITCOST PER RWP	4109.6891144032
JJ	TOTAL BED DAYS	22486
KK	DAYS PER RWP	3.4871779602165
LL	DMDC ADD-ON	268.51270293667
MM	TOTAL COST TO DISTRIBUTE	4378.2018173398
NN	DISTRIBUTE COST PER RWP TO CIVPAY	656.73027260097
OO	DISTRIBUTE COST PER RWP TO MILPAY	2451.7930177103
PP	DISTRIBUTE COST PER RWP TO OTHER	1269.6785270285
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	753.26962267332
RR	ASSET USE CHARGE CIVPAY	783.40040758025
SS	ASSET USE CHARGE MILPAY	2549.8647384187
TT	ASSET USE CHARGE OTHER	1320.4656681097
UU	FINAL COST PER RWP	4653.7308141086

FY 92 COST PER RWP
FACILITY: TWENTY NINE PALMS
UIC: 35949

A	TOTAL MEPRS A	4326871
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	245807
D	TOTAL B AND C	245807
E	TOTAL OF ALL E EXPENSES	5216406
F	% SELECTED E EXPENSES	0.047121907305528
G	TOTAL E EXPENSES IN A	1212051
H	E EXPENSES TO REMOVE FROM MEPRS A	57114.154871573
I	MTF IWU	1682.22
J	MTF AWU	
K	MTF MWU	4529.67
L	MTF % INPATIENT	0.37137804740743
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	94315
U	DECEDENT AFFAIRS (FDD)	2974
V	INITIAL OUTFITTNG (FDE)	174020
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	271309
Y	E EXPENSES IN OTHER Fs	2974
Z	E TO REMOVE FROM OTHER Fs	140.14055232664
AA	NET OTHER Fs	271168.85944767
BB	INPATIENT SHARE	100706.16153938
CC	TOTAL CATEGORY III	4370463.0066678
DD	BIOMETRICS DISPOSITIONS	2598
EE	MEPRS DISPOSITIONS	2699
FF	RATIO BDISP/MEPRSDISP	0.96257873286402
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	4206914.7429874
HH	FY 92 RWPs	1393.098
II	UNITCOST PER RWP	3019.8268484969
JJ	TOTAL BED DAYS	4086
KK	DAYS PER RWP	2.9330312727461
LL	DMDC ADD-ON	225.84340800145
MM	TOTAL COST TO DISTRIBUTE	3245.6702564984
NN	DISTRIBUTE COST PER RWP TO CIVPAY	486.85053847476
OO	DISTRIBUTE COST PER RWP TO MILPAY	1817.5753436391
PP	DISTRIBUTE COST PER RWP TO OTHER	941.24437438453
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRE	558.41756763055
RR	ASSET USE CHARGE CIVPAY	580.75427033577
SS	ASSET USE CHARGE MILPAY	1890.2783573847
TT	ASSET USE CHARGE OTHER	978.89414935991
UU	FINAL COST PER RWP	3449.9267770803

FY 92 COST PER RWP
FACILITY: NEWPORT
UIC:68086

A	TOTAL MEPRS A	2279235
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	818538
D	TOTAL B AND C	818538
E	TOTAL OF ALL E EXPENSES	11982037
F	% SELECTED E EXPENSES	0.068313760005915
G	TOTAL E EXPENSES IN A	1431171
H	E EXPENSES TO REMOVE FROM MEPRS A	97768.672221426
I	MTF IWU	2411.92
J	MTF AWU	
K	MTF MWU	6701.45
L	MTF % INPATIENT	0.35991016869483
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	328514
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	328514
Y	E EXPENSES IN OTHER Fs	32137
Z	E TO REMOVE FROM OTHER Fs	2195.3993053101
AA	NET OTHER Fs	326318.60069459
BB	INPATIENT SHARE	117445.38262429
CC	TOTAL CATEGORY III	2298911.7104029
DD	BIOMETRICS DISPOSITIONS	1758
EE	MEPRS DISPOSITIONS	2448
FF	RATIO BDISP/MEPRSDISP	0.71813725490196
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	1650934.1449707
HH	FY 92 RWPs	1387.479
II	UNITCOST PER RWP	1189.8804558272
JJ	TOTAL BED DAYS	13928
KK	DAYS PER RWP	10.038350129984
LL	DMDC ADD-ON	772.95296000876
MM	TOTAL COST TO DISTRIBUTE	1962.833415836
NN	DISTRIBUTE COST PER RWP TO CIVPAY	294.4250123754
OO	DISTRIBUTE COST PER RWP TO MILPAY	1099.1867128681
PP	DISTRIBUTE COST PER RWP TO OTHER	569.22169059243
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	337.70548919458
RR	ASSET USE CHARGE CIVPAY	351.21370876236
SS	ASSET USE CHARGE MILPAY	1143.1541813829
TT	ASSET USE CHARGE OTHER	591.99055821613
UU	FINAL COST PER RWP	2086.3584483614

FY 92 COST PER RWP
FACILITY: OAK HARBOR
UIC: 66097

A	TOTAL MEPRS A	4565797
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	138758
D	TOTAL B AND C	138758
E	TOTAL OF ALL E EXPENSES	4607047
F	% SELECTED E EXPENSES	0.030118642158415
G	TOTAL E EXPENSES IN A	626427
H	E EXPENSES TO REMOVE FROM MEPRS A	18867.13065137
I	MTF IWU	1600.77
J	MTF AWU	
K	MTF MWU	5520.77
L	MTF % INPATIENT	0.28995411871895
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	331316
U	DECEDENT AFFAIRS (FDD)	0
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	331316
Y	E EXPENSES IN OTHER Fs	29726
Z	E TO REMOVE FROM OTHER Fs	895.30675680105
AA	NET OTHER Fs	330420.6932432
BB	INPATIENT SHARE	95806.840915835
CC	TOTAL CATEGORY III	4642736.7102645
DD	BIOMETRICS DISPOSITIONS	2356
EE	MEPRS DISPOSITIONS	2349
FF	RATIO BDISP/MEPRSDISP	1.0029799914857
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	4656572.0261316
HH	FY 92 RWPs	1223.245
II	UNITCOST PER RWP	3806.7370200831
JJ	TOTAL BED DAYS	4025
KK	DAYS PER RWP	3.290428327931
LL	DMDC ADD-ON	253.36298125069
MM	TOTAL COST TO DISTRIBUTE	4060.1000013338
NN	DISTRIBUTE COST PER RWP TO CIVPAY	609.01500020007
OO	DISTRIBUTE COST PER RWP TO MILPAY	2273.6560007469
PP	DISTRIBUTE COST PER RWP TO OTHER	1177.4290003868
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	698.54020522948
RR	ASSET USE CHARGE CIVPAY	726.48181343866
SS	ASSET USE CHARGE MILPAY	2364.6022407768
TT	ASSET USE CHARGE OTHER	1224.5261604023
UU	FINAL COST PER RWP	4315.6102146178

FY 92 COST PER RWP
FACILITY: PATUXENT RIVER
UIC: 66098

A	TOTAL MEPRS A	4181140
B	GME SUPPORT (EBE)	0
C	EDUC PROGRAM SUPPORT (EBF)	177694
D	TOTAL B AND C	177694
E	TOTAL OF ALL E EXPENSES	5582497
F	% SELECTED E EXPENSES	0.031830558977461
G	TOTAL E EXPENSES IN A	1329667
H	E EXPENSES TO REMOVE FROM MEPRS A	42324.043863884
I	MTF IWU	765
J	MTF AWU	
K	MTF MWU	2976.27
L	MTF % INPATIENT	0.25703313207471
M	TOTAL CONUS MWU	
N	MTF % CONUS MWU	ERR
O	TOTAL FAA/FAH EXPENSES	0
P	ESTIMATED EBE/EBF EXP IN FAA/FAH	0
Q	NET FAA/FAH EXP TO DIST	0
R	MTF SHARE OF FAA/FAH	0
S	INPATIENT SHARE OF FAA/FAH	0
T	CONTINUING HEALTH EDUCATION (FAL)	78617
U	DECEDENT AFFAIRS (FDD)	234
V	INITIAL OUTFITTNG (FDE)	0
W	URGENT MINOR CONSTRUCTION (FDF)	0
X	TOTAL OTHER Fs	78851
Y	E EXPENSES IN OTHER Fs	1079
Z	E TO REMOVE FROM OTHER Fs	34.345173136681
AA	NET OTHER Fs	78816.654826863
BB	INPATIENT SHARE	20258.4916498
CC	TOTAL CATEGORY III	4159074.4477859
DD	BIOMETRICS DISPOSITIONS	1136
EE	MEPRS DISPOSITIONS	1140
FF	RATIO BDISP/MEPRSDISP	0.99649122807018
GG	MEPRS EXPENSES ADJ TO BIOM VOLUME	4144481.2041095
HH	FY 92 RWPs	559.8072
II	UNITCOST PER RWP	7403.4081807263
JJ	TOTAL BED DAYS	1602
KK	DAYS PER RWP	2.8616995279803
LL	DMDC ADD-ON	220.35086365449
MM	TOTAL COST TO DISTRIBUTE	7623.7590443808
NN	DISTRIBUTE COST PER RWP TO CIVPAY	1143.5638566571
OO	DISTRIBUTE COST PER RWP TO MILPAY	4269.3050648532
PP	DISTRIBUTE COST PER RWP TO OTHER	2210.8901228704
QQ	ADD 14.7% TO CIVPAY FOR GOVT SHARE OF UNFUND CIVRET	1311.6677435857
RR	ASSET USE CHARGE CIVPAY	1364.1344533291
SS	ASSET USE CHARGE MILPAY	4440.0772674474
TT	ASSET USE CHARGE OTHER	2299.3257277852
UU	FINAL COST PER RWP	8103.5374485617

BSAT BASE STRUCTURE ANALYSIS TEAM

4401 Ford Avenue • Post Office Box 16268 • Alexandria, Virginia 22302-0268 • (703) 681-0490

October 19, 1994

MEMORANDUM

From: M. E. Golembieski, Captain, MC, USN
To: Chairman, Joint Medical Group

Subj: REVISED LMP DATA SET FOR DEPARTMENT OF NAVY MTFS

1. The attached spread sheet incorporates changes to our data base that reflect both review by DOD IG auditors and receipt of revised certified data calls from the field.

Michael E. Golembieski

LINEAR PROGRAMMING MODEL DATASET

BRANCH	FACILITY NAME	INSTALLATION	ST	MTF BEDS	AV MTF BEDS	EXP BEDS	TOTAL HOSP	AVAIL CIVBEDS	AV BED RATIO	PHY/POP RATIO	AD+ADFAM	OTHERS	FUNCT VALUE	TYPE FAC	EAST WEST
NAVY	NH CAMP PENDLETON	CAMP PENDLETON	CA	120	222	265	21	1666	13.88	908	74874	40665	7.28	CH	
NAVY	NH LEMOORE	LEMOORE	CA	37	69	37	3	51	1.38	2686	22516	12030	5.12	CH	
NAVY	NMC SAN DIEGO	SAN DIEGO	CA	572	971	583	22	1941	3.44	956	188255	116441	7.84	MC	WEST
NAVY	NH TWENTY NINE PALMS	TWENTY NINE PALMS	CA	30	70	40	1	20	0.68	2627	23000	5250	7.58	CH	
NAVY	NH GROTON	GROTON	CT	25	100	96	3	195	7.80	1217	20151	17369	5.44	CH	
NAVY	NH PENSACOLA	PENSACOLA	FL	104	221	161	8	916	8.81	2112	47769	38494	7.19	CH	
NAVY	NH JACKSONVILLE	JACKSONVILLE	FL	131	176	228	7	879	6.71	1252	64858	56262	6.98	CH	
NAVY	NH GREAT LAKES	GREAT LAKES	IL	136	228	718	67	7100	52.20	469	37555	28945	6.48	CH	
NAVY	NNMC	BETHESDA	MD	342	459	779	50	3870	10.07	725	42361	47076	7.40	MC	EAST
NAVY	NH PATUXENT RIVER	PATUXENT RIVER	MD	20	20	32	2	72	3.62	4231	8985	6106	3.77	CH	
NAVY	NH CAMP LEJEUNE	CAMP LEJEUNE	NC	176	224	238	2	83	0.47	1226	79722	21212	7.76	CH	
NAVY	NH CHERRY POINT	CHERRY POINT	NC	40	40	27	2	116	2.90	990	27792	13921	5.90	CH	
NAVY	NH NEWPORT	NEWPORT	RI	0	0	0	5	320	320.00	1271	10927	21315	3.30	CH	
NAVY	NH CHARLESTON	CHARLESTON	SC	90	90	90	8	621	6.90	769	26954	34659	5.59	CH	
NAVY	NH BEAUFORT	BEAUFORT	SC	49	80	54	2	113	2.31	1105	17078	8303	4.65	CH	
NAVY	NH MILLINGTON	MILLINGTON	TN	66	102	106	15	1737	26.32	3546	7002	22742	4.40	CH	
NAVY	NH CORPUS CHRISTI	CORPUS CHRISTI	TX	42	65	65	12	551	13.12	1384	8433	9560	4.26	CH	
NAVY	NMC PORTSMOUTH	PORTSMOUTH	VA	431	437	176	15	1153	2.67	1893	226784	88014	6.71	MC	EAST
NAVY	NH BREMERTON	BREMERTON	WA	109	137	139	1	122	1.12	1259	35687	19965	6.98	CH	
NAVY	NH OAK HARBOR	OAK HARBOR	WA	25	26	31	2	56	2.24	1104	18918	9378	5.38	CH	

WARTIME BED REQMTS	2600

10/18/94

LINEAR PROGRAMMING MODEL DATASET

NAVY AS OF 1994 ?

BRANCH	FACILITY NAME	INSTALLATION	ST	MTF BEDS	AV MTF BEDS	EXP BEDS	TOTAL HOSP	AVAIL CIVBEDS	AV BED RATIO	PHY/POP RATIO	AD+ADFAM	OTHERS	FUNCT VALUE	TYPE FAC	EAST WEST
NAVY	NH CAMP PENDLETON	CAMP PENDLETON	CA	120	222	265	21	1666	13.88	908	74874	40665	7.28	CH	
NAVY	NH LEMOORE	LEMOORE	CA	37	69	37	3	51	1.38	2686	22516	12030	5.12	CH	
NAVY	NMC SAN DIEGO	SAN DIEGO	CA	572	971	583	22	1941	3.44	956	188255	116441	7.84	MC	WEST
NAVY	NH TWENTY NINE PALMS	TWENTY NINE PALMS	CA	30	70	40	1	20	0.68	2627	23000	5250	7.58	CH	
NAVY	NH GROTON	GROTON	CT	25	100	96	3	195	7.80	1217	20151	17369	5.44	CH	
NAVY	NH PENSACOLA	PENSACOLA	FL	104	221	161	8	916	8.81	2112	47769	38494	7.19	CH	
NAVY	NH JACKSONVILLE	JACKSONVILLE	FL	131	176	228	7	879	6.71	1252	64858	56262	6.98	CH	
NAVY	NH GREAT LAKES	GREAT LAKES	IL	136	228	718	67	7100	52.20	469	37555	28945	6.48	CH	
NAVY	NNMC	BETHESDA	MD	342	459	779	50	3870	10.07	725	42361	47076	7.40	MC	EAST
NAVY	NH PATUXENT RIVER	PATUXENT RIVER	MD	20	20	32	2	72	3.62	4231	8985	6106	3.77	CH	
NAVY	NH CAMP LEJEUNE	CAMP LEJEUNE	NC	176	224	238	2	83	0.47	1226	79722	21212	7.76	CH	
NAVY	NH CHERRY POINT	CHERRY POINT	NC	40	40	27	2	116	2.90	990	27792	13921	4.76	CH	
NAVY	NH NEWPORT	NEWPORT	RI	0	0	0	5	320	320.00	1271	10927	21315	3.30	CH	
NAVY	NH CHARLESTON	CHARLESTON	SC	90	90	90	8	621	6.90	769	26954	34659	5.59	CH	
NAVY	NH BEAUFORT	BEAUFORT	SC	49	80	54	2	113	2.31	1105	17078	8303	4.65	CH	
NAVY	NH MILLINGTON	MILLINGTON	TN	66	102	106	15	1737	26.32	3546	7002	22742	4.40	CH	
NAVY	NH CORPUS CHRISTI	CORPUS CHRISTI	TX	42	65	65	12	551	13.12	1384	8433	9560	4.26	CH	
NAVY	NMC PORTSMOUTH	PORTSMOUTH	VA	431	437	176	15	1158	2.67	1893	226784	88014	6.71	MC	EAST
NAVY	NH BREMERTON	BREMERTON	WA	109	137	139	1	122	1.12	1259	35687	19965	6.98	CH	
NAVY	NH OAK HARBOR	OAK HARBOR	WA	25	26	31	2	56	2.24	1104	18918	9378	5.38	CH	

WARTIME BED REQMTS	2600

10/18/94

Document Separator

DEPARTMENT OF THE NAVY
OFFICE OF THE SECRETARY
WASHINGTON, D.C. 20350-1000

MM-0352-F7
BSAT/CD
3 October 1994

MEMORANDUM FOR CHAIR, MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

Subj: PROVISION OF CERTIFIED NAVY DATA TO BRAC-95 MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

In compliance with the Internal Control Plan for Managing the Identification of DoD Cross-Service Opportunities as Part of the DoD 1995 Base Realignment and Closure Process, dated 13 April 1994, and as authorized by the Executive Secretary, BRAC-95 Steering Group by memorandum dated 23 August 1994, I am forwarding the enclosed data and information to be used for analysis by the Military Treatment Facilities and Graduate Medical Education Joint Cross-Service Group. This data was obtained by the Department of the Navy in response to the Military Treatment Facilities and Graduate Medical Education Joint Cross-Service Group's request for information issued on 25 April 1994 and was certified in accordance with the DON BRAC-95 policy and procedures.

The documents enclosed consist of a certified copy of the data call responses received from the activities as listed on the attachment. The only changes authorized for the enclosed responses will be any technical corrections made in errors identified by internal DON verification checks, or for any additional clarifying information requested by the Joint Cross-Service Group. In either circumstance, another formal transmission will be made by the Department of the Navy for any such data submitted to the Joint Cross Service Group.

Sincerely,

Charles P. Nemfakos
Vice Chairman,
Base Structure Evaluation Committee

Attachments

MILITARY TREATMENT FACILITIES AND GRADUATE MEDICAL EDUCATION JOINT CROSS SERVICE GROUP

Department of the Navy Capacity and Military Value Data Calls for the following activities:

National Naval Medical Center, Bethesda
Naval Medical Center, Portsmouth
Naval Medical Center, San Diego
Naval Hospital, Bremerton
Naval Hospital, Pensacola
Naval Hospital, Jacksonville
Naval Hospital, Camp Pendleton
Naval Hospital, Camp LeJeune
Naval Hospital, Great Lakes
Naval Hospital, Cherry Point
Naval Hospital, Twentynine Palms
Naval Hospital, Oak Harbor
Naval Hospital, Corpus Christi
Naval Hospital, Beaufort
Naval Hospital, Lemoore
Naval Hospital, Groton
Naval Hospital, Charleston
Naval Hospital, Patuxent River
Naval Hospital, Millington
Naval Hospital, Newport

Attachment

FACILITY	UIC
MILLINGTON	60002

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
7002	7002		2

F1 FCAD SCORE

FCAD	SCORE
96.5	10

F2 REAL PROPERTY

RATING	SCORE
2.014	7

F4 SAFETY SCORE

JCAHO	SCORE
2	8

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
1	10

MC2 STUBBED BEDS

NUMBER	SCORE
106	4

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
4229.97	5435.13	0.778265	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
281	996473	1	10
		3546.167	
		0.000282	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
721-11 BEQ #98	13029	26	338754
721-11 BEQ # 114	10714	20	214280
740-89 BATHHOUSE		24	0
750-33 POOL FACILITY		24	0
510-10 HOSP TAL #100	222515	22	4895330
740-54 REC CENTER		11	0
441-30 HM/FLAMMABLE	72	11	792
143-10 EMER VEHICLE G	909	3	2727
730-66 WEATHER SHELT	47	22	1034
TOTAL	247286		5452917
AVERAGE WEIGHTED A			22.05105
		SCORE	3

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
721-11 BEQ #98	13029	2	26058
721-11 BEQ # 114	10714	2	21428
740-89 BATHHOUSE		3	0
750-33 POOL FACILITY		3	0
510-10 HOSPITAL #100	222515	2	445030
740-54 REC CENTER		3	0
441-30 HM/FLAMMABLE	72	3	216
143-10 EMER VEHICLE G	909	3	2727
730-66 WEATHER SHELT	47	3	141
TOTAL	247286		495600
AVG CODE			2.004157

Millington

A2 INPATIENT CAPABILITY

MTF BEDS	66			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
METHODIST NORTH	0.75	0.25	174	43.5
METHODIST SOUTH	0.75	0.25	113	28.25
METHODIST CENTRAL	0.75	0.25	591	147.75
GERMANTOWN COMM	0.426	0.574	120	68.88
LEBONEHUR	0.808	0.192	204	39.168
CHARTER LAKESIDE	0.712	0.288	174	50.112
BAPTIST MEMORIAL	0.709	0.291	1456	423.696
REGIONAL MED CEN	0.81	0.19	467	88.73
CRITTENDON MEM	0.642	0.358	53	18.974
ST FRANCIS	0.769	0.231	784	181.104
ST JOESPH	0.671	0.329	381	125.349
ST JUDE	0.708	0.292	48	14.016
UT-WF BOWLD	0.504	0.496	118	58.528
EASTWOOD MEDICAL	0.72	0.28	179	50.12
VA HOSP	0.583	0.417	956	398.652
			SUM	1736.829
			RATIO	26.31559

15

A2 INPATIENT CAPABILITY

MTF BEDS	66			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
METHODIST NORTH	0.75	0.25	174	43.5
METHODIST SOUTH	0.75	0.25	113	28.25
METHODIST CENTRAL	0.75	0.25	591	147.75
GERMANTOWN COMM	0.426	0.574	120	68.88
LEBONEHUR	0.808	0.192	204	39.168
CHARTER LAKESIDE	0.712	0.288	174	50.112
BAPTIST MEMORIAL	0.709	0.291	1456	423.696
REGIONAL MED CEN	0.81	0.19	467	88.73
CRITTENDON MEM	0.642	0.358	53	18.974
ST FRANCIS	0.769	0.231	784	181.104
ST JOESPH	0.671	0.329	381	125.349
			SUM	1215.513
			RATIO	18.41686
			SCORE	1

Revised

FACILITY	UIC
BREMERTON	68095

P1 POPULATION

CACHMEN	ASSIGNED	REGION	SCORE
35687	45068		10

F1 FCAD SCORE

FCAD	SCORE
100	10

F2 REAL PROPERTY

RATING	SCORE
2.962	10

F4 SAFETY SCORE

JCAHO	SCORE
4	3

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
15	10

MC2 STUBBED BEDS

NUMBER	SCORE
169	4

C1 COST OF INPATIENT CARE

ASA RATE	MTF COST	RATIO	SCORE
4866.85	4254.23	1.144003	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
184	231755	1	3
		1259.538	
		0.000794	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
51010 HOSPITAL	252700	14	3537800
21910 PUBLIC WORKS	1800	3	5400
72112 BEQ	9000	3	27000
72111 BEQ	22356	14	312984
51077 MEDICAL REPAIR	5524	55	303820
44110 MED WAREHOUSE	5524	57	314868
TOTAL	296904		4501872
AVERAGE WEIGHTED AGE			15.16272
		SCORE	5

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
51010 HOSPITAL	252700	3	758100
21910 PUBLIC WORKS	1800	3	5400
72112 BEQ	9000	3	27000
72111 BEQ	22356	3	67068
51077 MEDICAL REPAIR	5524	1	5524
44110 MED WAREHOUSE	5524	3	16572
TOTAL	296904		879664
AVG CODE			2.962789

A2 INPATIENT CAPABILITY

MTF BEDS	109			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
HARRISON MEMORIAL	0.589	0.411	298	122.478
			SUM	122.478
			RATIO	1.123651
			SCORE	10

FACILITY	UIC
OAK HARBOR	66097

P1 POPULATION

CACHMEN	ASSIGNE	REGION	SCORE
18918	18918		4

F1 FCAD SCORE

FCAD	SCORE
100	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
NO SCR	

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
0.3	10

MC2 STUBBED BEDS

NUMBER	SCORE
31	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4874.49	4315.61	1.129502	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
61	67389	1	2
		1104.738	
		0.000905	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 HOSPITAL	94201	25	2355025
510-77 STORAGE	984	20	19680
510-77 MEDICAL STORAG	66	10	660
171-20 APTD	12653	2	25306
TOTAL	107904		2400671
AVERAGE WEIGHTED AG			22.24821
		SCORE	4

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROP.
510-10 HOSPITAL	94201	3	282603
510-77 STORAGE	984	3	2952
510-77 MEDICAL STORAG	66	3	198
171-20 APTD	12653	3	37959
TOTAL	107904		323712
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	25			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
WHIDBEY GENERAL	0.44	0.56	56	31.36
ISLAND	0.49	0.51	48	24.48
			SUM	55.84
			RATIO	2.2336
			SCORE	6

FACILITY	UIC
PENSACOLA	00203

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
30124	47769		7

F1 FCAD SCORE

FCAD	SCORE
88.9	9

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
7	10

MC2 STUBBED BEDS

NUMBER	SCORE
161	5

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4107.34	4448.93	0.92322	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
163	344406	1	6
		2112.92	
		0.000473	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
51010 NAVHOSP	283635	19	5389065
51077 WAREHOUSE	17890	19	339910
72111 BEQ	17908	19	340252
44130 FLAMMABLE/HAZ	800	14	11200
TOTAL	320233		6080427
AVERAGE WEIGHTED A			18.98751
		SCORE	2

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
51010 NAVHOSP	283635	3	850905
51077 WAREHOUSE	17890	3	53670
72111 BEQ	17908	3	53724
44130 FLAMMABLE/HAZ	800	3	2400
TOTAL	320233		960699
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	104			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
WEST FLORIDA REGMEDCTR	0.51	0.49	577	282.73
BAPTIST HOSP	0.552	0.448	562	251.776
SACRED HEART HOSP	0.744	0.256	411	105.216
SANTA ROSA MEDCTR	0.45	0.55	149	81.95
THOMAS HOSP	0.5	0.5	164	82
GULF BREEZE	0.368	0.632	60	37.92
JAY	0.425	0.575	55	31.625
SOUTH BALDWIN	0.53	0.47	92	43.24
			SUM	916.457
			RATIO	8.812087
			SCORE	1

FACILITY	UIC
JACKSONVILLE	232

P1 POPULATION

CACHMEN	ASSIGNE	REGION	SCORE
64858	64858		10

F1 FCAD SCORE

FCAD	SCORE
96.1	10

F2 REAL PROPERTY

RATING	SCORE
2.87	10

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
2	10

MC2 STUBBED BEDS

NUMBER	SCORE
228	10

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
4224.27	4653.73	0.907717	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
872	1092073	1	3
		1252.377	
		0.000798	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-77 DRUG LAB	13838	52	719576
510-77 HOSP/MED STORA	10080	52	524160
721-11 BEQ	22402	52	1164904
510-10 FAMILY PRAC CLI	14272	52	742144
214-20 TRANS/PWC	6063	53	321339
510-10 HOSPITAL	341360	27	9216720
610-20 DATA PROCESSIN	11610	16	185760
510-77 MED STORAGE	21330	16	341280
721-11 BEQ	13500	2	27000
TOTAL	454455		13242883
AVERAGE WEIGHTED AG			29.140141
		SCORE	3

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-77 DRUG LAB	13838	3	41514
510-77 HOSP/MED STORA	10080	2	20160
721-11 BEQ	22402	2	44804
510-10 FAMILY PRAC CLI	14272	2	28544
214-20 TRANS/PWC	6063	1	6063
510-10 HOSPITAL	341360	3	1024080
610-20 DATA PROCESSIN	11610	3	34830
510-77 MED STORAGE	21330	3	63990
721-11 BEQ	13500	3	40500
TOTAL	454455		1304485
AVG CODE			2.8704382

A2 INPATIENT CAPABILITY

MTF BEDS	131			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
UNIVERSITY	0.7	0.3	504	151.2
BAPTIST	0.65	0.35	601	210.35
MEMORIAL	0.692	0.308	324	99.792
METHODIST	0.497	0.503	150	75.45
ST VINCENTS	0.617	0.383	528	202.224
RIVERSIDE	0.707	0.293	183	53.619
ST LUKES	0.7	0.3	289	86.7
			SUM	879.335
			RATIO	6.712481
			SCORE	1

FACILITY	UIC			
GREAT LAKES	211			

P1 POPULATION	CACHMENT	ASSIGNE	REGION	SCORE
	25672	37555		8

F1 FCAD SCORE	FCAD	SCORE
	99.3	10

F2 REAL PROPERTY	RATING	SCORE
	3	10

F4 SAFETY SCORE	JCAHO	SCORE
	2	8

MC1 AIR HUB DISTANCE	DISTANCE	SCORE
	10	10

MC2 STUBBED BEDS	NUMBER	SCORE
	718	10

C1 COST OF INPATIENT CARE	ASA RATE	MTF COS	RATIO	SCORE
	4740.16	5884.36	0.805552	

A1 PRIMARY CARE RATIO	PRIM MD	POP	RATIO	SCORE
	10881	5106784	1	1
			469.3304	
			0.002131	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
HOSPITAL	467649	34	15900066
TOTAL	467649		15900066
AVERAGE WEIGHTED AGE			34
		SCORE	3

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
HOSPITAL	467649	3	1402947
			0
			0
			0
			0
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			0
TOTAL	467649		1402947
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	136			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
NORTHWEST COMMUNIT	0.765	0.235	390	91.65
GOOD SHEPERD	0.549	0.451	162	73.062
MACNEAL HOSPITAL	0.501	0.499	427	213.073
BETHANY HOSPITAL	0.705	0.295	146	43.07
CHILDRENS MEMORIAL	0.804	0.196	240	47.04
COLUMBUS HOSPITAL	0.666	0.334	302	100.868
COOK COUNTY HOSP	0.721	0.279	932	260.023
DOCTORS HOSPITAL	0.572	0.428	141	60.348
EDGEWATER MEDICAL CT	0.711	0.289	173	49.997
GRANT HOSPITAL	0.631	0.369	337	124.353
MASONIC MEDICAL	0.812	0.188	703	132.164
HOLY CROSS	0.759	0.241	319	76.879
LORETTO HOSPITAL	0.547	0.453	185	83.805
WEISS MEMORIAL	0.7	0.3	288	86.4
MERCY HOSPITAL	0.682	0.318	488	155.184
METHODIST HOSPITAL	0.482	0.518	189	97.902
MOUNT SINAI HOSP	0.776	0.224	357	79.968
NORTHWESTERN	0.64	0.36	674	242.64
NORWEGIAN AMERICAN	0.539	0.461	206	94.966
OUR LADY OF RESURR	0.736	0.264	273	72.072
RAVENSWOOD HOSP	0.766	0.234	333	77.922
RESUR MED CTR	0.836	0.164	691	113.324
RUSH PRESBY	0.8	0.2	823	164.6
SAINT MARY OF NAZARET	0.793	0.207	285	58.995
ST ELIZABETH	0.729	0.271	226	61.246
ST HOSEPH	0.602	0.398	493	196.214
SWEDISH COVENANT	0.825	0.175	285	49.875
THOREK HOSPITAL	0.536	0.464	136	63.104
UNIV OF CHICAGO	0.818	0.182	610	111.02
UNIT OF ILL	0.753	0.247	415	102.505
VA WEST SIDE	0.782	0.218	385	83.93
VA LAKESIDE	0.748	0.252	262	66.024
SAINT JOSEPH	0.411	0.589	280	164.92
HOLY FAMILY	0.41	0.59	252	148.68
GOOD SAMARITAN	0.668	0.332	316	104.912
SHERMAN HOSP	0.551	0.449	341	153.109
ALEXIAN BROTHERS	0.598	0.402	381	153.162
ELMHURST MEM	0.668	0.332	388	128.816
EVANSTON HOSP	0.809	0.191	557	106.387
ST FRANCIS	0.7	0.3	560	168
DELNOR HOSP	0.678	0.322	118	37.996
GLENOAKS MED CTR	0.533	0.467	122	56.974
HIGHLAND PARK	0.526	0.474	293	138.882
VA ED HINES	0.784	0.216	1022	220.752
HINSDALE HOSP	0.571	0.429	436	187.044
HOFFMAN ESTATES	0.665	0.335	185	61.975
LAGRANGE MEM HEALTH	0.688	0.312	246	76.752
LAKE FOREST	0.759	0.241	249	60.009
CONDELL MED CTR	0.623	0.377	175	65.975
MCGRAW HOSP	0.868	0.132	561	74.052
NORTHERN ILLINOIS	0.652	0.348	158	54.984
GOTTLEIB MEM	0.603	0.397	252	100.044
WESTLAKE COMM	0.72	0.28	230	64.4
VA NORTH CHICAGO	0.822	0.178	1000	178
OAK PARK	0.621	0.379	190	72.01
WEST SUBURBAN	0.405	0.595	370	220.15
LUTHERAN GENERAL	0.797	0.203	643	130.529
RUSH NORTH SHORE	0.7	0.3	240	72
ST THERESE	0.634	0.366	254	92.964
VICTORY MEMORIAL	0.581	0.419	279	116.901
CENTRAL DUPAGE	0.609	0.391	338	132.158
WOODSTOCK	0.482	0.518	137	70.966
MEMORIAL HOSPITAL	0.449	0.551	89	49.039
KENOSHA HOSP	0.449	0.551	147	80.997
ST CATHERINES	0.603	0.397	184	73.048
ST MARYS	0.668	0.332	226	75.032
ST LUKES	0.662	0.338	219	74.022
			SUM	7099.869
			RATIO	52.20492
			SCORE	1

FACILITY	UIC
CAMP PENDLETON	68094

P1 POPULATION

CACHMEN	ASSIGNE	REGION	SCORE
227239	74874		10

F1 FCAD SCORE

FCAD	SCORE
91.6	10

F2 REAL PROPERTY

RATING	SCORE
2.998	6

F4 SAFETY SCORE

JCAHO	SCORE
3	5

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
3	10

MC2 STUBBED BEDS

NUMBER	SCORE
265	10

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
5264.21	4700.63	1.119895	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
3047	2768902	1	1
		908.7306	
		0.0011	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
H-100 HOSPITAL	427958	20	8559160
H-103 CHAMPUS	2255	19	42845
H-107 FLAMABLE STORE HOU	100	16	1600
H-123 HEATING PLANT	476	19	9044
H-124 HEATING PLANT	280	19	5320
H-127 HAZARDOUS/FLAMMAB	100	15	1500
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	20	229660
TOTAL	514652		9065129
AVERAGE WEIGHTED AGE			17.61409
		SCORE	5

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
H-100 HOSPITAL	427958	3	1283874
H-103 CHAMPUS	2255	3	6765
H-107 FLAMABLE STORE HOU	100	1	100
H-123 HEATING PLANT	476	1	476
H-124 HEATING PLANT	280	3	840
H-127 HAZARDOUS/FLAMMAB	100	1	100
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	3	34449
TOTAL	514652		1542604
AVG CODE			2.997373

DON JWG DATA SHEETS

Pendleton

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
H-100 HOSPITAL	427958	20	8559160
H-103 CHAMPUS	2255	19	42845
H-107 FLAMABLE STORE HOU	100	16	1600
H-123 HEATING PLANT	476	19	9044
H-124 HEATING PLANT	280	19	5320
H-127 HAZARDOUS/FLAMMAB	100	15	1500
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	20	229660
TOTAL	514652		9065129
AVERAGE WEIGHTED AGE			17.61409
		SCORE	5

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
H-100 HOSPITAL	427958	3	1283874
H-103 CHAMPUS	2255	3	6765
H-107 FLAMABLE STORE HOU	100	1	100
H-123 HEATING PLANT	476	1	476
H-124 HEATING PLANT	280	3	840
H-127 HAZARDOUS/FLAMMAB	100	1	100
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	3	34449
TOTAL	514652		1542604

A2 INPATIENT CAPABILITY

MTF BEDS	120			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHILDRENS HOSP AND HE	0.83	0.17	154	25.18
FALLBROOK	0.48	0.52	50	26
GREEN HOSP OF SCRIPPS	0.671	0.329	173	56.917
SADDLEBACK MEM	0.627	0.373	221	82.433
SOUTH COAST MED CTR	0.258	0.742	191	141.722
INLAND VALLEY	0.525	0.475	80	38
		1		0
		1		0
MISSION BAY	0.46	0.54	113	61.02
PALOMAR	0.701	0.299	396	118.404
POMERADO	0.72	0.28	247	69.16
		1		0
SHARP MURRIETA	0.967	0.033	139	4.587
SAMARITAN MED CTR	0.349	0.651	86	55.986
SCRIPPS LA JOLLA	0.494	0.506	433	219.098
SCRIPPS EAST	0.259	0.741	162	120.042
SCRIPPS ENCINITAS	0.456	0.544	158	85.952
~~SHARP CABRILLA~~	~~0.53~~	~~0.47~~	~~219~~	~~102.93~~
SHARP MEM	0.818	0.182	385	70.07
HEMET VALLEY MED CTR	0.727	0.273	286	78.075
MENIFEE VALLEY	0.718	0.282	84	23.688
VA LA JOLLA	0.775	0.225	355	79.875
TRI CITY	0.681	0.319	382	121.858
UCSD	0.796	0.204	412	84.048
			SUM	1666.048
			RATIO	13.88373

over 40 miles but will not change score

FACILITY	UIC
CAMP PENDLETON	68094

P1 POPULATION

CACHMEN	ASSIGNE	REGION	SCORE
227239	74874		10

F1 FCAD SCORE

FCAD	SCORE
91.6	10

F2 REAL PROPERTY

RATING	SCORE
2.998	6

F4 SAFETY SCORE

JCAHO	SCORE
3	5

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
3	10

MC2 STUBBED BEDS

NUMBER	SCORE
265	10

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
5264.21	4700.63	1.119895	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
3047	2768902	1	1
		908.7306	
		0.0011	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
H-100 HOSPITAL	427958	20	8559160
H-103 CHAMPUS	2255	19	42845
H-107 FLAMABLE STORE HOU	100	16	1600
H-123 HEATING PLANT	476	19	9044
H-124 HEATING PLANT	280	19	5320
H-127 HAZARDOUS/FLAMMAB	100	15	1500
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	20	229660
TOTAL	514652		9065129
AVERAGE WEIGHTED AGE			17.61409
		SCORE	5

Revised

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
H-100 HOSPITAL	427958	3	1283874
H-103 CHAMPUS	2255	3	6765
H-107 FLAMABLE STORE HOU	100	3	300
H-123 HEATING PLANT	476	1	476
H-124 HEATING PLANT	280	3	840
H-127 HAZARDOUS/FLAMMAB	100	3	300
H-135 MEDICAL STORAGE	61600	3	184800
H-136 PUBLIC WORKS	10400	3	31200
H-99 HOSP SERV BLDG	11483	3	34449
TOTAL	514652		1543004
AVG CODE			2.99815

A2 INPATIENT CAPABILITY

MTF BEDS	120			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
ALVARDO	0.515	0.485	231	112.035
FALLBROOK	0.48	0.52	50	26
GREEN HOSP OF SCRIPPS	0.671	0.329	173	56.917
GROSSMONT	0.612	0.388	438	169.944
HARBOR VIEW	0.608	0.392	130	50.96
INLAND VALLEY	0.525	0.475	80	38
KAISER FOUNDATION	0.758	0.242	343	83.006
MERCY	0.624	0.376	417	156.792
MISSION BAY	0.46	0.54	113	61.02
PALOMAR	0.701	0.299	396	118.404
POMERADO	0.72	0.28	247	69.16
IRVINE MED CTR	0.312	0.688	141	97.008
SHARP MURRIETA	0.976	0.024	139	3.336
SAMARITAN MED CTR	0.349	0.651	86	55.986
SCRIPPS LA JOLLA	0.494	0.506	433	219.098
SCRIPPS EAST	0.259	0.741	162	120.042
SCRIPPS ENCINITAS	0.456	0.544	158	85.952
SHARP CABRILLA	0.53	0.47	219	102.93
SHARP MEM	0.818	0.182	385	70.07
HEMET VALLEY MED CTR	0.727	0.273	286	78.078
MENIFEE VALLEY	0.718	0.282	84	23.688
VA LA JOLLA	0.775	0.225	355	79.875
TRI CITY	0.681	0.319	382	121.858
UCSD	0.796	0.204	412	84.048
			SUM	2084.207
			RATIO	17.36839
			SCORE	1

Revised

San Diego

A2 INPATIENT CAPABILITY

MTF BEDS	572			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
ALVARADO HOSP	✓ 0.831	0.169	✓ 231	39.039
CHILDRENS HOSP AND HLTH	✓ 0.515	0.485	✓ 154	74.69
COMM HOSP OF CHULA VIST	✓ 0.706	0.294	✓ 316	92.904
CORONADO HOSP	WONT	1	REPORT	0
GREEN HOSP OF SCRPPPS	✓ 0.653	0.347	✓ 173	60.031
GROSSMONT HOSP	✓ 0.612	0.388	✓ 438	169.944
HARBOR VIEW MED CTR	✓ 0.608	0.392	✓ 130	50.96
KAISER FOUNDATION	✓ 0.758	0.242	✓ 343	83.006
MERCY HOSP & MED CTR	0.524	0.476	✓ 417	198.492
MISSION BAY MEM HOSP	✓ 0.46	0.54	✓ 113	61.02
PARADISE VALLEY HOSP	WONT	1	REPORT	0
SCRIPPS MEM EAST	✓ 0.259	0.741	✓ 162	120.042
SCRIPPS MEM CHULA VISTA	✓ 0.78	0.22	✓ 159	34.98
SCRIPPS MEM HOSP ENCINIT	✓ 0.456	0.544	✓ 158	85.952
SCRIPPS MEM HOSP LA JOLL	✓ 0.494	0.506	✓ 433	219.098
SHARP CABRILLO	✓ 0.53	0.47	✓ 219	102.93
SHARP MEMORIAL	✓ 0.818	0.182	✓ 385	70.07
PALOMAR MED CTR	✓ 0.701	0.299	✓ 396	118.404
POMERADO	✓ 0.702	0.298	✓ 247	73.606
TRI CITY MED CTR	✓ 0.681	0.319	✓ 382	121.858
UNIV OF CA SAN DIEGO MED	✓ 0.796	0.204	✓ 412	84.048
VA MED CTR	✓ 0.775	0.225	✓ 355	79.875
		1		0
			SUM	1940.949
			RATIO	3.393267
			SCORE	2

.624

20

FACILITY	UIC
SAN DIEGO	259

188255 365207

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
212100	~~190682~~	~~365315~~	7

F1 FCAD SCORE

FCAD	SCORE
98.1	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
2	8

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
3	10

MC2 STUBBED BEDS

NUMBER	SCORE
~~553~~ 564	6

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
6440.49	4940.85	1.303519	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
2797	2674000	1	
		956.0243	
		0.001046	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
55010 HOSPITAL	867271	7	6070897
55010 SOUTH CLINIC	152883	7	1070181
55010 NORTH CLIN C	159941	7	1119587
44135 GENL STORAGE SH	2360	1	2360
72111 EM BARRACKS	44461	25	1111525
74020 FISHER HOUSE	5120	2	10240
73080 EMPLOYEE PARKIN	352500	9	3172500
81159 STANDBY GEN PLA	840	38	31920
73080 PARKING STRUCTU	216000	2	432000
74076 library educational ctr	37719	6	226314
73081 LIGHT CARE REHAB	60236	6	361416
53040 VIVARIUM	18792	4	75168
TOTAL	1918123		13684108
AVERAGE WEIGHTED AG			7.13411392
		SCORE	7

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
55010 HOSPITAL	867271	3	2601813
55010 SOUTH CLINIC	152883	3	458649
55010 NORTH CLINIC	159941	3	479823
44135 GENL STORAGE SH	2360	3	7080
72111 EM BARRACKS	44461	3	133383
74020 FISHER HOUSE	5120	3	15360
73080 EMPLOYEE PARKIN	352500	3	1057500
81159 STANDBY GEN PLA	840	3	2520
73080 PARKING STRUCTU	216000	3	648000
74076 library educational ctr	37719	3	113157
73081 LIGHT CARE REHAB	60236	3	180708
53040 VIVARIUM	18792	3	56376
TOTAL	1918123		5754369
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	422			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHILDRENS HOSP AND HEAL	0.831	0.169	154	26.026
COMM HOSP OF CHULA VIST	0.883	0.117	236	27.612
GREEN OOSP OF SCRIPPS C	0.653	0.347	173	60.031
GROSSMONT HOSP	0.714	0.286	438	125.268
HARBOR VIEW MED CTR	0.295	0.705	176	124.08
HILLSIDE HOSP	0.466	0.534	133	71.022
KAISER FOUNDATION HOSP	0.848	0.152	296	44.992
MERCY HOSP	0.717	0.283	417	118.011
MISSION BAY HOSP	0.467	0.533	150	79.95
PARADISE VALLEY	0.62	0.38	213	80.94
RANCHO PARK	0.567	0.433	76	32.908
SAMARITAN MED CTR	0.5	0.5	84	42
SCRIPPS MEM HOSP CHULA	0.836	0.164	159	26.076
SCRIPPS MEM HOSP ENCINIT	0.593	0.407	146	59.422
SCRIPPS MEM HOSP LA JOLL	0.536	0.464	462	214.368
SHARP CABRILLO	0.476	0.524	250	131
SOUTHWOOD PSYCH. CTR	0.663	0.337	187	63.019
PALOMAR MED CTR	0.75	0.25	400	100
POMERADO HOSP	0.546	0.454	273	123.942
TRI CITY MED CTR	0.687	0.313	385	120.505
VA MED CTR	0.465	0.535	606	324.21
FALLBROOK HOSP	0.62	0.38	50	19
VILLAVIEW COMM HOSP	0.45	0.55	100	55
			SUM	2069.382
			RATIO	4.903749
			SCORE	2

Revised

FACILITY	UIC
TWENTY NINE PALMS	35949

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
23000	23000		5

F1 FCAD SCORE

FCAD	SCORE
99.7	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
NO SCR	

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
5	10

MC2 STUBBED BEDS

NUMBER	SCORE
40	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4999.58	3449.93	1.449183	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
15	39400	1	8
		2626.667	
		0.000381	

F3 AVERAGE SQ FT AGE

BUILDING NAME/ JSE	GSF	AGE	A*B
510-10 HOSPITAL	163000	1	163000
TOTAL	163000		163000
AVERAGE WEIGHTED AGE			1
		SCORE	10

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 HOSPITAL	163000	3	489000
TOTAL	163000		489000
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	29			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
HI DESERT MED CTR	0.65	0.35	56	19.6
			SUM	19.6
			RATIO	0.675862
			SCORE	10

FACILITY	UIC
LEMOORE	66095

P1 POPULATION

CACHMENT	ASSIGNED	REGION	SCORE
22516			5

F1 FCAD SCORE

FCAD	SCORE
87	9

F2 REAL PROPERTY

RATING	SCORE
1.2322	3

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
7	10

MC2 STUBBED BEDS

NUMBER	SCORE
30	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COST	RATIO	SCORE
4731.38	7195.32	0.657564	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
361	969651	1	7
		2686.014	
		0.000372	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
511077 MEDICAL STORAG	5160	19	98040
51010 HOSPITAL	52195	33	1722435
14310 AMBULANCE GARA	1025	33	33825
51077 MEDICAL EQUIPME	1550	22	34100
TOTAL	59930		1888400
AVERAGE WEIGHTED AG			31.5101
		SCORE	3

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
511077 MEDICAL STORAG	5160	3	15480
51010 HOSPITAL	52195	1	52195
14310 AMBULANCE GARA	1025	3	3075
51077 MEDICAL EQUIPME	1550	2	3100
TOTAL	59930		73850
AVG CODE			1.232271

A2 INPATIENT CAPABILITY

MTF BEDS	37			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
~~FRESNO CONN HOSP~~	~~0.716~~	~~0.284~~	~~383~~	~~109.093~~
~~ST AGNES MED CTR~~	~~0.724~~	~~0.276~~	~~323~~	~~89.148~~
~~VALLEY CHILDRENS~~	~~0.818~~	~~0.182~~	~~178~~	~~31.496~~
HANFORD COMM	0.889	0.111	54	5.994
CENTRAL VALLEY GEN	0.364	0.636	66	41.976
~~VA MEDICAL CTR~~	~~0.689~~	~~0.311~~	~~166~~	~~52.216~~
~~VALLEY MED CTR~~	~~0.699~~	~~0.301~~	~~326~~	~~98.116~~
KAWAEH DELTA	0.985	0.015	181	2.715
~~TULARE DIST HOSP~~	~~0.695~~	~~0.305~~	~~96~~	~~33.07~~
			SUM	~~458.755~~
			RATIO	12.39878
			SCORE	1

marked out facilities over 40 miles

51/37 = 1.38

FACILITY	UIC
GROTON	61726

P1 POPULATION	CACHMENT	ASSIGNE	REGION	SCORE
	31288	20151		5

F1 FCAD SCORE	FCAD	SCORE
	96.1	10

F2 REAL PROPERTY	RATING	SCORE
	1.939	6

F4 SAFETY SCORE	JCAHO	SCORE
	3	5

MC1 AIR HUB DISTANCE	DISTANCE	SCORE
	45	9

MC2 STUBBED BEDS	NUMBER	SCORE
	96	3

C1 COST OF INPATIENT CARE	ASA RATE	MTF CO	RATIO	SCORE
	5062.61	4027.88	1.256892	

A1 PRIMARY CARE RATIO	PRIM MD	POP	RATIO	SCORE
	894	1088279	1	3
			1217.314	
			0.000821	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 HOSPITAL	161873	21	3399333
510-10 MILITARY MEDICIN	10482	50	524100
TOTAL	172355		3923433
AVERAGE WEIGHTED AG			22.76367
		SCORE	4

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 HOSPITAL	161873	2	323746
510-10 MILITARY MEDICIN	10482	1	10482
TOTAL	172355		334228
AVG CODE			1.939184

A2 INPATIENT CAPABILITY

MTF BEDS	25			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
L&M	0.73	0.27	309	83.43
BACKUS	0.77	0.23	211	48.53
WESTERLY	0.55	0.45	141	63.45
			SUM	195.41
			RATIO	7.8164
			SCORE	1

FACILITY	UIC
BETHESDA	168

P1 POPULATION

CACHMENT	ASSIGNED	REGION	SCORE
~~42361~~ 42301	~~168596~~ 1185760	413679	8

F1 FCAD SCORE

FCAD	SCORE
93.9	10

F2 REAL PROPERTY

RATING	SCORE
2.96	10

F4 SAFETY SCORE

JCAHO	SCORE
2	8

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
20	10

MC2 STUBBED BEDS

NUMBER	SCORE
779	8

C1 COST OF INPATIENT CARE

ASA RATE	MTF COST	RATIO	SCORE
5757.01	6008.23	0.958187	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
6012	4630349	1	
		770.1845	
		0.001298	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
61010 MED FAC	241594	53	12804482
17025 MED FAC	150309	53	7966377
61010 MED FAC	38612	51	1969212
'61010 MED FAC	16710	53	885630
'61010 MED FAC	38612	51	1969212
'61010 MED FAC	20189	52	1049828
'51010 MED FAC	65907	31	2043117
31010 MED FAC	83371	31	2584501
'51010 MED FAC	584559	14	8183826
'51010 MED FAC	322133	14	4509862
21910 PW SHOPS	18593	53	985429
61010 PW ADMIN	27558	52	1433016
21356 PW SHOPS	11760	50	588000
82109 UTILITY PLANT	50028	53	2651484
72111 50 BEQ	48004	26	1248104
73080 PARKING GARAGE	330040	17	5610680
72111 60 BEQ	105848	8	846784
31027 WAREHOUSE	6500	49	318500
44110 WAREHOUSE	4000	45	180000
44110 WAREHOUSE	4091	45	184095
44110 WAREHOUSE	4000	43	172000
21977 PW MAINT STORAGE	8000	43	344000
44110 WAREHOUSE	4000	21	84000
44110 WAREHOUSE	1640	18	29520
74031 BEQ	83160	1	83160
74020 FISHER HOUSE	4864	3	14592
74020 FISHER HOUSE	4864	1	4864
TOTAL	2278946		58744275
AVERAGE WEIGHTED AGE			25.776949080847
		SCORE	4

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
61010 MED FAC	241594	3	724782
17025 MED FAC	150309	3	450927
61010 MED FAC	38612	2	77224
'61010 MED FAC	16710	3	50130
'61010 MED FAC	38612	3	115836
'61010 MED FAC	20189	3	60567
'51010 MED FAC	65907	3	197721
31010 MED FAC	83371	3	250113
'51010 MED FAC	584559	3	1753677
'51010 MED FAC	322133	3	966399
21910 PW SHOPS	18593	3	55779
61010 PW ADMIN	27558	3	82674
21356 PW SHOPS	11760	3	35280
82109 UTILITY PLANT	50028	3	150084
72111 50 BEQ	48004	2	96008
73080 PARKING GARAGE	330040	3	990120
72111 60 BEQ	105848	3	317544
31027 WAREHOUSE	6500	3	19500
44110 WAREHOUSE	4000	3	12000
44110 WAREHOUSE	4091	3	12273
44110 WAREHOUSE	4000	3	12000
21977 PW MAINT STORAGE	8000	3	24000
44110 WAREHOUSE	4000	3	12000
44110 WAREHOUSE	1640	3	4920
74031 BEQ	83160	3	249480
74020 FISHER HOUSE	4864	3	14592
74020 FISHER HOUSE	4864	3	14592
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TOTAL	2278946		6750222
AVG CODE			2.961992956393

BETHESDA

A2 INPATIENT CAPABILITY

MTF BEDS	384			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHILDRENS NATL MED CTR	✓ 0.738	0.262	✓ 279	73.098
COLUMBIA HOSP	✓ 0.654	0.346	✓ 141	48.786
DC GENERAL	✓ 0.68	0.32	✓ 435	139.2
GWU HOSP	✓ 0.828	0.172	✓ 425	73.1
GU HOSP	✓ 0.978	0.022	✓ 500	11
HOWARD UNIV HOSP	✓ 0.706	0.294	✓ 437	128.478
PROV HOSP	✓ 0.76	0.24	✓ 342	82.08
SIBLEY MEM HOSP	✓ 0.616	0.384	✓ 362	139.008
WASH HOSP CTR	✓ 0.767	0.233	✓ 874	203.642
BON SECOURS HOSP	✓ 0.94	0.06	✓ 156	9.36
CHURCH HOSP CORP	✓ 0.685	0.315	✓ 216	68.04
FRANKLIN SQ HOSP	✓ 0.761	0.239	✓ 427	102.053
GOOD SAMARITAN HOSP	✓ 0.836	0.164	✓ 269	44.116
GREATER BALT MED CTR	✓ 0.782	0.218	✓ 386	84.148
HARBOR HOSP CTR	✓ 0.742	0.258	✓ 287	74.046
JL KERNAN HOSP	✓ 0.536	0.464	✓ 69	32.016
JOHN HOPKINS	✓ 0.809	0.191	✓ 959	183.169
KENNEDY INST	✓ 0.745	0.255	✓ 51	13.005
LIBERTY MED CTR	✓ 0.769	0.231	✓ 260	60.06
MD GEN HOSP	✓ 0.757	0.243	✓ 247	60.021
MERCY MED CTR	✓ 0.685	0.315	✓ 302	95.13
MT WASH PED HOSP	✓ 0.892	0.108	✓ 130	14.04
PRATT HOSP	✓ 0.838	0.162	✓ 260	42.12
SINAI HOSP	✓ 0.789	0.211	✓ 487	102.757
ST AGNES HOSP	✓ 0.798	0.202	✓ 396	79.992
UNIV OF MD HOSP	✓ 0.785	0.215	✓ 713	153.295
NIH	✓ 0.578	0.422	✓ 415	175.13
SPRING GROVE HOSP	✓ 1	0	✓ 508	0
PRINCE GEORGE HOSP	✓ 0.792	0.208	✓ 356	74.048
SOUTHERN MD HOSP	✓ 0.716	0.284	✓ 328	93.152
HOWARD CO GEN HOSP	✓ 0.667	0.333	✓ 213	70.929
TAYLOR MANOR HOSP	✓ 0.667	0.333	✓ 96	31.968
FREDERICK MEM HOSP	✓ 0.984	0.016	✓ 188	3.008
DOCTORS COMM HOSP	✓ 0.64	0.36	✓ 250	90
GREATER LAUREL BELTSVIL	✓ 0.67	0.33	✓ 176	58.08
MONTGOMERY GEN HOSP	✓ 0.594	0.406	✓ 229	92.974
CHESTNUT LODGE HOSP	✓ 0.6	0.4	✓ 100	40
SHADY GROVE ADV HOSP	✓ 0.733	0.267	✓ 243	64.881
HOLY CROSS HOSP	✓ 0.768	0.232	✓ 414	96.048
WASH ADVENTIST HOSP	✓ 0.78	0.22	✓ 300	66
ALEX HOSP	✓ 0.645	0.355	✓ 363	128.865
MT VERNON HOSP	✓ 0.629	0.371	✓ 229	84.959
ARLINGTON HOSP	✓ 0.627	0.373	✓ 389	145.097
NATL HOSP FOR ORTHO AN	✓ 0.495	0.505	✓ 105	53.025
NO VA DOCTORS HOSP	✓ 0.441	0.559	✓ 211	117.949
FAIR OAKS HOSP	✓ 0.678	0.322	✓ 144	46.368
FAIRFAX HOSP	✓ 0.864	0.136	✓ 656	89.216
DOMINION HOSP	✓ 0.55	0.45	✓ 100	45
LOUDON HOSP CTR	✓ 0.348	0.652	✓ 103	67.156
SPRINGFIELD HOSP CTR	✓ 0.94	0.06	✓ 445	26.7
LEVINDALE HEBREW	✓ 0.98	0.02	✓ 76	1.52
UNION MEMORIAL	✓ 0.78	0.22	✓ 344	75.68
GREATER SOUTHEAST	✓ 0.8	0.2	✓ 470	94
			SUM	4047.513
			RATIO	10.5404
			SCORE	1

/37

A2 INPATIENT CAPABILITY

MTF BEDS	384			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHILDRENS NATL MED CTR	0.738	0.262	279	73.098
COLUMBIA HOSP	0.654	0.346	141	48.786
DC GENERAL	0.68	0.32	435	139.2
GWU HOSP	0.828	0.172	425	73.1
GU HOSP	0.978	0.022	500	11
HOWARD UNIV HOSP	0.706	0.294	437	128.478
PROV HOSP	0.76	0.24	342	82.08
SIBLEY MEM HOSP	0.616	0.384	362	139.008
WASH HOSP CTR	0.767	0.233	874	203.642
BON SECOURS HOSP	0.94	0.06	156	9.36
CHURCH HOSP CORP	0.685	0.315	216	68.04
FRANKLIN SQ HOSP	0.761	0.239	427	102.053
GOOD SAMARITAN HOSP	0.836	0.164	269	44.116
GREATER BALT MED CTR	0.782	0.218	386	84.148
HARBOR HOSP CTR	0.742	0.258	287	74.046
JL KERNAN HOSP	0.536	0.464	69	32.016
JOHN HOPKINS	0.809	0.191	959	183.169
KENNEDY INST	0.745	0.255	51	13.005
LIBERTY MED CTR	0.769	0.231	260	60.06
MD GEN HOSP	0.757	0.243	247	60.021
MERCY MED CTR	0.685	0.315	302	95.13
MT WASH PED HOSP	0.892	0.108	130	14.04
PRATT HOSP	0.838	0.162	260	42.12
SINAI HOSP	0.789	0.211	487	102.757
ST AGNES HOSP	0.798	0.202	396	79.992
UNIV OF MD HOSP	0.785	0.215	713	153.295
NIH	0.578	0.422	415	175.13
SPRING GROVE HOSP	1	0	508	0
PRINCE GEORGE HOSP	0.792	0.208	356	74.048
SOUTHERN MD HOSP	0.716	0.284	328	93.152
HOWARD CO GEN HOSP	0.667	0.333	213	70.929
TAYLOR MANOR HOSP	0.667	0.333	96	31.968
FREDERICK MEM HOSP	0.984	0.016	188	3.008
DOCTORS COMM HOSP	0.64	0.36	250	90
GREATER LAUREL BELTSVIL	0.67	0.33	176	58.08
MONTGOMERY GEN HOSP	0.594	0.406	229	92.974
CHESTNUT LODGE HOSP	0.6	0.4	100	40
SHADY GROVE ADV HOSP	0.733	0.267	243	64.881
HOLY CROSS HOSP	0.768	0.232	414	96.048
WASH ADVENTIST HOSP	0.78	0.22	300	66
ALEX HOSP	0.645	0.355	363	128.865
MT VERNON HOSP	0.629	0.371	229	84.959
ARLINGTON HOSP	0.627	0.373	389	145.097
NATL HOSP FOR ORTHO AN	0.495	0.505	105	53.025
NO VA DOCTORS HOSP	0.441	0.559	211	117.949
FAIR OAKS HOSP	0.678	0.322	144	46.368
FAIRFAX HOSP	0.864	0.136	656	89.216
DOMINON HOSP	0.55	0.45	100	45
LOUDON HOSP CTR	0.348	0.652	103	67.156
SPRINGWOOD PSYCH INST	0.74	0.26	77	20.02
			SUM	3869.633
			RATIO	10.07717
			SCORE	1

Revised

FACILITY	UIC
PATUXENT RIVER	66098

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
11200	8985		2

F1 FCAD SCORE

FCAD	SCORE
64.4	7

F2 REAL PROPERTY

RATING	SCORE
2.738	9

F4 SAFETY SCORE

JCAHO	SCORE
NO SCR	

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
0	10

MC2 STUBBED BEDS

NUMBER	SCORE
32	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4768.63	8103.54	0.588463	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
40	228500	1	10
		5712.5	
		0.000175	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A2B
510-10 CLINICS	5248	3	15744
171-20 APPL INST BLDG	13760	2	27520
143-10 EMER VEH GARAG	1300	13	16900
510-10 HOSPITAL	42938	25	1073450
510-77 MISC MED STORA	312	49	15288
510-10 CLINIC	594	51	30294
510-10 CLINIC	7472	51	381072
510-77 MISC MED STORA	8849	51	451299
510-10 ADMIN	3538	52	183976
510-10 CLINIC	1579	51	80529
TOTAL	85590		2276072
AVERAGE WEIGHTED AG			26.59273
		SCORE	4

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 CLINICS	5248	3	15744
171-20 APPL INST BLDG	13760	3	41280
143-10 EMER VEH GARAG	1300	3	3900
510-10 HOSPITAL	42938	3	128814
510-77 MISC MED STORA	312	2	624
510-10 CLINIC	594	2	1188
510-10 CLINIC	7472	2	14944
510-77 MISC MED STORA	8849	2	17698
510-10 ADMIN	3538	2	7076
510-10 CLINIC	1579	2	3158
TOTAL	85590		234426
AVG CODE			2.738941

A2 INPATIENT CAPABILITY

MTF BEDS	20			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
ST MARYS HOSP	0.66	0.34	107	36.38
CALVERT MEMORIAL	0.7	0.3	120	36
PHYSICIANS MEM	0.71	0.29	131	37.99
			SUM	110.37
			RATIO	5.5185
			SCORE	1

FACILITY	UIC
CAMP LEJEUNE	68093

P1 POPULATION

CACHMEN	ASSIGNED	REGION	SCORE
79722	79722		10

F1 FCAD SCORE

FCAD	SCORE
98.1	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
16	10

MC2 STUBBED BEDS

NUMBER	SCORE
238	5

C1 COST OF INPATIENT CARE

ASA RATE	MTF COST	RATIO	SCORE
3783.7	3923.91	0.964268	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
522	640000	1	3
		1226.054	
		0.000816	

Redo IRPR

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
HOSPITAL	441902	12	5302824
PWC/TRANSPORTATION	11785	9	106065
HAZMAT/FLAM STORAGE	~~44130~~ 120	9	~~397170~~ 1080
BEQ	27768	5	138840
		8	0
WAREHOUSE	5000	11	55000
WAREHOUSE	5000	11	55000
COMPRESSD GAS STORAGE	216	8	1728
SEWAGE TREATMENT PLANT	432	12	5184
TOTAL	~~536233~~ 492223		6061811 5665721
AVERAGE WEIGHTED AGE		SCORE	~~11.30443~~ 11.51 6

Not in cert. data

REAL PROPERTY RATING

BUILDING	GSF	CODE/	PROD.
HOSPITAL	441902	3	1325706
PWC/TRANSPORTATION	11785	3	35355
HAZMAT/FLAM STORAGE	~~44130~~ 120	3	~~132390~~ 360
BEQ	27768	3	83304
		3	0
WAREHOUSE	5000	3	15000
WAREHOUSE	5000	3	15000
COMPRESSD GAS STORAGE	216	3	648
SEWAGE TREATMENT PLANT	432	3	1296
TOTAL	536233 492223		~~1606603~~ 1460[illegible]
AVG CODE			~~3~~ 2.97

FACILITY	UIC
CAMP LEJEUNE	68093

P1 POPULATION

CACHMEN	ASSIGNED	REGION	SCORE
79722	79722		10

F1 FCAD SCORE

FCAD	SCORE
98.1	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
16	10

MC2 STUBBED BEDS

NUMBER	SCORE
238	5

C1 COST OF INPATIENT CARE

ASA RATE	MTF COST	RATIO	SCORE
3783.7	3923.91	0.964268	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
522	640000	1	3
		1226.054	
		0.000816	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
HOSPITAL	441902	12	5302824
PWC/TRANSPORTATION	11785	9	106065
HAZMAT/FLAM STORAGE	44130	9	397170
BEQ	27768	5	138840
INSECT VECTOR CONTROL	682	8	5456
WAREHOUSE	5000	11	55000
WAREHOUSE	5000	11	55000
COMPRESSD GAS STORAGE	216	8	1728
SEWAGE TREATMENT PLANT	432	12	5184
			-
TOTAL	536915		6067267
AVERAGE WEIGHTED AGE			11.30024
		SCORE	6

?

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
HOSPITAL	441902	3	1325706
PWC/TRANSPORTATION	11785	3	35355
HAZMAT/FLAM STORAGE	44130	3	132390
BEQ	27768	3	83304
INSECT VECTOR CONTROL	682	3	2046
WAREHOUSE	5000	3	15000
WAREHOUSE	5000	3	15000
COMPRESSD GAS STORAGE	216	3	648
SEWAGE TREATMENT PLANT	432	3	1296
			0
TOTAL	536915		1610745
AVG CODE			3

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Revised

A2 INPATIENT CAPABILITY

MTF BEDS	176			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
ONSLOW MEM	0.617	0.383	133	50.939
CARTERET GENERAL	0.718	0.282	117	32.994
			SUM	83.933
			RATIO	0.476892
			SCORE	10

FACILITY	UIC
CHERRY POINT	66094

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
89047	27792		6

F1 FCAD SCORE

FCAD	SCORE
37	4

F2 REAL PROPERTY

RATING	SCORE
1.2	2

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
2	10

MC2 STUBBED BEDS

NUMBER	SCORE
27	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
3780.03	5743.53	0.658137	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
341	337665	1	2
		990.2199	
		0.00101	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 HOSPITAL	106098	52	5517096
171-20 WATER SURV TR	4508	14	63112
510-10 DECOMPRESSION	10790	13	140270
171-10 ACADEMIC INST	6110	52	317720
171-20 WAREHOUSE	902	20	18040
TOTAL	128408		6056238
AVERAGE WEIGHTED AG			47.16402
		SCORE	1

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 HOSPITAL	106098	1	106098
171-20 WATER SURV TR	4508	2	9016
510-10 DECOMPRESSION	10790	3	32370
171-10 ACADEMIC INST	6110	1	6110
171-20 WAREHOUSE	902	3	2706
TOTAL	128408		156300
AVG CODE			1.217214

A2 INPATIENT CAPABILITY

MTF BEDS	26			AVAIL.
FACILITY	RATE	1-RATE	BEDS	BEDS
CARTERET GEN	0.718	0.282	117	32.994
CRAVEN REG MED CTR	0.725	0.275	302	83.05
			SUM	116.044
			RATIO	~~4.463231~~
			SCORE	3

/40 = 2.9

FACILITY	UIC
NEWPORT	68086

P1 POPULATION	CACHMENT	ASSIGNE	REGION	SCORE
	31591	10927		3

F1 FCAD SCORE	FCAD	SCORE
	64.9	7

F2 REAL PROPERTY	RATING	SCORE
	1.799	4

F4 SAFETY SCORE	JCAHO	SCORE
	2	8

MC1 AIR HUB DISTANCE	DISTANCE	SCORE
	20	10

MC2 STUBBED BEDS	NUMBER	SCORE
	0	1

C1 COST OF INPATIENT CARE	ASA RATE	MTF COS	RATIO	SCORE
	5068.62	2086.36	2.429408	

A1 PRIMARY CARE RATIO	PRIM MD	POP	RATIO	SCORE
	789	1003464	1	2
			1271.817	
			0.000786	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 MAIN HOSP	147566	81	11952846
510-77 LAUNDRY/HSKP	2262	76	171912
141-60 PHOTO LAB	1275	75	95625
171-10 ED &TRNG BLDG 8	4325	75	324375
550-10 OUTPT CLINIC BL	10050	45	452250
740-05 NEX SNACK BLDG	600	54	32400
550-10 OUTPT CLINICC B	26605	52	1383460
540-10 DENTAL ORAL SU	1550	52	80600
730-65 BASEMENT FALL	14895	52	774540
441-10 GEN WAREHOUSE	43176	52	2245152
610-10 ADMIN SPACE BL	7100	52	369200
550-10 MED REPAIR BLD	4033	52	209716
730-81 ARC BLDG 45	30738	52	1598376
219-10 ADMIN SPACE BL	3150	52	163800
219-10 PWC-BLG 46	4230	52	219960
714-10 GARAGES FOR H	3051	46	140346
143-11 OP VEH STORAGE	1526	46	70196
610-10 NIS OFFICE BLG 4	1525	46	70150
171-10 ACADEMIC INST B	2691	52	139932
219-77 PWC STOR BLG 5	1800	51	91800
550-10 OUTPT CLINIC # 3	10650	54	575100
143-11 OP VEH STORAGE	2202	51	112302
TOTAL	325000		21274038
AVERAGE WEIGHTED AG			65.4585785
		SCORE	1

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 MAIN HOSP	147566	1	147566
510-77 LAUNDRY/HSKP	2262	1	2262
141-60 PHOTO LAB	1275	3	3825
171-10 ED &TRNG BLDG 8	4325	3	12975
550-10 OUTPT CLINIC BL	10050	2	20100
740-05 NEX SNACK BLDG	600		0
550-10 OUTPT CLINICC B	26605	3	79815
540-10 DENTAL ORAL SU	1550	3	4650
730-65 BASEMENT FALL	14895	3	44685
441-10 GEN WAREHOUSE	43176	2	86352
610-10 ADMIN SPACE BL	7100	2	14200
550-10 MED REPAIR BLD	4033	2	8066
730-81 ARC BLDG 45	30738	3	92214
219-10 ADMIN SPACE BL	3150	3	9450
219-10 PWC-BLG 45	4230	3	12690
714-10 GARAGES FOR H	3051		0
143-11 OP VEH STORAGE	1526	3	4578
610-10 NIS OFFICE BLG 4	1525		0
171-10 ACADEMIC INST B	2691	3	8073
219-77 PWC STOR BLG 5	1800	3	5400
550-10 OUTPT CLINIC # 3	10650	2	21300
143-11 OP VEH STORAGE	2202	3	6606
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TOTAL	325000		584807
AVG CODE			1.79940615

A2 INPATIENT CAPABILITY

MTF BEDS	0			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
NEWPORT HOSP	0.571	0.429	217	93.093
ST ANNES	0.652	0.348	178	61.944
CHARLTON MEM	0.904	0.096	332	31.872
RHODE ISLAND HOSP	0.822	0.178	687	122.286
WOMEN & CHILDRENS	0.944	0.056	197	11.032
			SUM	320.227
			RATIO	ERR
			SCORE	1

FACILITY	UIC
CHARLESTON	68084

P1 POPULATION

CACHMEN	ASSIGNE	REGION	SCORE
26945	26954		6

F1 FCAD SCORE

FCAD	SCORE
95.4	10

F2 REAL PROPERTY

RATING	SCORE
2.0885	7

F4 SAFETY SCORE

JCAHO	SCORE
3	5

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
7	10

MC2 STUBBED BEDS

NUMBER	SCORE
90	2

C1 COST OF INPATIENT CARE

ASA RATE	MTF CO	RATIO	SCORE
4008.92	8598.34	2.114103	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
650	500000	1	2
		769.2308	
		0.0013	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 HOSPITAL	363738	21	7638498
721-11 BEQ	30852	20	617040
832-10 INCINERATOR BLD	1296	8	10368
441-10 WAREHOUSE	37038	51	1888938
TOTAL	432924		10154844
AVERAGE WEIGHTED AG			23.4564127
		SCORE	4

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 HOSPITAL	363738	2	727476
721-11 BEQ	30852	2	61704
832-10 INCINERATOR BLD	1296	3	3888
441-10 WAREHOUSE	37038	3	111114
TOTAL	432924		904182
AVG CODE			2.08854672

A2 INPATIENT CAPABILITY

MTF BEDS	90			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
VA MED CENTER	0.84	0.16	280	44.8
CHASN MEM	0.6	0.4	172	68.8
EAST COOPER	0.43	0.57	100	57
TRIDENT REG MED CTR	0.84	0.16	300	48
ST FRANCIS	0.73	0.27	362	97.74
BAKER	0.62	0.38	102	38.76
ROPER	0.73	0.27	421	113.67
MUSC	0.74	0.26	585	152.1
			SUM	620.87
			RATIO	6.898556
			SCORE	1

FACILITY	UIC
BEAUFORT	61337

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
24087	17087		4

17078

F1 FCAD SCORE

FCAD	SCORE
84.1	9

F2 REAL PROPERTY

RATING	SCORE
2.66	8

F4 SAFETY SCORE

JCAHO	SCORE
2	8

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
7	10

MC2 STUBBED BEDS

NUMBER	SCORE
54	4

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
3914.84	5297.54	0.738992	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
151	166789	1	3
		1104.563	
		0.000905	

F3 AVERAGE SQ FT AGE

.45

BUILDING NAME/USE	GSF	AGE	A*B
72113 MANPOWER MG	5703	46	262338
7211 TEMP STORAGE	46264	46	2128144
82109 HEATING PLANT	6215	46	285890
83310 INCINERATOR	345	46	15870
51010 HOSPITAL	276428	45	12439260
44130 BOTTLED OXYG	390	44	17160
TOTAL	335345		15148662
AVERAGE WEIGHTED		~~45.1733647~~	
		SCORE	2

15148662
− 46264
15102398

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
72113 MANPOWER MG	5703	1	5703
7211 TEMP STORAGE	46264	1	46264
82109 HEATING PLANT	6215	3	18645
83310 INCINERATOR	345	3	1035
51010 HOSPITAL	276428	3	829284
44130 BOTTLED OXYG	390	3	1170
TOTAL	335345		902101
AVG CODE			2.69006844

A2 INPATIENT CAPABILITY

MTF BEDS	49			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
BEAUFORT MEM	0.626	0.374	99	37.026
COLLETON REGIONAL	0.42	0.58	131	75.98
			SUM	113.006
			RATIO	2.306245
			SCORE	7

FACILITY	UIC
CORPUS CHRISTI	285

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
18038	8433		2

F1 FCAD SCORE

FCAD	SCORE
9805	10

F2 REAL PROPERTY

RATING	SCORE
3	10

F4 SAFETY SCORE

JCAHO	SCORE
1	10

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
0.5	10

MC2 STUBBED BEDS

NUMBER	SCORE
85	2

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4049.82	5726.22	0.707241	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
322	445827	1	4
		1384.556	
		0.000722	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
171-20 EJECT SEAT TRN	800	20	16000
219-20 EQUIPMENT SHED	432	15	6480
441-30 CHEMICAL STORA	500	8	4000
510-10 HOSPITAL	221892	20	4437840
750-30 TRNG POOL PUMP	1080	47	50760
740-89 TRNG POOL BATH	900	42	37800
811-59 GENERATOR BLD	192	7	1344
821-09 BOILER BLDG	1044	12	12528
510-77 WAREHOUSE	6000	8	48000
TOTAL	232840		4614752
AVERAGE WEIGHTED AG			19.81941
		SCORE	5

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
171-20 EJECT SEAT TRN	800	3	2400
219-20 EQUIPMENT SHED	432	3	1296
441-30 CHEMICAL STORA	500	3	1500
510-10 HOSPITAL	221892	3	665676
750-30 TRNG POOL PUMP	1080	3	3240
740-89 TRNG POOL BATH	900	3	2700
811-59 GENERATOR BLD	192	3	576
821-09 BOILER BLDG	1044	3	3132
510-77 WAREHOUSE	6000	3	18000
TOTAL	232840		698520
AVG CODE			3

A2 INPATIENT CAPABILITY

MTF BEDS	42			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
SPOHN HOSP	0.79	0.21	301	63.21
SPHON HOSP SOUTH	0.44	0.56	69	38.64
SHHON HOSP KLEBERG	0.72	0.28	32	8.96
MEM HOSP	0.64	0.36	265	95.4
SOUTHSIDE HEALTH	0.7	0.3	154	46.2
DRISCOLL CHILDRENS	0.77	0.23	102	23.46
BAY AREA MED CLIN	0.56	0.44	103	45.32
DOCTORS REGIONAL	0.48	0.52	193	100.36
RIVERSIDE HOSP	0.51	0.49	89	43.61
SOUTH TEXAS REHAB	0.6	0.4	80	32
CHARTER HOSP	0.76	0.24	80	19.2
COSTAL BEND HOSP	0.51	0.49	71	34.79
			SUM	551.15
			RATIO	13.12262
			SCORE	1

DON JWG DATA SHEETS

FACILITY	UIC
PORTSMOUTH	183

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
259152	226784	518210	10

F1 FCAD SCORE

FCAD	SCORE
92.2	10

F2 REAL PROPERTY

RATING	SCORE
2.35	9

F4 SAFETY SCORE

JCAHO	SCORE
5	1

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
15	10

MC2 STUBBED BEDS

NUMBER	SCORE
437 ~~176~~	1

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4428.59	4479.33	0.988672	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
749	1417907	1	
		1893.067	
		0.000528	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 PATIENT CARE	189798	167	31696266
540-10 DENTAL	10600	167	1770200
171-20 APPLIED INSTRUC	46219	52	2403388
171-25 AUDITORIUM	2392	52	124384
610-10 ADMINISTRATION	2544	52	132288
721-11 BEQ	13464	52	700128
721-11 BEQ	44826	52	2330952
721-11 BEQ	9682	52	503464
510-10 INTERIM CLINIC	7434	4	29736
510-10 INTERIM CLINIC	5466	4	21864
510-10 patient care	459605	34	15626570
610-10 ADMINISTRATION	400	34	13600
722-10 DINING	18252	34	620568
730-83 CHAPEL	3932	34	133688
510-10 MEDICAL SUPPOR	12654	17	215118
510-77 MEDICAL STORAG	10496	17	178432
610-20 MID	3344	17	56848
441-10 WAREHOUSE	40120	17	682040
550-10 MEDICAL REPAIR	2009	17	34153
610-10 ADMIN	15438	17	262446
530-40 CLIN RESEARCH	21560	1	21560
510-10 RETORT STERILIZ	1350	1	1350
610-20 DATA PROCESSIN	3389	17	57613
PARKING GARAGE	798150	2	1596300
TOTAL	1723124		59212956
AVERAGE WEIGHTED AG			34.3637231
		SCORE	1

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 PATIENT CARE	189798	1	189798
540-10 DENTAL	10600	1	10600
171-20 APPLIED INSTRUC	46219	2	92438
171-25 AUDITORIUM	2392	2	4784
610-10 ADMINISTRATION	2544	2	5088
721-11 BEQ	13464	2	26928
721-11 BEQ	44826	1	44826
721-11 BEQ	9682	1	9682
510-10 INTERIM CLINIC	7434	3	22302
510-10 INTERIM CLINIC	5466	3	16398
510-10 patient care	459605	2	919210
610-10 ADMINISTRATION	400	3	1200
722-10 DINING	18252	2	36504
730-83 CHAPEL	3932	3	11796
510-10 MEDICAL SUPPOR	12654	3	37962
510-77 MEDICAL STORAG	10496	3	31488
610-20 MID	3344	3	10032
441-10 WAREHOUSE	40120	2	80240
550-10 MEDICAL REPAIR	2009	2	4018
610-10 ADMIN	15438	2	30876
530-40 CLIN RESEARCH	21560	3	64680
510-10 RETORT STERILIZ	1350	3	4050
610-20 DATA PROCESSIN	3389	2	6778
PARKING GARAGE	798150	3	2394450
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TOTAL	1723124		4056128
AVG CODE			2.353938544

Portsmouth

DON JWG DATA SHEETS

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 PATIENT CARE	189798	167	31696266
540-10 DENTAL	10600	167	1770200
171-20 APPLIED INSTRUC	46219	52	2403388
171-25 AUDITORIUM	2392	52	124384
610-10 ADMINISTRATION	2544	52	132288
721-11 BEQ	13464	52	700128
721-11 BEQ	44826	52	2330952
721-11 BEQ	9682	52	503464
510-10 INTERIM CLINIC	7434	4	29736
510-10 INTERIM CLINIC	5466	4	21864
510-10 patient care	459605	34	15626570
610-10 ADMINISTRATION	400	34	13600
722-10 DINING	18252	34	620568
730-83 CHAPEL	3932	34	133688
510-10 MEDICAL SUPPOR	12654	17	215118
510-77 MEDICAL STORAG	10496	17	178432
610-20 MID	3344	17	56848
441-10 WAREHOUSE	40120	17	682040
550-10 MEDICAL REPAIR	2009	17	34153
610-10 ADMIN	15438	17	262446
530-40 CLIN RESEARCH	21560	1	21560
510-10 RETORT STERILIZ	1350	1	1350
610-20 DATA PROCESSIN	3389	17	57613
PARKING GARAGE	798150	2	1596300
TOTAL	1723124		59212956
AVERAGE WEIGHTED AG			34.3637231
		SCORE	1

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 PATIENT CARE	189798	1	189798
540-10 DENTAL	10600	1	10600
171-20 APPLIED INSTRUC	46219	2	92438
171-25 AUDITORIUM	2392	2	4784
610-10 ADMINISTRATION	2544	2	5088
721-11 BEQ	13464	2	26928
721-11 BEQ	44826	1	44826
721-11 BEQ	9682	1	9682
510-10 INTERIM CLINIC	7434	3	22302
510-10 INTERIM CLINIC	5466	3	16398
510-10 patient care	459605	2	919210
610-10 ADMINISTRATION	400	3	1200
722-10 DINING	18252	2	36504
730-83 CHAPEL	3932	3	11796
510-10 MEDICAL SUPPOR	12654	3	37962
510-77 MEDICAL STORAG	10496	3	31488
610-20 MID	3344	3	10032
441-10 WAREHOUSE	40120	2	80240
550-10 MEDICAL REPAIR	2009	2	4018
610-10 ADMIN	15438	2	30876
530-40 CLIN RESEARCH	21560	3	64680
510-10 RETORT STERILIZ	1350	3	4050
610-20 DATA PROCESSIN	3389	2	6778
PARKING GARAGE	798150	3	2394450
			0
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TOTAL	1723124		4056128
AVG CODE			2.353938544

A2 INPATIENT CAPABILITY

MTF BEDS	431			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHESAPEAKE GENL	0.753	0.247	260	64.22
HCA PENISULA	0.504	0.496	125	62
SENTARA HAMPTON GENL	0.749	0.251	211	52.961
VA MED CTR	0.711	0.289	312	90.168
MARY INNACULATE	0.691	0.309	110	33.99
CHILDRENS HOSP OF KINGS	0.848	0.152	156	23.712
DEPAUL MED CTR	0.68	0.32	274	87.68
LAKE TAYLOR	0.413	0.587	104	61.048
NORFOLK COMM HOSP	0.281	0.719	96	69.024
SENTARA LEIGH	0.632	0.368	224	82.432
SENTARA NORFOLK GENL	0.763	0.237	641	151.917
MARYVIEW	0.598	0.402	321	129.042
PORTS GENL	0.554	0.446	184	82.064
LOUISE OBICI	0.634	0.366	191	69.906
VA BCH GENL HOSP	0.632	0.368	280	103.04
NEWPORT NEWS GENERAL	0.25	0.75	126	94.5
RIVERSIDE REG MED CTR	0.554	0.446	576	256.896
SENTARA BAYSIDE	0.51	0.49	175	85.75
			SUM	1600.35
			RATIO	3.713109
			SCORE	5

See next page

A2 INPATIENT CAPABILITY

MTF BEDS	431			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHESAPEAKE GENL	✓ 0.753	0.247	✓ 260	64.22
HCA PENISULA	0.504	0.496	125	62
SENTARA HAMPTON GENL	✓ 0.749	0.251	✓ 211	52.961
VA MED CTR	✓ 0.711	0.289	✓ 312	90.168
MARY INNACULATE	✓ 0.691	0.309	✓ 110	33.99
CHILDRENS HOSP OF KINGS	✓ 0.848	0.152	✓ 156	23.712
DEPAUL MED CTR	✓ 0.68	0.32	✓ 274	87.68
LAKE TAYLOR	✓ 0.413	0.587	✓ 104	61.048
NORFOLK COMM HOSP	✓ 0.281	0.719	✓ 96	69.024
SENTARA LEIGH	✓ 0.632	0.368	✓ 224	82.432
SENTARA NORFOLK GENL	✓ 0.763	0.237	✓ 641	151.917
MARYVIEW	✓ 0.598	0.402	✓ 321	129.042
PORTS GENL	✓ 0.554	0.446	✓ 184	82.064
LOUISE OBICI	✓ 0.634	0.366	✓ 191	69.906
VA BCH GENL HOSP	✓ 0.632	0.368	✓ 280	103.04
NEWPORT NEWS GENERAL	✓ 0.25	0.75	✓ 126	94.5
RIVERSIDE REG MED CTR	✓ 0.554	0.446	✓ 576	256.896
SENTARA BAYSIDE	✓ 0.51	0.49	✓ 175	85.75
			SUM	1600.35
			RATIO	3.713109
			SCORE	6

Peninsula Psych. Hosp. PPH

/17

62 = 1538/431 = 3.57

FACILITY	UIC
PORTSMOUTH	183

P1 POPULATION

CACHMENT	ASSIGNE	REGION	SCORE
259152	226784	518210	10

F1 FCAD SCORE

FCAD	SCORE
92.2	10

F2 REAL PROPERTY

RATING	SCORE
2.415	9

F4 SAFETY SCORE

JCAHO	SCORE
5	1

MC1 AIR HUB DISTANCE

DISTANCE	SCORE
15	10

MC2 STUBBED BEDS

NUMBER	SCORE
176	7

C1 COST OF INPATIENT CARE

ASA RATE	MTF COS	RATIO	SCORE
4428.59	4479.33	0.988672	

A1 PRIMARY CARE RATIO

PRIM MD	POP	RATIO	SCORE
237	1417907	1	
		5982.73	
		0.000167	

F3 AVERAGE SQ FT AGE

BUILDING NAME/USE	GSF	AGE	A*B
510-10 PATIENT CARE	189798	167	31696266
540-10 DENTAL	10600	167	1770200
171-20 APPLIED INSTRUC	46219	52	2403388
171-25 AUDITORIUM	2392	52	124384
610-10 ADMINISTRATION	2544	52	132288
721-11 BEQ	13464	52	700128
721-11 BEQ	44826	52	2330952
721-11 BEQ	9682	52	503464
510-10 INTER M CLINIC	7434	4	29736
510-10 INTERIM CLINIC	5466	4	21864
510-10 patient care	459605	34	15626570
610-10 ADMINISTRATION	400	34	13600
722-10 DINING	18252	34	620568
730-83 CHAPEL	3932	34	133688
510-10 MEDICAL SUPPOR	12654	17	215118
510-77 MEDICAL STORAG	10496	17	178432
610-20 MID	3344	17	56848
441-10 WAREHOUSE	40120	17	682040
550-10 MEDICAL REPAIR	2009	17	34153
610-10 ADMIN	15438	17	262446
530-40 CLIN RESEARCH	21560	1	21560
510-10 RETORT STERILIZ	1350	1	1350
610-20 DATA PROCESSIN	3389	17	57613
TOTAL	924974		57616656
AVERAGE WEIGHTED AG			62.29002761
		SCORE	1

REVISED

REAL PROPERTY RATING

BUILDING	GSF	CODE	PROD.
510-10 PATIENT CARE	189798	1	189798
540-10 DENTAL	10600	1	10600
171-20 APPLIED INSTRUC	46219	2	92438
171-25 AUDITORIUM	2392	2	4784
610-10 ADMINISTRATION	2544	2	5088
721-11 BEQ	13464	2	26928
721-11 BEQ	44826	1	44826
721-11 BEQ	9682	1	9682
510-10 INTERIM CLINIC	7434	3	22302
510-10 INTERIM CLINIC	5466	3	16398
510-10 patient care	459605	2	919210
610-10 ADMINISTRATION	400	3	1200
722-10 DINING	18252	2	36504
730-83 CHAPEL	3932	3	11796
510-10 MEDICAL SUPPOR	12654	3	37962
510-77 MEDICAL STORAG	10496	3	31488
610-20 MID	3344	3	10032
441-10 WAREHOUSE	40120	2	80240
550-10 MEDICAL REPAIR	2009	2	4018
610-10 ADMIN	15438	2	30876
530-40 CLIN RESEARCH	21560	3	64680
510-10 RETORT STERILIZ	1350	3	4050
610-20 DATA PROCESSIN	3389	2	6778
TOTAL	924974		1661678
AVG CODE			1.796459144

Revised

A2 INPATIENT CAPABILITY

MTF BEDS	431			AVAIL
FACILITY	RATE	1-RATE	BEDS	BEDS
CHESAPEAKE GENL	0.753	0.247	260	64.22
HCA PENISULA	0.586	0.414	125	51.75
SENTARA HAMPTON GENL	0.749	0.251	211	52.961
VA MED CTR	0.711	0.289	312	90.168
MARY INNACULATE	0.691	0.309	110	33.99
CHILDRENS HOSP OF KINGS	0.848	0.152	156	23.712
DEPAUL MED CTR	0.68	0.32	274	87.68
LAKE TAYLOR	0.413	0.587	104	61.048
NORFOLK COMM HOSP	0.281	0.719	96	69.024
SENTARA LEIGH	0.632	0.368	224	82.432
SENTARA NORFOLK GENL	0.763	0.237	641	151.917
MARYVIEW	0.598	0.402	321	129.042
PORTS GENL	0.554	0.446	184	82.064
LOUISE OBICI	0.634	0.366	191	69.906
VA BCH GENL HOSP	0.632	0.368	280	103.04
			SUM	1152.954
			RATIO	2.675067
			SCORE	6

updated 9 Nov 94

DEPARTMENT OF THE AIR FORCE
HEADQUARTERS UNITED STATES AIR FORCE

1 Nov 94

MEMORANDUM FOR THE CHAIRMAN, JOINT CROSS-SERVICE GROUP FOR MEDICAL TREATMENT FACILITIES (MTF) AND GRADUATE MEDICAL EDUCATION (GME)

FROM: HQ USAF/SGMM
170 Luke Avenue, Suite 400
Bolling AFB, DC 20332-5113

SUBJECT: Air Force Data Input to the Joint Cross-Service Group for MTF and GME (SAF/MII Memo, 29 Aug 94)

As requested, attached is a summary of the Air Force data provided in the referenced memo (one sheet per medical treatment facility). This summary has been verified by the AF Audit Agency as a true representation of the certified data submitted by SAF/MII. My Point of Contact is CMSgt DuMez or Capt Davis, HQ USAF/SGMM, DSN 297-5550.

J. CRAIG PATCHIN, Col, USAF, MSC
Chief, Manpower Division
Dir, Med Programs and Resources
Office of the Surgeon General

Attachments:
Summary Sheets (one per inpatient facility)

cc:
AF/RTR

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	ALTUS 0097	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1	MISSION						
P1	ACTIVE DUTY AND FAM MEMBER POP						
	W/IN 40 MILE RADIUS	7507	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	38					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	81251					
	RATIO	2138	6	15%	0.9	40%	0.36
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE						
	CATCHMENT AREA	3					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED						
	CIVILIAN/VA HOSPITALS	77					
	(c) # OF OPERATING BEDS AT MTF	7					
	RATIO OF CIVILIAN ACUTE CARE BEDS						
	AVAILABLE TO OP BEDS IN THE MTF	11.00	1	15%	0.15	40%	0.06
	TOTAL				**2.45**	**40%**	**0.98**
CRITERION 2	FACILITY						
F1	FACILITY CONDITION ASSESSMENT SCORE						
	(SEE DD FORM 2407)	98.7	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	15	6	70%	4.2	20%	0.84
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**7.2**	**20%**	**1.44**
CRITERION 3	CONTINGENCY						
MC1	DISTANCE TO AIR HUB	0.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	39	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4	COST/MANPOWER						
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED						
	AMOUNT (ASA), PER RWP	$3,631.65					
	(b) MTF COST PER RWP	$5,689.39					
	RATIO OF CHAMPUS COST TO MTF COST	0.64	2	100%	2	20%	0.4
	TOTAL				**2**	**20%**	**0.4**
	TOTAL FUNCTIONAL SCORE						**3.92**
	RETIRED AND OTHERS	3541					
	AVAIL BEDS	39					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY ANDREWS 0066		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	29651	6	70%	4.2	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	7999					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	729268					
	RATIO	91	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	35					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	3166					
	(c) # OF OPERATING BEDS AT MTF	185					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	17.113514	1	15%	0.15	40%	0.06
	TOTAL				**4.5**	**40%**	**1.8**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	71.9	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.30	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	35	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**6.45**	**20%**	**1.29**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	388	8	50%	4	20%	0.8
	TOTAL				**9**	**20%**	**1.8**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,848.80					
	(b) MTF COST PER RWP	$4,890.41					
	RATIO OF CHAMPUS COST TO MTF COST	0.99	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**5.89**
	RETIRED AND OTHERS	32329					
	AVAIL BEDS	244					
	MILEAGE TO WRAMC (0037)	23.2					
	MILEAGE TO BNMC (0067)	24.9					
	MILEAGE TO KIMBROUGH (0069)	33.8					
	MILEAGE TO DEWITT (0123)	25.5					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY BARKSDALE 0062		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	15532	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	656					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	352600					
	RATIO	538	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	7					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	700					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	28	1	15%	0.15	40%	0.06
	TOTAL				**3.1**	**40%**	**1.24**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	82.9	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.20	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	25	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7**	**20%**	**1.4**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	70	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,250.33					
	(b) MTF COST PER RWP	$3,923.68					
	RATIO OF CHAMPUS COST TO MTF COST	1.08	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**5.04**
	RETIRED AND OTHERS	18199					
	AVAIL BEDS	46					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	BEALE 0015	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	9488	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	2540					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1393000					
	RATIO	548	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	288					
	(c) # OF OPERATING BEDS AT MTF	9					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	32.00	1	15%	0.15	40%	0.06
	TOTAL				**1.7**	**40%**	**0.68**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	70.2	7	15%	1.05	20%	0.21
F2	INSTALLATION REAL PROPERTY RATING	1.95	5	15%	0.75	20%	0.15
F3	WEIGHTED AGE	32	3	70%	2.1	20%	0.42
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**3.9**	**20%**	**0.78**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	14	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,265.68					
	(b) MTF COST PER RWP	$4,910.43					
	RATIO OF CHAMPUS COST TO MTF COST	1.07	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**3.76**
	RETIRED AND OTHERS	10896					
	AVAIL BEDS	14					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	CANNON 0085	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	15591	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	69					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	70000					
	RATIO	1014	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	1					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	37					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	2.47	10	15%	1.5	40%	0.6
	TOTAL				**4.75**	**40%**	**1.9**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	88.7	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	24	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	4	3	30%	0.9	20%	0.18
	TOTAL				**5.35**	**20%**	**1.07**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	36	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
£1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,863.29					
	(b) MTF COST PER RWP	$4,658.11					
	RATIO OF CHAMPUS COST TO MTF COST	0.83	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**4.87**
	RETIRED AND OTHERS	3489					
	AVAIL BEDS	29					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	COLUMBUS 0074	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	3633	1	70%	0.7	40%	0.28
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	190					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	222365					
	RATIO	1170	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	7					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	438					
	(c) # OF OPERATING BEDS AT MTF	5					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	87.6	1	15%	0.15	40%	0.06
	TOTAL				**1.3**	**40%**	**0.52**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	94.3	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	35	3	70%	2.1	20%	0.42
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**5.1**	**20%**	**1.02**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	17	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,667.80					
	(b) MTF COST PER RWP	$4,931.32					
	RATIO OF CHAMPUS COST TO MTF COST	0.74	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**3.24**
	RETIRED AND OTHERS	5426					
	AVAIL BEDS	17					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	DAVIS MONTHAN 0010	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	18327	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	881					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	734247					
	RATIO	833	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	9					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	782					
	(c) # OF OPERATING BEDS AT MTF	30					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	26.07	1	15%	0.15	40%	0.06
	TOTAL				**3.25**	**40%**	**1.3**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	87.1	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.30	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	33	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**5.1**	**20%**	**1.02**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	112	3	50%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,412.04					
	(b) MTF COST PER RWP	$3,570.51					
	RATIO OF CHAMPUS COST TO MTF COST	1.24	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**5.22**
	RETIRED AND OTHERS	31846					
	AVAIL BEDS	70					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	DOVER 0036	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	13663	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	563					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	666000					
	RATIO	1183	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	7					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	467					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	23.35	1	15%	0.15	40%	0.06
	TOTAL				**2.7**	**40%**	**1.08**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	62.9	7	15%	1.05	20%	0.21
F2	INSTALLATION REAL PROPERTY RATING	2.00	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	30	3	70%	2.1	20%	0.42
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**4.05**	**20%**	**0.81**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	60	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,199.27					
	(b) MTF COST PER RWP	$3,371.64					
	RATIO OF CHAMPUS COST TO MTF COST	1.25	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**4.69**
	RETIRED AND OTHERS	13421					
	AVAIL BEDS	39					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	DYESS 0112	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	13057	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	70					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	106654					
	RATIO	1524	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	45					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	3	5	15%	0.75	40%	0.3
	TOTAL				**3.45**	**40%**	**1.38**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	92.2	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	39	2	70%	1.4	20%	0.28
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**4.4**	**20%**	**0.88**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	100	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,147.36					
	(b) MTF COST PER RWP	$4,739.11					
	RATIO OF CHAMPUS COST TO MTF COST	0.88	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**4.26**
	RETIRED AND OTHERS	8271					
	AVAIL BEDS	35					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	EDWARDS 0019	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	13152	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	285					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	313000					
	RATIO	1098	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	4					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	221					
	(c) # OF OPERATING BEDS AT MTF	10					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	22.1	1	15%	0.15	40%	0.06
	TOTAL				**2.7**	**40%**	**1.08**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	64.9	7	15%	1.05	20%	0.21
F2	INSTALLATION REAL PROPERTY RATING	2.30	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	30	3	70%	2.1	20%	0.42
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**4.2**	**20%**	**0.84**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	33	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,347.22					
	(b) MTF COST PER RWP	$6,355.26					
	RATIO OF CHAMPUS COST TO MTF COST	0.84	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**3.82**
	RETIRED AND OTHERS	7581					
	AVAIL BEDS	30					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY EGLIN 0042		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	39369	8	70%	5.6	40%	2.24
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	98					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	223000					
	RATIO	2276	7	15%	1.05	40%	0.42
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	5					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	278					
	(c) # OF OPERATING BEDS AT MTF	85					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	3.27	5	15%	0.75	40%	0.3
	TOTAL				**7.4**	**40%**	**2.96**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	71.9	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	29	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**6.3**	**20%**	**1.26**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	4.6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	275	6	50%	3	20%	0.6
	TOTAL				**8**	**20%**	**1.6**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,991.33					
	(b) MTF COST PER RWP	$4,512.98					
	RATIO OF CHAMPUS COST TO MTF COST	0.88	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**6.62**
	RETIRED AND OTHERS	32757					
	AVAIL BEDS	120					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY ELLSWORTH 0106		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	14000	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	57					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	92485					
	RATIO	1623	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	3					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	242					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	16.13	1	15%	0.15	40%	0.06
	TOTAL				**3**	**40%**	**1.2**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	100	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	25	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	20%	0.48
	TOTAL				**7**	**20%**	**1.4**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	58	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,031.12					
	(b) MTF COST PER RWP	$4,144.52					
	RATIO OF CHAMPUS COST TO MTF COST	0.97	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**4.8**
	RETIRED AND OTHERS	6539					
	AVAIL BEDS	35					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	ELMENDORF 0006	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	25834	6	70%	4.2	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	217					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	301360					
	RATIO	1389	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	276					
	(c) # OF OPERATING BEDS AT MTF	75					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	3.68	4	15%	0.6	40%	0.24
	TOTAL				**5.4**	**40%**	**2.16**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	44.2	5	15%	0.75	20%	0.15
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	35	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**5.85**	**20%**	**1.17**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	4	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	32	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,877.49					
	(b) MTF COST PER RWP	$4,793.15					
	RATIO OF CHAMPUS COST TO MTF COST	1.23	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**6.03**
	RETIRED AND OTHERS	12942					
	AVAIL BEDS	139					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY FAIRCHILD 0128		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	13407	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	301					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	509800					
	RATIO	1694	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	5					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	547					
	(c) # OF OPERATING BEDS AT MTF	30					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	18.23	1	15%	0.15	40%	0.06
	TOTAL				**3**	**40%**	**1.2**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	78.3	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.20	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	37	2	40%	0.8	20%	0.16
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**4.55**	**20%**	**0.91**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	90	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,735.97					
	(b) MTF COST PER RWP	$4,101.13					
	RATIO OF CHAMPUS COST TO MTF COST	1.15	7	100%	7	20%	1.4
	TOTAL				**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE						**4.71**
	RETIRED AND OTHERS	16360					
	AVAIL BEDS	61					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	FE WARREN 0129	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	8700	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	87					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	143535					
	RATIO	1650	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	160					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	10.67	1	15%	0.15	40%	0.06
	TOTAL				**2.3**	**40%**	**0.92**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	98.5	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	28	4	70%	2.8	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**5.8**	**20%**	**1.16**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	43	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,872.50					
	(b) MTF COST PER RWP	$4,607.92					
	RATIO OF CHAMPUS COST TO MTF COST	0.84	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**3.98**
	RETIRED AND OTHERS	5870					
	AVAIL BEDS	24					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY GRAND FORKS 0093		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	12545	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	96					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	106138					
	RATIO	1106	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	3					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	172					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	11.47	1	15%	0.15	40%	0.06
	TOTAL				**2.7**	**40%**	**1.08**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	80.7	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	31	3	70%	2.1	20%	0.42
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**4.2**	**20%**	**0.84**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	7	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	34	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,069.49					
	(b) MTF COST PER RWP	$4,666.51					
	RATIO OF CHAMPUS COST TO MTF COST	0.87	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**3.82**
	RETIRED AND OTHERS	2821					
	AVAIL BEDS	34					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY HILL 0119		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	15002	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	607					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1108724					
	RATIO	1827	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	14					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1250					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	50	1	15%	0.15	40%	0.06
	TOTAL				**3.7**	**40%**	**1.48**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	92.9	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	21	5	40%	2	20%	0.4
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**8**	**20%**	**1.6**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	55	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,593.11					
	(b) MTF COST PER RWP	$3,681.38					
	RATIO OF CHAMPUS COST TO MTF COST	1.25	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**5.88**
	RETIRED AND OTHERS	21608					
	AVAIL BEDS	42					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY HOLLOMAN 0084		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	14414	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	19					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	51928					
	RATIO	2733	8	15%	1.2	40%	0.48
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	1					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	38					
	(c) # OF OPERATING BEDS AT MTF	8					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	4.75	10	15%	1.5	40%	0.6
	TOTAL				**4.8**	**40%**	**1.92**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	83.2	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.30	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	23	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	5	1	30%	0.3	20%	0.06
	TOTAL				**4.3**	**20%**	**0.86**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.25	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	28	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,899.25					
	(b) MTF COST PER RWP	$4,522.84					
	RATIO OF CHAMPUS COST TO MTF COST	0.86	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**4.68**
	RETIRED AND OTHERS	11976					
	AVAIL BEDS	30					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY KIRTLAND 0083		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	14162	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	360					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	500000					
	RATIO	1389	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	9					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	965					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	38.6	1	15%	0.15	40%	0.06
	TOTAL				**2.85**	**40%**	**1.14**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	93.9	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	11	6	40%	2.4	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	20%	0.48
	TOTAL				**7.8**	**20%**	**1.56**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	40	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,586.16					
	(b) MTF COST PER RWP	$3,737.19					
	RATIO OF CHAMPUS COST TO MTF COST	1.23	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**5.4**
	RETIRED AND OTHERS	24892					
	AVAIL BEDS	40					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY LANGLEY 0120		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	31455	7	70%	4.9	40%	1.96
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	745					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1351977					
	RATIO	1815	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	15					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1239					
	(c) # OF OPERATING BEDS AT MTF	40					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	30.98	1	15%	0.15	40%	0.06
	TOTAL				**5.8**	**40%**	**2.32**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	91.7	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.40	8	15%	1.2	20%	0.24
F3	WEIGHTED AGE	26	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7.3**	**20%**	**1.46**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	120	3	50%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,155.54					
	(b) MTF COST PER RWP	$5,229.04					
	RATIO OF CHAMPUS COST TO MTF COST	0.79	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**5.68**
	RETIRED AND OTHERS	22299					
	AVAIL BEDS	71					
	MILEAGE TO MCDONALD (0121)	9.9					
	MILEAGE TO PORTSMOUTH NH (0124)	28.9					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	LAUGHLIN 0114	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	3009	1	70%	0.7	40%	0.28
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	16					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	30705					
	RATIO	1919	6	15%	0.9	40%	0.36
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	1					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	48					
	(c) # OF OPERATING BEDS AT MTF	5					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	9.6	10	15%	1.5	40%	0.6
	TOTAL				**3.1**	**40%**	**1.24**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	96.5	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	18	5	70%	3.5	20%	0.7
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**5.9**	**20%**	**1.18**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.9	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	40	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,653.08					
	(b) MTF COST PER RWP	$7,617.20					
	RATIO OF CHAMPUS COST TO MTF COST	0.48	1	100%	1	20%	0.2
	TOTAL				**1**	**20%**	**0.2**
	TOTAL FUNCTIONAL SCORE						**3.72**
	RETIRED AND OTHERS	2159					
	AVAIL BEDS	28					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	LITTLE ROCK 0013	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1	MISSION						
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	13484	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	299					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	534099					
	RATIO	1786	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	9					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1221					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	61.05	1	15%	0.15	40%	0.06
	TOTAL				**3**	**40%**	**1.2**
CRITERION 2	FACILITY						
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	86.7	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.00	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	14	6	40%	2.4	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**6.15**	**20%**	**1.23**
CRITERION 3	CONTINGENCY						
MC1	DISTANCE TO AIR HUB	2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	68	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4	COST/MANPOWER						
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,967.82					
	(b) MTF COST PER RWP	$3,615.30					
	RATIO OF CHAMPUS COST TO MTF COST	1.10	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**4.83**
	RETIRED AND OTHERS	22992					
	AVAIL BEDS	39					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY LUKE 0009		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	19503	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	1672					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	2050000					
	RATIO	1226	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	20					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1537					
	(c) # OF OPERATING BEDS AT MTF	40					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	38.425	1	15%	0.15	40%	0.06
	TOTAL				**3.4**	**40%**	**1.36**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	98.9	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	21	5	40%	2	20%	0.4
F4	JCAHO LIFE SAFETY SCORE	5	1	30%	0.3	20%	0.06
	TOTAL				**5.3**	**20%**	**1.06**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.8	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	100	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,784.96					
	(b) MTF COST PER RWP	$4,295.18					
	RATIO OF CHAMPUS COST TO MTF COST	1.11	7	100%	7	20%	1.4
	TOTAL				**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE						**5.02**
	RETIRED AND OTHERS	54794					
	AVAIL BEDS	60					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY MACDILL 0045		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	15542	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	3406					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	2830000					
	RATIO	831	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	24					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	2884					
	(c) # OF OPERATING BEDS AT MTF	50					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	57.68	1	15%	0.15	40%	0.06
	TOTAL				**3.25**	**40%**	**1.3**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	99.1	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.20	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	33	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**6.75**	**20%**	**1.35**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2.2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	142	3	50%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,399.06					
	(b) MTF COST PER RWP	$3,790.10					
	RATIO OF CHAMPUS COST TO MTF COST	1.16	7	100%	7	20%	1.4
	TOTAL				**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE						**5.35**
	RETIRED AND OTHERS	79529					
	AVAIL BEDS	69					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	MAXWELL 0004	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	14410	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	312					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	340647					
	RATIO	1092	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	7					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	573					
	(c) # OF OPERATING BEDS AT MTF	30					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	19.10	1	15%	0.15	40%	0.06
	TOTAL				**2.7**	**40%**	**1.08**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	82.4	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	1.70	4	15%	0.6	20%	0.12
F3	WEIGHTED AGE	37	2	40%	0.8	20%	0.16
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**4.25**	**20%**	**0.85**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	118	3	50%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,807.88					
	(b) MTF COST PER RWP	$4,874.50					
	RATIO OF CHAMPUS COST TO MTF COST	0.78	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**3.83**
	RETIRED AND OTHERS	23209					
	AVAIL BEDS	71					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	MCCLELLAN-MATHER 0250	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	11084	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	2798					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1643000					
	RATIO	587	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	16					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1279					
	(c) # OF OPERATING BEDS AT MTF	30					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	42.633333	1	15%	0.15	40%	0.06
	TOTAL				**2.4**	**40%**	**0.96**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	98.8	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	20*	5	40%	2	20%	0.4
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	14	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	70	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,300.63					
	(b) MTF COST PER RWP	$4,145.72					
	RATIO OF CHAMPUS COST TO MTF COST	1.28	8	100%	8	20%	1.6
	TOTAL				**8**	**20%**	**1.6**
	TOTAL FUNCTIONAL SCORE						**5.06**
	RETIRED AND OTHERS	48943					
	AVAIL BEDS	35					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	MCGUIRE/WALSON 0326	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	26282	6	70%	4.2	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	793					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	395000					
	RATIO	498	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	8					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	729					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	36.45	1	15%	0.15	40%	0.06
	TOTAL				**4.5**	**40%**	**1.8**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	84.5	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	35*	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	20%	0.48
	TOTAL				**5.85**	**20%**	**1.17**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	350	7	50%	3.5	20%	0.7
	TOTAL				**8.5**	**20%**	**1.7**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,807.07					
	(b) MTF COST PER RWP	$4,141.43					
	RATIO OF CHAMPUS COST TO MTF COST	1.16	7	100%	7	20%	1.4
	TOTAL				**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE						**6.07**
	RETIRED AND OTHERS	53733					
	AVAIL BEDS	350					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY MINOT 0094		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	12000	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	56					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	70864					
	RATIO	1265	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	176					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	7.04	1	15%	0.15	40%	0.06
	TOTAL				**2.7**	**40%**	**1.08**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	100	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	10	7	40%	2.8	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**8.8**	**20%**	**1.76**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	75	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,696.98					
	(b) MTF COST PER RWP	$4,889.72					
	RATIO OF CHAMPUS COST TO MTF COST	0.76	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**4.64**
	RETIRED AND OTHERS	12300					
	AVAIL BEDS	47					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY MOODY 0050		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	9611	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	255					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	202546					
	RATIO	794	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	4					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	292					
	(c) # OF OPERATING BEDS AT MTF	10					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	29.2	1	15%	0.15	40%	0.06
	TOTAL				**1.85**	**40%**	**0.74**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	88.4	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	21	5	40%	2	20%	0.4
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7.85**	**20%**	**1.57**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.8	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	47	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,873.25					
	(b) MTF COST PER RWP	$6,213.95					
	RATIO OF CHAMPUS COST TO MTF COST	0.62	2	100%	2	20%	0.4
	TOTAL				**2**	**20%**	**0.4**
	TOTAL FUNCTIONAL SCORE						**3.81**
	RETIRED AND OTHERS	7381					
	AVAIL BEDS	47					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY MT. HOME 0053		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	11957	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	8					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	22511					
	RATIO	2814	9	15%	1.35	40%	0.54
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	0					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	0					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	0	10	15%	1.5	40%	0.6
	TOTAL				**4.95**	**40%**	**1.98**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	99.1	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	5	8	40%	3.2	20%	0.64
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**9.2**	**20%**	**1.84**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	31	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,114.01					
	(b) MTF COST PER RWP	$4,381.50					
	RATIO OF CHAMPUS COST TO MTF COST	0.94	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**5.92**
	RETIRED AND OTHERS	9887					
	AVAIL BEDS	31					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	NELLIS 0079	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	20071	5	70%	3.5	40%	1.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	685					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	911838					
	RATIO	1331	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	394					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	19.7	1	15%	0.15	40%	0.06
	TOTAL				**4.25**	**40%**	**1.7**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	100	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	1	10	40%	4	20%	0.8
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**10**	**20%**	**2**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	77	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,749.62					
	(b) MTF COST PER RWP	$4,822.90					
	RATIO OF CHAMPUS COST TO MTF COST	0.98	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**5.9**
	RETIRED AND OTHERS	34967					
	AVAIL BEDS	77					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	OFFUT-EhrlingBerquist 0078	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	26703	6	70%	4.2	40%	1.68
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	714					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	618300					
	RATIO	866	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	10					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	989					
	(c) # OF OPERATING BEDS AT MTF	50					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	19.78	1	15%	0.15	40%	0.06
	TOTAL				**4.65**	**40%**	**1.86**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	89.7	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	28	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7.45**	**20%**	**1.49**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	123	3	50%	1.5	20%	0.3
	TOTAL				**6.5**	**20%**	**1.3**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,120.59					
	(b) MTF COST PER RWP	$3,814.63					
	RATIO OF CHAMPUS COST TO MTF COST	1.08	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**5.85**
	RETIRED AND OTHERS	23276					
	AVAIL BEDS	107					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	PATRICK 0046	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	10556	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	148					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	398978					
	RATIO	2696	8	15%	1.2	40%	0.48
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	5					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	437					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	29.133333	1	15%	0.15	40%	0.06
	TOTAL				**3.45**	**40%**	**1.38**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	81.6	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.30	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	25	4	70%	2.8	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**5.2**	**20%**	**1.04**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	72	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,415.58					
	(b) MTF COST PER RWP	$4,030.79					
	RATIO OF CHAMPUS COST TO MTF COST	1.10	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**4.82**
	RETIRED AND OTHERS	33023					
	AVAIL BEDS	20					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	REESE 0111	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	3831	1	70%	0.7	40%	0.28
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	219					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	250783					
	RATIO	1145	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	575					
	(c) # OF OPERATING BEDS AT MTF	4					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	143.75	1	15%	0.15	40%	0.06
	TOTAL				**1.3**	**40%**	**0.52**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	93.3	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	24	4	70%	2.8	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**5.8**	**20%**	**1.16**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	20	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	N/A					
	(b) MTF COST PER RWP	$6,139.94					
	RATIO OF CHAMPUS COST TO MTF COST	0.64	2	100%	2	20%	0.4
	TOTAL				**2**	**20%**	**0.4**
	TOTAL FUNCTIONAL SCORE						**3.18**
	RETIRED AND OTHERS	5250					
	AVAIL BEDS	10					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	ROBINS 0051	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	11640	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	414					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	569938					
	RATIO	1377	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	11					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	560					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	37.333333	1	15%	0.15	40%	0.06
	TOTAL				**2.85**	**40%**	**1.14**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	92.2	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	23	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	20%	0.48
	TOTAL				**7**	**20%**	**1.4**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	32	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,074.06					
	(b) MTF COST PER RWP	$5,497.74					
	RATIO OF CHAMPUS COST TO MTF COST	0.74	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**4.24**
	RETIRED AND OTHERS	17514					
	AVAIL BEDS	31					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY SCOTT 0055		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	24566	5	70%	3.5	40%	1.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	2175					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	2447000					
	RATIO	1125	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	24					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	2668					
	(c) # OF OPERATING BEDS AT MTF	95					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	28.08	1	15%	0.15	40%	0.06
	TOTAL				**4.1**	**40%**	**1.64**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	39.2	4	15%	0.6	20%	0.12
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	33	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**5.7**	**20%**	**1.14**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	348	7	50%	3.5	20%	0.7
	TOTAL				**8.5**	**20%**	**1.7**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,425.63					
	(b) MTF COST PER RWP	$4,645.16					
	RATIO OF CHAMPUS COST TO MTF COST	0.95	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**5.48**
	RETIRED AND OTHERS	33977					
	AVAIL BEDS	120					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY SHAW 0101		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	16596	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	396					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	388000					
	RATIO	980	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	4					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	236					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	9.44	1	15%	0.15	40%	0.06
	TOTAL				**3.25**	**40%**	**1.3**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	92.7	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	25	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7.6**	**20%**	**1.52**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	90	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,076.11					
	(b) MTF COST PER RWP	$4,231.19					
	RATIO OF CHAMPUS COST TO MTF COST	0.96	5	100%	5	20%	1
	TOTAL				**5**	**20%**	**1**
	TOTAL FUNCTIONAL SCORE						**5.02**
	RETIRED AND OTHERS	11200					
	AVAIL BEDS	48					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	SHEPPARD 0113	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	12420	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	91					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	118310					
	RATIO	1300	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	201					
	(c) # OF OPERATING BEDS AT MTF	80					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	2.5125	6	15%	0.9	40%	0.36
	TOTAL				**3.45**	**40%**	**1.38**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	96	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	30	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	20%	0.48
	TOTAL				**6.6**	**20%**	**1.32**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.8	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	318	7	50%	3.5	20%	0.7
	TOTAL				**8.5**	**20%**	**1.7**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,778.99					
	(b) MTF COST PER RWP	$5,183.98					
	RATIO OF CHAMPUS COST TO MTF COST	0.73	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**5**
	RETIRED AND OTHERS	9050					
	AVAIL BEDS	197					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	SEYMOUR JOHNSON 90	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	12920	3	70%	2.1	40%	0.84
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	425					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	661732					
	RATIO	1557	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	382					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	25.466667	1	15%	0.15	40%	0.06
	TOTAL				**2.85**	**40%**	**1.14**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	90.5	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	33	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**7.05**	**20%**	**1.41**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	48	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,889.19					
	(b) MTF COST PER RWP	$4,677.76					
	RATIO OF CHAMPUS COST TO MTF COST	0.83	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**4.45**
	RETIRED AND OTHERS	14216					
	AVAIL BEDS	44					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY TINKER 0096		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	23596	5	70%	3.5	40%	1.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	863					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	958839					
	RATIO	1111	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	17					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1325					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	53	1	15%	0.15	40%	0.06
	TOTAL				**4.1**	**40%**	**1.64**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	81.1	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.20	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	34	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**6.6**	**20%**	**1.32**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3.3	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	90	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,270.84					
	(b) MTF COST PER RWP	$5,349.34					
	RATIO OF CHAMPUS COST TO MTF COST	0.80	3	100%	3	20%	0.6
	TOTAL				**3**	**20%**	**0.6**
	TOTAL FUNCTIONAL SCORE						**4.76**
	RETIRED AND OTHERS	30326					
	AVAIL BEDS	65					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY TYNDALL 0043		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	15424	4	70%	2.8	40%	1.12
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	55					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	172566					
	RATIO	3138	10	15%	1.5	40%	0.6
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	155					
	(c) # OF OPERATING BEDS AT MTF	25					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	6.2	1	15%	0.15	40%	0.06
	TOTAL				**4.45**	**40%**	**1.78**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	80.8	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	31	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**5.4**	**20%**	**1.08**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	79	2	50%	1	20%	0.2
	TOTAL				**6**	**20%**	**1.2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,096.05					
	(b) MTF COST PER RWP	$7,270.98					
	RATIO OF CHAMPUS COST TO MTF COST	0.56	1	100%	1	20%	0.2
	TOTAL				**1**	**20%**	**0.2**
	TOTAL FUNCTIONAL SCORE						**4.26**
	RETIRED AND OTHERS	15370					
	AVAIL BEDS	57					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	USAF ACADEMY 0033	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	24269	5	70%	3.5	40%	1.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	263					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	429000					
	RATIO	1631	5	15%	0.75	40%	0.3
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	2					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	361					
	(c) # OF OPERATING BEDS AT MTF	55					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	6.56	1	15%	0.15	40%	0.06
	TOTAL				**4.4**	**40%**	**1.76**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	89.6	9	15%	1.35	20%	0.27
F2	INSTALLATION REAL PROPERTY RATING	2.20	7	15%	1.05	20%	0.21
F3	WEIGHTED AGE	32	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**6.6**	**20%**	**1.32**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	13	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	157	4	50%	2	20%	0.4
	TOTAL				**7**	**20%**	**1.4**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,247.45					
	(b) MTF COST PER RWP	$4,162.44					
	RATIO OF CHAMPUS COST TO MTF COST	1.02	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**5.68**
	RETIRED AND OTHERS	21562					
	AVAIL BEDS	80					
	MILEAGE TO EVANS AH (0032)	21.7					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	VANDENBERG 0018	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	8848	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	290					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	334559					
	RATIO	1154	3	15%	0.45	40%	0.18
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	3					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	126					
	(c) # OF OPERATING BEDS AT MTF	20					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	6.3	1	15%	0.15	40%	0.06
	TOTAL				**2**	**40%**	**0.8**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	100	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	25	4	40%	1.6	20%	0.32
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	3	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	46	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,089.88					
	(b) MTF COST PER RWP	$3,462.05					
	RATIO OF CHAMPUS COST TO MTF COST	1.47	10	100%	10	20%	2
	TOTAL				**10**	**20%**	**2**
	TOTAL FUNCTIONAL SCORE						**5**
	RETIRED AND OTHERS	10008					
	AVAIL BEDS	48					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY	WHITEMAN 0076	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	8310	2	70%	1.4	40%	0.56
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	59					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	171227					
	RATIO	2902	9	15%	1.35	40%	0.54
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	4					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	165					
	(c) # OF OPERATING BEDS AT MTF	15					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	11.00	1	15%	0.15	40%	0.06
	TOTAL				**2.9**	**40%**	**1.16**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	80.4	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.00	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	22	4	70%	2.8	20%	0.56
F4	JCAHO LIFE SAFETY SCORE	NA	NA				
	TOTAL				**4.9**	**20%**	**0.98**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	29	1	50%	0.5	20%	0.1
	TOTAL				**5.5**	**20%**	**1.1**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$3,707.10					
	(b) MTF COST PER RWP	$4,548.24					
	RATIO OF CHAMPUS COST TO MTF COST	0.82	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**4.04**
	RETIRED AND OTHERS	5383					
	AVAIL BEDS	26					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY Keesler as CHosp 0073		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	38690	8	70%	5.6	40%	2.24
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	236					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	332226					
	RATIO	1408	4	15%	0.6	40%	0.24
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	574					
	(c) # OF OPERATING BEDS AT MTF	235					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	2.44	6	15%	0.9	40%	0.36
	TOTAL				**7.1**	**40%**	**2.84**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	78.3	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING	2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE	35	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	120%	1.8
	TOTAL				**4.8**	**20%**	**0.96**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	433	9	50%	4.5	20%	0.9
	TOTAL				**9.5**	**20%**	**1.9**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$5,247.56					
	(b) MTF COST PER RWP	$4,657.43					
	RATIO OF CHAMPUS COST TO MTF COST	1.13	7	100%	7	20%	1.4
	TOTAL				**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE						**7.1**
	RETIRED AND OTHERS	23112					
	AVAIL BEDS	306					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY Lackland as CHOSP 0117		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	43110	9	70%	6.3	40%	2.52
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	1306					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1136091					
	RATIO	870	2	15%	0.3	40%	0.12
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	14					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	2430					
	(c) # OF OPERATING BEDS AT MTF	585					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	4.15	3	15%	0.45	40%	0.18
	TOTAL				**7.05**	**40%**	**2.82**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	97.3	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	32	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	120%	1.8
	TOTAL				**5.7**	**20%**	**1.14**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	1033	10	50%	5	20%	1
	TOTAL				**10**	**20%**	**2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,632.61					-
	(b) MTF COST PER RWP	$4,608.31					
	RATIO OF CHAMPUS COST TO MTF COST	1.01	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**7.16**
	RETIRED AND OTHERS	47424					
	AVAIL BEDS	1006					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY Travis as CHosp 0014		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	36257	8	70%	5.6	40%	2.24
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	980					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1155838					
	RATIO	1179	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	22					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1721					
	(c) # OF OPERATING BEDS AT MTF	195					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	8.83	1	15%	0.15	40%	0.06
	TOTAL				**5.9**	**40%**	**2.36**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	99.8	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	6	8	40%	3.2	20%	0.64
F4	JCAHO LIFE SAFETY SCORE	2	8	30%	2.4	120%	2.88
	TOTAL				**8.6**	**20%**	**1.72**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	2.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	388	8	50%	4	20%	0.8
	TOTAL				**9**	**20%**	**1.8**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$7,075.39					
	(b) MTF COST PER RWP	$4,622.67					
	RATIO OF CHAMPUS COST TO MTF COST	1.53	10	100%	10	20%	2
	TOTAL				**10**	**20%**	**2**
	TOTAL FUNCTIONAL SCORE						**7.88**
	RETIRED AND OTHERS	59087					
	AVAIL BEDS	408					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

FACILITY W-Pat as CHosp 0095		RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN 40 MILE RADIUS	22131	5	70%	3.5	40%	1.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	1269					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1525307					
	RATIO	1202	1	15%	0.15	40%	0.06
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	19					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1917					
	(c) # OF OPERATING BEDS AT MTF	160					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	11.98	1	15%	0.15	40%	0.06
	TOTAL				**3.8**	**40%**	**1.52**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	93.9	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	13	6	40%	2.4	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	120%	3.6
	TOTAL				**8.4**	**20%**	**1.68**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.8	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	433	9	50%	4.5	20%	0.9
	TOTAL				**9.5**	**20%**	**1.9**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,929.03					
	(b) MTF COST PER RWP	$5,602.07					
	RATIO OF CHAMPUS COST TO MTF COST	0.88	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**5.9**
	RETIRED AND OTHERS	28734					
	AVAIL BEDS	175					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

MEDICAL CENTER	KEESLER	0073	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION								
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN REGION		187780	3	100%	3	40%	1.2
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PROVIDERS		236					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)		332226					
	RATIO		1408					
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA		6					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS		574					
	(c) # OF OPERATING BEDS AT MTF		235					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF		2.44					
	TOTAL					**3**	**40%**	**1.2**
CRITERION 2 FACILITY								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)		78.3	8	15%	1.2	20%	0.24
F2	INSTALLATION REAL PROPERTY RATING		2.10	6	15%	0.9	20%	0.18
F3	WEIGHTED AGE		35	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE		3	5	30%	1.5	20%	0.3
	TOTAL					**4.8**	**20%**	**0.96**
CRITERION 3 CONTINGENCY								
MC1	DISTANCE TO AIR HUB		1	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY		433	5	50%	2.5	20%	0.5
	TOTAL					**7.5**	**20%**	**1.5**
CRITERION 4 COST/MANPOWER								
C1	COST/MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP		$5,247.56					
	(b) MTF COST PER RWP		$4,657.43					
	RATIO OF CHAMPUS COST TO MTF COST		1.13	7	100%	7	20%	1.4
	TOTAL					**7**	**20%**	**1.4**
	TOTAL FUNCTIONAL SCORE							**5.06**
	CATCHMENT - AD AND FAMILY		38690					
	CATCHMENT - RETIRED AND OTHERS		23112					
	AVAIL BEDS		306					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

MEDICAL CENTER	LACKLAND 0117	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN REGION	334983	6	100%	6	40%	2.4
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	1306					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1136091					
	RATIO	870					
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	14					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	2430					
	(c) # OF OPERATING BEDS AT MTF	585					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	4.15					
	TOTAL				**6**	**40%**	**2.4**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	97.3	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.90	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	32	3	40%	1.2	20%	0.24
F4	JCAHO LIFE SAFETY SCORE	3	5	30%	1.5	20%	0.3
	TOTAL				**5.7**	**20%**	**1.14**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	6	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	1033	10	50%	5	20%	1
	TOTAL				**10**	**20%**	**2**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,632.61					
	(b) MTF COST PER RWP	$4,608.31					
	RATIO OF CHAMPUS COST TO MTF COST	1.01	6	100%	6	20%	1.2
	TOTAL				**6**	**20%**	**1.2**
	TOTAL FUNCTIONAL SCORE						**6.74**
	CATCHMENT - AD AND FAMILY	43110					
	CATCHMENT - RETIRED AND OTHERS	47424					
	AVAIL BEDS	1006					
	MILEAGE TO BROOKE AMC (0109)	15.6					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

MEDICAL CENTER	TRAVIS	0014	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION								
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN REGION		92040	1	100%	1	40%	0.4
A1	CIVILIAN PRIMARY CARE RATIO							
	(a) CIVILIAN PRIMARY CARE PROVIDERS		980					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)		1155838					
	RATIO		1179					
A2	CIVILIAN INPATIENT CAPABILITY							
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA		22					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS		1721					
	(c) # OF OPERATING BEDS AT MTF		195					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF		8.83					
	TOTAL					**1**	**40%**	**0.4**
CRITERION 2 FACILITY								
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)		99.8	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING		3.00	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE		6	8	40%	3.2	20%	0.64
F4	JCAHO LIFE SAFETY SCORE		2	8	30%	2.4	20%	0.48
	TOTAL					**8.6**	**20%**	**1.72**
CRITERION 3 CONTINGENCY								
MC1	DISTANCE TO AIR HUB		2.5	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY		388	4	50%	2	20%	0.4
	TOTAL					**7**	**20%**	**1.4**
CRITERION 4 COST/MANPOWER								
C1	COST/MANPOWER							
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP		$7,075.39					
	(b) MTF COST PER RWP		$4,622.67					
	RATIO OF CHAMPUS COST TO MTF COST		1.53	10	100%	10	20%	2
	TOTAL					**10**	**20%**	**2**
	TOTAL FUNCTIONAL SCORE							**5.52**
	CATCHMENT - AD AND FAMILY		36257					
	CATCHMENT - RETIRED AND OTHERS		59087					
	AVAIL BEDS		408					

JOINT GROUP FACILITY RECAP SHEET As of 9 Nov 1994 (1400 Hrs)

MEDICAL CENTER	W-PATTERSON 0095	RAW DATA	RAW SCORE	MOM WEIGHT	MOM SCORE	CRITERIA WEIGHT	CRITERIA SCORE
CRITERION 1 MISSION							
P1	ACTIVE DUTY AND FAM MEMBER POP W/IN REGION	230953	4	100%	4	40%	1.6
A1	CIVILIAN PRIMARY CARE RATIO						
	(a) CIVILIAN PRIMARY CARE PROVIDERS	1269					
	(b) TOTAL POPULATION (MILITARY AND CIVILIAN)	1525307					
	RATIO	1202					
A2	CIVILIAN INPATIENT CAPABILITY						
	(a) # OF ACUTE CARE HOSPITALS W/IN 40 MILE CATCHMENT AREA	19					
	(b) TOTAL BEDS AVAILABLE AT JCAHO ACCREDITED CIVILIAN/VA HOSPITALS	1917					
	(c) # OF OPERATING BEDS AT MTF	160					
	RATIO OF CIVILIAN ACUTE CARE BEDS AVAILABLE TO OP BEDS IN THE MTF	11.98					
	TOTAL				**4**	**40%**	**1.6**
CRITERION 2 FACILITY							
F1	FACILITY CONDITION ASSESSMENT SCORE (SEE DD FORM 2407)	93.9	10	15%	1.5	20%	0.3
F2	INSTALLATION REAL PROPERTY RATING	2.80	10	15%	1.5	20%	0.3
F3	WEIGHTED AGE	13	6	40%	2.4	20%	0.48
F4	JCAHO LIFE SAFETY SCORE	1	10	30%	3	20%	0.6
	TOTAL				**8.4**	**20%**	**1.68**
CRITERION 3 CONTINGENCY							
MC1	DISTANCE TO AIR HUB	0.8	10	50%	5	20%	1
MC2	BED EXPANSION CAPABILITY	433	5	50%	2.5	20%	0.5
	TOTAL				**7.5**	**20%**	**1.5**
CRITERION 4 COST/MANPOWER							
C1	COST/MANPOWER						
	(a) CHAMPUS ADJUSTED STANDARDIZED AMOUNT (ASA), PER RWP	$4,929.03					
	(b) MTF COST PER RWP	$5,602.07					
	RATIO OF CHAMPUS COST TO MTF COST	0.88	4	100%	4	20%	0.8
	TOTAL				**4**	**20%**	**0.8**
	TOTAL FUNCTIONAL SCORE						**5.58**
	CATCHMENT - AD AND FAMILY	22131					
	CATCHMENT - RETIRED AND OTHERS	28734					
	AVAIL BEDS	175					

Document Separator

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CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
MEDICAL FACILITY:

Naval Hospital

1 Pinckney Blvd.
Beaufort, SC 29902 6148

ACTIVITY UIC: 61337

Category.....Personnel Support
Sub-category....Medical
Types.....Clinics, Hospitals, and Medical Centers

*******If any responses are classified, attach separate classified annex*******

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MISSION REQUIREMENTS

1. Population. Please identify your beneficiary population using the same definitions as used by RAPS. Use the following table to record your results.

TYPE	ACTUAL FY 1993			PROJECTED FY 2001		
	CATCHMENT[1]	ASSIGNED[2]	REGION[3]	CATCHMENT[1]	ASSIGNED[2]	REGION[3]
AD	13,910	6,755	N/A	9,486	6,825	N/A
FAMILY OF AD	10,182	10,358	N/A	14,600	10,253	N/A
SUBTOTAL	24,092	17,113	N/A	24,087	17,078	N/A
RETIRED AND FAMILY MEMBERS UNDER 65	5,272	5,250	N/A	9,503	5,121	N/A
RETIRED AND FAMILY MEMBERS OVER 65[4]	1,757	1,822	N/A	3,908	2,310	N/A
OTHER	697	716	N/A	1,718	872	N/A
TOTAL	31,818	24,901	N/A	39,216	25,381	N/A

NOTE: THE FOLLOWING APPLIES TO ALL FACILITIES.

[1] THE BASIS FOR YOUR REPORTED POPULATION IS THE CATCHMENT AREA DEFINED AS SETS OF ZIP CODES EMANATING FROM THE CENTER OF THE ZIP CODE IN WHICH THE MTF IS LOCATED WITH A RADIUS OF 40 MILES.

[2] THIS IS THE POPULATION SPECIFICALLY ASSIGNED TO YOUR FACILITY IN CONTRAST TO THE POPULATION IN THE CATCHMENT AREA. THIS IS IMPORTANT IN FACILITIES WITH OVERLAPPING CATCHMENT AREAS.

[3] IF YOU ARE A DESIGNATED NAVAL MEDICAL CENTER, PLEASE REPORT YOUR LEAD AGENT POPULATION (SEE TRICARE POLICY GUIDELINES).

[4] THIS SECTION MUST BE COMPLETED.

R

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	49
Set Up Beds[1]:	31
Expanded Bed Capacity[2]:	54 R 9/1/94

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

4 R (9/1/94) VRBUMED 824 9/26/94

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	49
Set Up Beds[1]:	31
Expanded Bed Capacity[2]:	126

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

The following questions are designed to determine the level of services provided at your facility during FY 1993, your current maximum capability (i.e. your maximum capacity given the same set of parameters that you are currently functioning within), and the requirements of the community you support.

3. Workload. Complete the following table for FY 1993:

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	23,979	54,177	29,000	107,156
ADMISSIONS	780	1,115	461	2,356
LABORATORY TESTS (WEIGHTED)[1]	410,283	932,462	503,529	1,846,274
RADIOLOGY PROCEDURES (WEIGHTED)[1]	11,812	26,845	14,496	53,153
PHARMACY UNITS (WEIGHTED)[1]	59,151	134,434	72,594	266,179
OTHER (SPECIFY)				

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

3a. Workload. Complete the following table for your maximum capacity. Assume the same facility, staff, equipment, and supplies you currently have. Do not change your scope of practice. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	23,979	54,177	29,000	107,156
ADMISSIONS	1,355	1,933	809	4,097
LABORATORY TESTS (WEIGHTED)[1]	434,956	989,659	533,810	1,958,425
RADIOLOGY PROCEDURES (WEIGHTED)[1]	12,542	28,537	15,392	56,474
PHARMACY UNITS (WEIGHTED)[1]	68,824	156,858	84,466	310,148
OTHER (SPECIFY)				

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

ASSUMPTIONS: Currently Ancillary Services (Pharmacy, Radiology, Laboratory) are at maximum capacity, primarily due to staffing constraints in these departments. Because of this, OPV workload will remain relatively stable. It was determined that an increase in inpatient workload would have a negligible effect on ancillary services, so admissions were increased based on current nurse staffing. That staffing for each ward (ICU, M-4, M-5, Nursery) was used along with the Patient Classification System charts (utilizing average patient acuity) to determine the maximum number of patients per ward per day. With an ADPL of 44 and an ALOS of 3.92 (FY 93), this would be an increase of 1,741 admissions for a total of 4,097.

3b. Workload. Complete the following table for the current workload demand of your supported population. Assume you are to provide all the care in your facility for your catchment area. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	37,704	88,149	60,799	183,652
ADMISSIONS	926	1,932	892	3,750
LABORATORY TESTS (WEIGHTED)[1]	597,008	1,508,270	1,036,936	3,142,214
RADIOLOGY PROCEDURES (WEIGHTED)[1]	17,183	43,411	29,845	90,439
PHARMACY UNITS (WEIGHTED)[1]	84,419	214,839	147,702	446,960
OTHER (SPECIFY)				

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

NOTE: Workload determined as follows: Data from the FY 94 workload projection in Datacall 27 was compiled with FY 94 RAPS projected Non-Direct Care in the catchment area for Admissions and OPV's. Ancillary Services were increased proportionally as a total by services and Beneficiary Category. The RAPS Non-Direct data was modified to reflect an increase of 6,939 active duty members reflected in the most recent FY 93 RAPS population data.

4. Staffing. Please complete the following table related to your provider staffing (only include those providers whose primary responsibility is patient care). Please include military, civilian, and contract providers. Do not include partnerships.

PROVIDER TYPE	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
PRIMARY CARE[1]	~~23~~ 20	~~27~~ 21	~~27~~ 31	~~42~~ 31	~~43~~ 31	~~44~~ 31	~~44~~ 31	~~44~~ 31
SPECIALTY CARE[2]	~~12~~ 9	~~14~~ 9	~~14~~ 26	~~22~~ 26	~~22~~ 26	~~22~~ 26	~~22~~ 26	~~22~~ 26
PHYSICIAN EXTENDERS[3]	~~12~~ 2	~~14~~ 2	~~14~~ 5	~~22~~ 5	~~22~~ 5	~~22~~ 5	~~22~~ 5	~~22~~ 5
INDEPENDENT DUTY CORPSMEN	~~13~~ 10	~~15~~ 10	~~15~~ 10	~~23~~ 10	~~23~~ 10	~~23~~ 10	~~23~~ 10	~~23~~ 10
TOTAL	~~60~~ 41	~~70~~ 42	~~70~~ 72	~~109~~ 72	~~110~~ 72	~~111~~ 72	~~111~~ 72	~~111~~ 72

BUMED MED 825 GSA 6/2/94

[1] This includes General Medical Officers, Flight Surgeons, Diving Medical Officers, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.
[2] This is all other physician providers not included in the primary care category.
[3] This includes Physician Assistants and Nurse Practitioners.

ASSUMPTIONS: Provider staffing increased proportionally based on increase in OPV'S as indicated by Projected Workload component of Data Call 27.

LOCATION

5. Community Providers. Complete the following table for the civilian providers within your 40 mile catchment area. The catchment area is defined as sets of zip codes emanating from the center of the ZIP code in which the MTF is located with a radius of 40 miles. If you are required to use another boundary please define the geographical region and the reason for its use.

PROVIDER TYPE	CURRENT
PRIMARY CARE[1]	151
SPECIALTY CARE[2]	238
PHYSICIAN EXTENDER[3]	59
TOTAL	448

[1] This includes General Practitioners, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.

[2] This is all other physician providers not included in the primary care category.

[3] This includes Physician Assistants and Nurse Practitioners.

6. Regional Population. Please provide the U. S. Census population for your 40 mile catchment area. If you are required to use another boundary please define the geographical region and the reason for its use. Also list the source of this information. This value should include your beneficiary population.

Region Population: 166,789

SOURCE: South Carolina Budget and Control Board, Office of Research and Statistical Services, 1000 Assembly Street, Suite 425, Columbia, SC 29201

7. Regional Community Hospitals. Please list in the table below all the community hospitals (as defined in the American Hospital Association publication Hospital Statistics) in your region (include military, civilian, and any federal facilities including Veterans Affairs):

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
CANDLER	PRIVATE	50 MILES	75 MINS	N/A
CHARTER	CORPORATION	50 MILES	75 MINS	N/A
MEMORIAL MED.	PRIVATE	50 MILES	75 MINS	N/A
GEORGIA REG.	STATE	50 MILES	75 MINS	N/A
ST JOSEPH'S	CHURCH	50 MILES	75 MINS	N/A
COLLETON REG	CORPORATION	34 MILES	50 MINS	N/A
HILTON HEAD	PRIVATE	45 MILES	60 MINS	N/A
BEAUFORT MEM.	COUNTY	2 MILES	5 MINS	N/A
HAMPTON GEN.	COUNTY	40 MILES	60 MINS	N/A
LOW COUNTRY	COUNTY	20 MILES	36 MINS	N/A

[1] Distance in driving miles from your facility
[2] List any partnerships, MOUs, contracts, etc with this facility

7a. Regional Community Hospitals. For each facility listed in the preceding table complete the following table:

FACILITY	BEDS[1]	JCAHO APPROVED	OCCUPANCY[1]	UNIQUE FEATURES[2]
CANDLER	335	YES	72.5%	GENERAL ACUTE
CHARTER	112	YES	N/A	MENTAL HEALTH
MEMORIAL MEDICAL	519	YES	76.4%	TERTIARY
GEORGIA REGIONAL	232	YES	95.0%	PSYCHIATRIC
ST JOSEPH'S	268	YES	59.8%	GENERAL ACUTE
COLLETON REGIONAL	131	YES	42.0%	GENERAL ACUTE
HILTON HEAD	68	YES	67.2%	COMMUNITY
BEAUFORT MEMORIAL	99	YES	62.6%	ACUTE CARE
HAMPTON GENERAL	36	NO	22.2%	GENERAL ACUTE
LOW COUNTRY GENERAL	31	NO	41.9%	ACUTE CARE

[1] Use definitions as noted in the American Hospital Association publication Hospital Statistics.

[2] Such as regional trauma center, burn center, Graduate Medical Education Center, etc.

c. Training Facilities:

(1) By facility Category Code Number (CCN), provide the usage requirements for each course of instruction required for all formal schools on your installation. A formal school is a programmed course of instruction for military and/or civilian personnel that has been formally approved by an authorized authority (ie: Service Schools Command, Weapons Training Battalion, Human Resources Office). Do not include requirements for maintaining unit readiness, GMT, sexual harassment, etc. Include all applicable 171-xx, 179-xx CCN's.

Type of Training Facility/CCN	School	Type of Training	FY 1993 Requirements			FY 2001 Requirements		
			A	B	C	A	B	C

A = STUDENTS PER YEAR
B = NUMBER OF HOURS EACH STUDENT SPENDS IN THIS TRAINING FACILITY FOR THE TYPE OF TRAINING RECEIVED
C = A x B

RESPONSE: Not Applicable.

(2) By Category Code Number (CCN), complete the following table for all training facilities aboard the installation. Include all 171-*xx* and 179-*xx* CCN's.

For example: in the category 171-10, a type of training facility is academic instruction classroom. If you have 10 classrooms with a capacity of 25 students per room, the design capacity would be 250. If these classrooms are available 8 hours a day for 300 days a year, the capacity in student hours per year would be 600,000.

Type Training Facility/CCN	Total Number	Design Capacity (PN)[1]	Capacity (Student HRS/YR)

(3) Describe how the Student HRS/YR value in the preceding table was derived.

RESPONSE: Not applicable.

---

[1] Design Capacity (PN) is the total number of seats available for students in spaces used for academic instruction; applied instruction; and seats or positions for operational trainer spaces and training facilities other than buildings, i.e., ranges. Design Capacity (PN) must reflect current use of the facilities.

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DATA BEING CERTIFIED: Data Call No. 26

ACTIVITY COMMANDER

R. L. FINKE, CAPT/MSC/USN
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

26 MAY 1994
Date

NAVAL HOSPITAL, BEAUFORT, SC 29902-6148
Activity (UIC: 61337)

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print)

x D. F. Hagen

Signature

CHIEF BUMED/SURGEON GENERAL

Title

June 2, 1994

Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J.B. GREENE JR.

NAME (Please type or print)

J B Greene Jr

Signature

ACTING

Title

8 JUNE 1994

Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DATA BEING CERTIFIED: Data Call No. 26 (pg 4)

ACTIVITY COMMANDER

M. V. BROWN, CAPT/MC/USN	MVB
NAME (Please type or print)	Signature
COMMANDING OFFICER	7 September 1994
Title	Date

NAVAL HOSPITAL, BEAUFORT, SC 29902-6148
Activity (UIC: 61337)

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title X 9-28-94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) J B Greene Jr. Signature

ACTING

Title 13 OCT 1994 Date

Document Separator

369

MILITARY VALUE ANALYSIS:
DATA CALL WORKSHEET FOR:
MEDICAL FACILITY:

Naval Hospital
1 Pinckney Blvd.
Beaufort, SC 29902-6148

ACTIVITY UIC: 61337

Category.....Personnel Support
Sub-category.....Medical
Types.....Clinics, Hospitals, Medical Centers

26 May 1994

**********If any responses are classified, attach separate classified annex**********

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MISSION REQUIREMENTS

1. Mission Statement. State the mission of your medical facility in sufficient detail so that it can be distinguished from other medical facilities.

The mission of Naval Hospital, Beaufort is to ensure the health of sailors, Marines and recruits entrusted to our care and to allow them to perform their mission in defense of our nation. We provide a comprehensive quality health care program with timely treatment or referral for sickness or injuries and a proactive health program. We continually strive to provide the same level of quality care to families of active duty members and other beneficiaries based on the resources available. Unique missions as follows:

- Provides mass optometric exams and eyeglass fabrication for same day issue
- Provides comprehensive podiatric surveillance for recruits throughout their training process
- Provides mass immunizations and psychiatric screenings to recruits
- Provides health care coverage for the only Marine Corps female recruit training facility
- Provides mass baseline audiometric screening of recruits
- Recruit DNA identification collection point
- Establish military health records for Marine recruits
- Provide practical experience prior to formal Marine medical support training

2. Customer Base. In the table below, identify your active duty customers. Include both Naval and non-Naval active duty components. Begin with the largest activity and work down to the smallest. Include the customer Unit Identification Code (UIC).

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
MCRD	00263	MCRD PI, SC	6918*
MALS-31	01086	MCAS BEAUFORT	713
MWSS 273	00273	MCAS BEAUFORT	654
H&HS	02031	MCAS BEAUFORT	582
NAVAL HOSPITAL	61337	BEAUFORT, SC	428
MACS-5	00972	MCAS BEAUFORT	268
VMFA(AW) 224	01224	MCAS BEAUFORT	167
VMFA(AW) 332	01332	MCAS BEAUFORT	167
VMFA(AW) 533	01533	MCAS BEAUFORT	167
VMFA 451	01451	MCAS BEAUFORT	138
VMFA 115	01115	MCAS BEAUFORT	138
VMFA 122	01122	MCAS BEAUFORT	138
VMFA 251	01251	MCAS BEAUFORT	138
VMFA 312	01312	MCAS BEAUFORT	138
NAVAL DENTAL CENTER	68411	MCRD PI, SC	128
MAG 31 HQ	00031	MCAS BEAUFORT	92
CSSD 23	27140	MCAS BEAUFORT	90
MAG 31	09131	MCAS BEAUFORT	57
MHC 52 HERON	21864	SAVANNAH, GA	45
MCAS	60619	MCAS BEAUFORT	22
NAVY/USMC RESERVE CEN	62154	SAVANNAH, GA	10
PASD BEAUFORT	43353	BEAUFORT, SC	9
SUPSHIP RES DET	47204	SAVANNAH, GA	9

FLEET INDOC TEAM	49095	SAVANNAH, GA	8
CSSD	41629	MCAS BEAUFORT	8
NROTC	66809	SAVANNAH, GA	7
12TH DENTAL COMPANY	47336	MCRD PI, SC	7
NAVFAC ENGINEERING	62467	MCRD PI, SC	6
SOUTH DIV CONTRACTING	44227	BEAUFORT, SC	6
DEP MEDS	46877	BEAUFORT, SC	5
ECP SAVANNAH STATE	46555	SAVANNAH, GA	5
COOP MINE UNIT 2209	55225	SAVANNAH, GA	4
MC BR/ARD	45118	BEAUFORT, SC	2
NAESU	33203	MCAS BEAUFORT	2
DEPMED PI	46885	MCRD PI, SC	1
NEX DET	30347	BEAUFORT, SC	1
INSERVTRNG	31025	BEAUFORT, SC	1
EEAP USC	48437	BEAUFORT	1
NAVY/USMC RES CENTER 4TH FSSG	46049	SAVANNAH, GA	1
NAVY/USMC CENTER MECP ARMSTRONG STATE	47946	SAVANNAH, GA	1

*NOTE: Total Unit Size (number of personnel) incorporates approximately five thousand Marine Corps Recruits under training at any given time throughout the year.

4. Projected Workload. Complete the following tables for your projected workload. Please show and develop any assumptions and calculations used to complete the table. Be sure to note any impact prior closure and realignment decisions have had on your facility. Please be sure to include any impact your participation in the managed care initiative (TRICARE), previous BRAC actions, and force structure reductions will have on your workload.

	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
OUTPAT. VISITS	125,610	125,610	183,184	183,422	186,204	186,204	186,204
ADMISS.	3,165	3,166	4,166	4,179	4,193	4,193	4,193

ASSUMPTIONS AND CALCULATIONS

Projections based on FY-92 RAPS projected workload. Population was modified to reflect an increase of 6,939 A/D members reflected in the most recent FY-93 RAPS population data. Additional population modifications were performed to reflect an approximate increase of 688 retired members and 482 retired family members in 1997 due to the addition of an 8000 unit retirement complex in our catchment area. RAPS would only project to 1999, whereafter workload was straight-lined.

In 1997 this service area is projected to implement the TRICARE Managed Care Initiative with the expectations of capturing 80% of the non-direct care in our catchment area. The RAPS non-direct care projection module was utilized to obtain this data, which was applied beginning in FY-97 proportionally to the hospital and clinics based on actual FY-93 workload data for all categories other than A/D.

Additional calculations as follows:

- Admissions: RAPS FY-95 projections for all categories other than A/D reflected only 639 admissions, while the actual in these categories for FY-93 was 1,596. To resolve this, the percentage increase in the RAPS FY-95 admissions for A/D of 1.75 was applied to actual FY-93 category of all other admissions and reduced by 36%, which is the approximate percentage of recruits in the catchment area at any given time who would not have family members. This number was then projected out with the programs associated increases or decreases.

4. Projected Workload (Cont.)

- Outpatient Visits: The same assumptions and calculations were made with OPVs, with the exception of the 36% decrease. This was not used in order to offset recruits high outpatient acuity level. Visits were proportionally distributed to the hospital and clinics based on actual FY-93 workload data.

5. Medical Support. Indicate in the table below all the medical support you provide that is not direct patient care, and identify the time spent providing such support (i.e. food service inspections, medical standby for physical fitness tests, flight operations, field training,rifle range, MWR support for sporting events, etc.).

NON-PATIENT CARE SUPPORT	TIME SPENT/ QTR	STAFF NEEDED/ EVENT
INDUSTRIAL HYGIENE SURVEY	82 HRS	3
WORKPLACE MONITOR - IND HYGIENE	115 HRS	3
TRAINING - IND HYGIENE	19 HRS	2
LAB ANALYSIS/IDENTIFICATION	19 HRS	2
EQUIPMENT MAINTENANCE/CALIBRATION	14 HRS	2
ADMINISTRATION - IND HYGIENE	202 HRS	3
PHYSICAL READINESS TRAINING	29 HRS	2
HEALTH PROMOTIONS	480 HRS	2
BLOOD DRIVE	144 HRS	9
AMBULANCE SERVICE	480 HRS	9
INPATIENT/OUTPATIENT RECORDS	480 HRS	14
TRANSCRIPTION	480 HRS	2
PATIENT ADMINISTRATION	480 HRS	5
RTR PT AND FIELD TRAINING COVERAGES (HOTSOP)	144 HRS	10
MANAGED CARE	100 HRS	10
EDUCATION AND TRAINING	100 HRS	5
QUALITY ASSURANCE	100 HRS	6

NOTE: The indicated time spent per quarter is for one staff member only. For an accurate reflection of total manhours required, multiply time spent per quarter by the staff needed per event.

6. Graduate Medical Education. In the table provided, identify all the training programs (to include transitional internships and fellowships) at your facility and the numbers graduated per year. Also identify major non-physician training programs (such as OR nurse, nurse anesthetist, etc.). Be sure to take into account any planned program changes, and prior base closure and realignment decisions.

PROGRAM	NUMBER TRAINED BY FISCAL YEAR							
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001

RESPONSE: Not Applicable

6a. Graduate Medical Education. Complete the following table for each Graduate Medical Education program that requires accreditation by the Accreditation Council for Graduate Medical Education (ACGME):

PROGRAM	STATUS[1]	CERT.[2]	COMMENTS[3]

[1] Use F for fully accredited, P for probation, and N for not accredited.
[2] List the percentage of program graduates that achieve board certification.
[3] Complete this section for all programs that you entered a P or N in the Status column. Indicate why the program is not fully accredited and when it is likely to become fully accredited.

RESPONSE: Not Applicable

FACILITIES

7. Facilities Description. Complete the following table for all buildings for which you maintain an inventory record. Use only one row for each building. Provide the 5 digit category code number (CCN) where possible. Do not include any buildings that would receive their own data calls (such as a Branch Medical Clinic):

FACILITY TYPE (CCN)	BUILDING NAME/USE[1]	SQUARE FEET	AGE (IN YEARS)	CONDITION CODE[2]
61010	BLDG 7/PSD,BEQ	29,009	45	INADEQUATE
72113	BLDG 8/MANPOWER MGT	5,703	46	INADEQUATE
7211	BLDG 9/TEMPORARY STORAGE	46,264	45	INADEQUATE
74067	BLDG 12/EM CLUB	8,760	45	ADEQUATE
82109	BLDG 13/HEATING PLANT	6,215	46	ADEQUATE
21977	BLDG 14/STORAGE, PUBLIC WORKS	6,000	46	ADEQUATE
14310	BLDG 15/FIRE STATION, GARAGE	6,399	46	ADEQUATE
83310	BLDG 17/INCINERATOR	345	46	ADEQUATE
74037	BLDG 18/HOBBY SHOP	1,963	29	INADEQUATE
73020	BLDG 19/GATEHOUSE MAIN GATE	740	46	ADEQUATE
74030	BLDG 20/FILLING STATION WITH CANOPY	578	46	INADEQUATE
21910	BLDG 21/PEST CONTROL SHOP	1,404	46	ADEQUATE
71143	BLDG B/FUND HOUSING, PRE 1950,0-6	2,416	46	ADEQUATE
71141	BLDG D/FUND HOUSING, PRE 1950,0-1/0-3	1,780	45	ADEQUATE
74074	BLDG 25/NAVY RELIEF	1,854	48	INADEQUATE
74055	BLDG 24/BOY SCOUT REC FACILITY	1,472	48	ADEQUATE
21920	BLDG 38/GROUND EQUIP MAINT SHED	2,880	43	ADEQUATE
44130	BLDG 39/HAZARDOUS, FLAMMABLE STORAGE	527	43	ADEQUATE
51010	BLDG 1/HOSPITAL	276,428	45	ADEQUATE
21910	BLDG 16/PUBLIC WORK SHOP	5,528	46	ADEQUATE

71131	BLDG 81/FUND HOUSING, 1950/69,WO,0-1/0-3	1,697	38	ADEQUATE
71131	BLDG 82/ " "	1,697	38	ADEQUATE
71131	BLDG 83/ " "	1,697	38	ADEQUATE
71131	BLDG 84/ " "	1,697	38	ADEQUATE
71131	BLDG 85/ " "	1,697	38	ADEQUATE
71130	BLDG 101/FUND HOUSING, 1950/69,ENLISTED	3,253	38	ADEQUATE
71130	BLDG 102/ " "	3,253	38	ADEQUATE
71130	BLDG 103/ " "	3,253	38	ADEQUATE
71130	BLDG 104/ " "	3,253	38	ADEQUATE
71130	BLDG 105/ " "	3,253	38	ADEQUATE
71130	BLDG 106/ " "	3,253	38	ADEQUATE
71130	BLDG 107/ " "	3,253	38	ADEQUATE
71130	BLDG 108/ " "	3,253	38	ADEQUATE
71130	BLDG 109/ " "	3,253	38	ADEQUATE
71130	BLDG 110/ " "	3,253	38	ADEQUATE
71130	BLDG 111/ " "	3,253	38	ADEQUATE
71130	BLDG 112/ " "	3,253	38	ADEQUATE
71130	BLDG 113/ " "	3,253	38	ADEQUATE
71130	BLDG 114/ " "	3,253	38	ADEQUATE
71131	BLDG 115/FUND HOUSING,1950/69,WO, 0-1/0-3	1,627	38	ADEQUATE
71131	BLDG 116/ " "	3,253	38	ADEQUATE
71130	BLDG 117/FUND HOUSING, 1950/69,ENLISTED	3,253	38	ADEQUATE
71130	BLDG 118/ " "	3,253	38	ADEQUATE
71130	BLDG 119/ " "	1,627	38	ADEQUATE
71130	BLDG 120/ " "	3,253	38	ADEQUATE
71130	BLDG 121/ " "	1,627	38	ADEQUATE
71130	BLDG 122/ " "	3,253	38	ADEQUATE
71130	BLDG 123/ " "	3,253	38	ADEQUATE
71130	BLDG 124/ " "	3,253	38	ADEQUATE
71130	BLDG 125/ " "	1,627	38	ADEQUATE
21977	BLDG 40/MORALE, WELFARE & REC BLDG	800	38	SUB-STANDARD

74030	BLDG 49/EXCHANGE AUTO REPAIR STATION	724	37	INADEQUATE
44130	BLDG 53/BOTTLED OXYGEN/NO2 STORAGE	390	44	ADEQUATE
71153	BLDG 140/FUND HOUSING,1950/69,0-6	2,556	38	ADEQUATE
74089	BLDG 134/BATHOUSE	530	28	ADEQUATE

[1] Use refers to patient care, administration, laboratory, warehouse, power plant, etc.

[2] This should be based on NAVFACINST 11011.44E Shore Facilities Planning Manual and the condition recorded should be recorded as Adequate, Substandard, or Inadequate. Chapter 5 of NAVFACINST 11011.44E provides guidance on this scoring system.

7a. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

1. Facility Type/Code:
2. What makes it inadequate?
3. What use is being made of the facility?
4. What is the cost to upgrade the facility to substandard?
5. What other use could be made of the facility and at what cost?
6. Current improvement plans and programmed funding:
7. Has this facility condition resulted in "C3" or "C4" designation on your BASEREP?

- BLDG 7/61010: Design criteria, building and seismic, non-existent air conditioning/environmental control; BEQ and PSD; $2,263,000; BEQ and PSD at no cost; $157,000 in improvements programmed for FY-94; no.

- BLDG 8/72113: Design criteria, building interior configuration; Manpower Management (Admin); $691,000; none; none; no.

- BLDG 9/72111: Building interior, structure and seismic design, non-existent environmental controls; temporary storage; unknown; demolition for $242,000; none; no.

- BLDG 20/74030: Physical condition, total structure; filling station with canopy; $28,900; none; none; no.

- BLDG 49/74030: Physical condition; storage; unknown; demolition $3,500; none; no.

- BLDG 18/74037: Physical condition - waterproofing, total obsolescence; Hobby Shop; $214,000; none; no.

- BLDG 25/74074: Location - entire building; Navy Relief $180,000; none; none; no.

7b. Capital Improvement Expenditures. List the project number, description, funding year, and value of the **capital improvements at your facility completed (beneficial occupancy) during 1988 to 1994**. Indicate if the capital improvement is a result of BRAC realignments or closures.

PROJECT	DESCRIPTION	FUND YEAR	VALUE $000
88-C-0318	REPAIR ELEVATORS 1 & 2	1987	253
86-R-0455	IMPROVEMENTS TO SIDEWALKS/PARKING SPACES	1987	228
86-C-0618	CORRECT FIRE DEFICIENCIES	1987	254
86-C-0427	BACHELOR ENLISTED QUARTERS	1989	2,323
87-C-0332	REPAIR ELEVATORS 3, 4, 5 & 6	1988	366
87-C-0395	FAMILY HOUSING AREA IMPROVEMENTS	1987	93
87-C-0540	REPAIR ROOFS IN FAMILY HOUSING	1989	739
87-C-0778	FAMILY HOUSING IMPROVEMENTS	1987	1,324
88-C-0098	WALKING & WORKING SURFACE	1991	86
88-C-0303	IMPROVEMENT TO EXTERIOR SIDING FAMILY HOUSING	1990	250
88-C-0450	FIRE SPRINKLER SYSTEM IN BLDG 2	1991	211
88-C-4422	REPAIR ROOFS BLDGS 7 & 20	1988	76
89-C-6914	REPAIR NURSES CALL SYSTEM	1991	77
89-C-0478	REPLACE PERIMETER FENCE	1991	126
91-C-0568	PARKING LOT ADDITIONS	1991	83
91-C-0703	REPAIR FIRE ALARM SYSTEM BLDGS 1 & 25	1993	157
91-C-4422	REPAIR NAVAL HOSPITAL SWITCHGEAR	1991	40
93-C-5122	REPAIR CHILLED WATER GENERATOR	1993	38
93-C-9322	REPLACE CHILLERS	1993	239

7c. Planned Capital Improvements. List the project number, funding year, and value of the **non-BRAC related capital improvements planned** for years 1995 through 1997.

PROJECT	DESCRIPTION	FUND YEAR	VALUE $000
CE1-89	ALTERATIONS TO LAB	1995	443
C2-86	EMERGENCY ROOM RENOVATION	1995	221
RAI6-92	REPLACE AHU 13 & 24	1994	160
RH8-93	REPLACE LIQUID CHILLERS	1995	427
R15-92	REPAIR A/C & LIFE SAFETY, B.12	1995	160
R14-92	LIFE SAFETY CODE REPAIRS	1994	245
RA7-93	REPLACE COOLING TOWERS	1995	110
RC4-92	IMPROVE ELECTRICAL DISTRIBUTION SYSTEM	1994	183
R10-92	REPLACE LIGHTING	1995	96
R12-92	REPLACE LIGHTING IN AUDITORIUM	1995	34
C4-93	REPLACE UNDERGROUND STORAGE TANK	1995	133
R5-93	REPLACE UST-EMERGENCY GENERATOR	1995	211
RC8-92	REPAIR SWIMMING POOL, BATHHOUSE	1997	54
92-C-0760	HOUSING RENOVATION	1994	865
C6-92	UPGRADE SOFTBALL FIELD	1997	62
R7-92	REPAIR TENNIS COURTS	1997	27
R1-92	REPAIR BRICKWORK	1997	225

7d. Planned Capital Improvements. List the project number, description, funding year, and value of the **BRAC related capital improvements planned** for 1995 through 1999.

PROJECT	DESCRIPTION	FUND YEAR	VALUE

RESPONSE: Not Applicable

7e. Please complete the following Facility Condition Assessment Document (FCAD) DD Form 2407: Instructions follow the form.

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0104
1. FACILITY NAME	NAVAL HOSPITAL, BEAUFORT			
2. UIC N61337	3. CATEGORY CODE 51010	4. NO. OF BUILDINGS 55		
5. SIZE 126.92 ACRES	A. GSF 494,571	B. NORMAL BEDS 114		C.DTRS N/A
6. LOCATION R8	A. CITY BEAUFORT		B.STATE SC	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	70	20	10	B17,E17	
(2) ADMINISTRATION	60	25	15	C12,E12,B01	
(3) CENTRAL STERILE SVCS.	90	10	0	A12	
(4) DENTAL	70	15	15	B01,B04,B12	
(5) EMERGENCY SVCS.	45	45	10	B01,B06,B12, B17	
(6) FOOD SERVICES	95	5	0	B01,B07	
(7) LABORATORIES	45	45	10	BO1,B06,B12, D06	
(8) LOGISTICS	60	30	10	B01,B17	
(9) INPATIENT NURSING UNITS	70	30	0	B01,B03,B06, B08	
(10) LABOR-DEL-NURSERY	60	30	10	B01,B08	
(11) OUTPATIENT CLINICS	80	10	10	B01,B12,B17	
(12) PHARMACY	60	40	0	A12,B01,B12, B17	
(13) RADIOLOGY	85	10	5	A12,B01	
(14) SURGICAL SUITE	70	30	0	A12,BO1	
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	70	10	20	C10	
(B) HVAC	70	20	10	B01,B17	

(C) PLUMBING	25	65	10	A02,B02	
(D) ELECTRICAL SVCS.	90	0	10	B05	
(E) ELECTRICAL DISTRIBUTION	75	15	10	B06,C06	
(F) EMERGENCY POWER	50	40	10	C07,E07	

FORM INSTRUCTIONS

1. This form is not intended to be used as detailed engineering evaluation of the condition of the facilities. It is primarily designed to assist in assessing the adequacy and condition of Medical/Dental Facilities. Complete only one form for all of your facilities.

2. The Functions/Systems should be evaluated on a consolidated basis for the entire facility.

3. Not more than 4 deficiencies should be identified in the Deficiency Codes column for each item listed under the Function/System column.

4. Fill in N/A (not applicable) where certain Function/System is not present in the facility. For example, Inpatient Nursing Units and Labor-Delivery-Nursery are not applicable to Clinics.

5. Numbers under % Adequate, % Substandard, % Inadequate must total 100 for each function/System.

6. After completion, the form must be signed by the Commander/Commanding Officer/Officer-in-Charge of the facility.

7. Use DoD Standard Data Element Codes for State when entering codes in item 6.

DEFINITIONS

CATEGORY CODE - Facility Category Code is a numeric code used to identify a particular use of Military Department's real property for Hospital and other Medical Facilities usage (i.e., building, structure or utility). The first three digits of the code are a DoD standard (DoDI 4165.3); the fourth, fifth and sixth (if applicable) digits are added to provide more definitive categorization of the Military Department's facilities.

CONSTRUCTION TYPE - Type is either Permanent, Semi-permanent, or Temporary construction at the time building was built.

% ADEQUATE - Percent Adequate is the capacity of a facility or portion thereof, in percentage form, that is in adequate condition and associated with a designated function (USE). Adequate is defined as being capable of supporting the designated function without a need for capital improvements.

% SUBSTANDARD - Percent Substandard is the capacity of a facility or portion thereof, in percentage form, that is in substandard condition and associated with a designated function (USE). Substandard is defined as having deficiencies which prohibit of severely restrict, or will prohibit or severely restrict within the next five years due to expected deterioration , the use of a facility for its designated function. Substandard is further defined as

having deficiencies which can be economically corrected by capital improvements and/or repairs.

% INADEQUATE - Percent Inadequate is the capacity of a facility of portion thereof, in percentage form, that is in inadequate condition and associated with a designated function (USE). Inadequate is defined as having deficiencies due to physical deterioration, functional inadequacy or hazardous location or situation which prohibit or severely restrict, or will prohibit or severely restrict within the next five years, the use of a facility for its designated function. Inadequate is further defined as having deficiencies which cannot be economically corrected to meet the requirements of the designated function.

DEFICIENCY CODE - Code is a three character code indicating the type of deficiency existing in a facility or portion thereof that is in a substandard or inadequate condition and associated with a designated function (USE). The first character of the code indicates one of the six types of deficiencies. The next two characters specify the facility component(s) or related items which are deficient.

(1) Deficient Status of Condition Types - first character
- A - Physical Condition
- B - Functional or Space Criteria
- C - Design Criteria
- D - Location or Siting Criteria
- E - Nonexistence
- F - Total Obsolescence or Deterioration

(2) Facility Components or Related Items - last two characters
- 01 - Heating, Ventilating and Air Conditioning (HVAC)
- 02 - Plumbing Fixtures
- 03 - Fire Protection/Life Safety Code
- 04 - Medical Gases
- 05 - Lighting Fixtures
- 06 - Power Capacity
- 07 - Emergency Generators
- 08 - Communications
- 09 - Building or Structure (total)
- 10 - Seismic Design
- 11 - Roof/Ceiling
- 12 - Building Interior/Configuration
- 13 - Sound Proofing/Excessive Noise
- 14 - Compliance of Installation with Master Plan
- 15 - OSHA Deficiency
- 16 - JCAH Deficiency
- 17 - Functionality
- 18 - Site Location
- 19 - Mission of the Base
- 20 - None

7f. Please provide the date of your most recent Joint Commission on Accreditation of Healthcare Organizations (JCAHO) survey and indicate the status of your certification. Also record your Life Safety Management score from that survey.

DATE OF SURVEY: 16 March 1992
FULL ACCREDITATION: Yes
LIFE SAFETY MANAGEMENT SCORE: 2 (Record as 1,2,3,4,or 5)

LOCATION:

8. Geographic Location. How does your geographic location affect your mission? Specifically, address the following:

a. What is the importance of your location relative to the clients supported?

- The facility is geographically located in between Marine Corps Air Station, Beaufort and Marine Corps Recruit Depot, Parris Island with all three commands in an approximate 15 mile radius. Our location provides equitable access to both bases and the beneficiaries that live on and in the proximity of their respective duty stations.

b. What are the nearest air, rail, sea and ground transportation nodes?

- Air: Two Beaufort County airports, the Lady's Island Airport and Hilton Head Island Airport, are used by private planes. Daily commuter flights to and from Hilton Head Island Airport make connections in Charlotte, North Carolina. Major airline and air freight services are offered at Savannah Municipal Airport 45 miles away and at Charleston Airport 65 miles away via two-lane roads. Travel times are one hour and an hour and a half respectively. Additionally, Marine Corps Air Station, Beaufort, located seven miles from the Naval Hospital has runway capabilities to support both airline and air freight requirements.

- Rail: Port Royal Railroad Company in Port Royal, South Carolina, approximately two miles from Naval Hospital, Beaufort. Also, AMTRAK has passenger service from Yemassee, South Carolina, approximately 20 miles away.

- Sea: Port Royal Port Authority in Port Royal, South Carolina, a small, deep harbor port.

- Ground: Interstate 95 is the primary roadway and can be accessed via Highways 21 or 170. Some 13 authorized motor carriers serve all parts of Beaufort County. Travel time from Interstate 95 to Naval Hospital, Beaufort is approximately 40 minutes. The distance to Interstate 95 from Naval Hospital, Beaufort is 28 miles.

c. Please provide the distance in miles that your facility is located from any military or civilian airfield that can accommodate a C-9 aircraft.

- Distance (in miles): Seven miles.

d. What is the importance of your location given your mobilization requirements?

- We have ready access to commercial carriers in both Charleston, SC and Savannah, GA. Additionally, Marine Corps Air Station, Beaufort offers local airfield access.

e. On the average, how long does it take your current clients/customers to reach your facility?

- Approximately 15 minutes.

9. Manpower and recruiting issues. Are there unique aspects of your facility's location that help or hinder in the hiring of qualified civilian personnel?

- Naval Hospital, Beaufort is approximately one hour to and hour and a half commuting distance between two large metropolitan areas. This results in potential hires being drawn to higher paying, more upwardly mobile positions in these cities; therefore, reducing the number of qualified personnel.

FEATURES AND CAPABILITIES

10. Capabilities. What would be the impact on the Navy and Marine Corps if the capabilities of your facility were to be lost? Answer this question in terms of the unique capabilities of your staff, equipment and facility.

LOSE BRANCH MEDICAL CLINICS ONLY
* Loss of responsiveness to operational areas

LOSE HOSPITAL AND HOSPITAL CLINICS ONLY
* No specialty outpatient care
* No inpatient care
* No specialty consults
* Minimal lab services
* No administrative support for clinics
* Recruits placed into civilian health care to detriment of good order and discipline

LOSE HOSPITAL AND BRANCH MEDICAL CLINICS
* No outpatient or inpatient medical, ancillary, or administrative services available

- Active duty personnel would be forced to utilize MTF's at either Naval Hospital, Charleston, at a distance of 65 miles, Winn Army Medical Facility (AMC) on FT Stewart, at 57 miles, or Eisenhower AMC on FT Gordon, at 128 miles for basic medical treatment and outpatient appointments. Other than basic treatment would be referred to local civilian treatment facilities. Eligible beneficiaries would have the option of using the most convenient MTF's or obtaining medical care through CHAMPUS locally.

- The mission of the Naval Hospital, Beaufort is to provide medical support for the operation of military missions and to eligible beneficiaries. There is no other medical facility locally available to assume this role because of capabilities of staff and facilities. Staff personnel are uniquely trained to perform search and rescue missions, field medical treatment, medically screen recruit personnel, air evacuation of casualties, medical boards, and many other military specific medical support requirements. Much of the varied military specific medical support cannot be performed by the civilian community. The main hospital is designed to be rapidly reconfigured and expanded for wartime medical augmentation.

- There are no other civilian facilities available to assume this function.

10a. If your facility were to close without any change in beneficiary population would the remaining local health care infrastructure be able to absorb the additional workload? Please provide supporting information to your answer.

- There is only one local hospital, Beaufort Memorial Hospital, which has 99 licensed beds and a current occupancy rate of 53%. In the fall of 1994 they are expecting to expand bed capacity by 64 (44 subacute and 20 psychiatric).

- Although with expansion, Beaufort Memorial could probably accommodate our inpatient workload, on several occasions they have been unable to take our ICU overflow, or perform after hours ultrasounds. It is felt that the local community would have a great difficulty in servicing the healthcare needs of the 300,000 OPV's that the current military healthcare system accommodates annually, especially in the ancillary service arena.

- Also of great concern should this facility close is the civilian community's ability to handle the operational and unique healthcare needs experience by military members. Examples as follows: Medical holding company, field medical treatment, search and rescue missions, medical boards, large capacity isolation capabilities for communicable diseases, etc.

10b. If your facility were to close and the active duty and their families were to leave the area would the local community health care system be able to care for the residual eligible population? Please provide supporting information to your answer.

- Should the active duty and their families leave the area, the approximate residual population would be as follows:

Retired Military	3,055
Family members of retirees	3,974
Survivors	672
Guard and dependents	588
Others	25
Total	8,324

- The civilian medical system would realize an annual increase in inpatient and outpatient workload as a direct result of the retiree population based on FY-93 actual workload of:

- Outpatient Visits (Navy Hospital Beaufort and CHAMPUS)					57,504
Inpatient Admissions	"	"	"	"	1,281

- With expansion, as previously referred to in 10A, Beaufort Memorial and the local medical community could probably accommodate these beneficiary categories and their health care needs.

10c. If your inpatient care capability were to close, would the local community be able to absorb your current inpatient workload? Please develop all of your conclusions with supporting data and show it in the space below:

- If Beaufort Memorial Hospital expands its inpatient services as projected, it should be able to accommodate our inpatient workload. Please refer to 10A for details.

11. Mobilization. What are your facility's mobilization requirements?

- The mobilization requirements of Naval Hospital, Beaufort are to provide a comprehensive range of emergency, outpatient medical/dental health care services to active duty Navy and Marine Corps personnel and active duty members of the Federal Uniformed Services. Ensure that all assigned military personnel are both aware of and properly trained for the performance of their assigned contingency and warfare duties. Ensure that the Command is maintained in a proper state of material and personnel readiness to fulfill wartime and contingency mission plans. Provide, as directed, health care services in support of the operation of the Navy and Marine Corps shore activities and units of the Operating Forces. Subject to the availability of space and resources, provide the maximum range and amount of comprehensive health care services possible for other authorized persons as prescribed by Title 10, U.S. Code, and other assigned military personnel to ensure that both military and health care standards of conduct and performance are achieved and maintained. Participate as an integral element of the Navy and Tri-Service Regional Health Care System. Cooperate with military and civilian authorities in matters pertaining to public health, local disaster and other emergencies. Maintain requisite quality health care standards so as to ensure successful accreditation and recognition by appropriate government and civilian agencies and commissions, to include the Joint Commission on Accreditation of Health Care Organizations.

- The execution of full mobilization can be accomplished with minimal impact. The significant impacts of implementing this mobilization plan are manpower, facilities and material. If adequate and timely support can be provided in these impact areas, the mobilization plan can meet expanded capacity at M+3 (M+90 days) with minimal interruption in providing quality health and dental care to support area commands in this service area.

a. If any of your staff is assigned to support a Hospital Ship, Fleet Hospital, Marine Corps unit, ship, or other operational unit during mobilization complete the following table:

UNIT NAME	UNIT NUMBER (IF APPLICABLE)	NUMBER OF STAFF ASSIGNED
NAVHOSP ROTA	66101	23
NAVHOSP ROOSEVELT RD	65428	9
FLTHOSP-4	68684	42
FLTHOSP-5	68685	23
FLTHOSP-8	45382	56
FLTHOSP-15	45339	48
MAG-31 MCASBFT	09131	6
MAG-27 MCAS JAX, FL	09167	1
USS GUADALCANAL	07352	1
1ST MARINE AIR WING	57079	3
1ST MARINE BRIGADE	67339	25
3RD FSSG	67436	4

NOTE: DUPLICATE THIS TABLE AS NECESSARY TO RECORD ALL UNITS.

b. What additional workload could you perform if you did not have this requirement and its associated training? Please show all assumptions and calculations used in arriving at your conclusions.

- If our mobilization and training requirements were taken away, the Command would still be required to support the increased recruit population for Marine Corps Recruit Depot, Parris Island (MCRD). Actual wartime numbers for MCRD is classified, but we can expect their population to more than triple. Even with current anticipated reserve support, the Command would not be able to assume any additional workload without additional resources.

- In the event full mobilization were to occur, the Command would only have a cadre staff of 15 laboratory personnel and residual, med-hold and limited duty staff of approximately 164 personnel.

R

c. Please provide the total number of your expanded beds[1] that are currently fully "stubbed" (i.e. the number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours). Use of portable gas or electrical utilities is not considered in this definition.

Number of "stubbed" expanded beds[1]: 54 R 9/7/94 VR BUMED 824 9/26/94

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

30 R 9/7/94) VR BUMED 824 9/26/94

c. Please provide the total number of your expanded beds[1] that are currently fully "stubbed" (i.e. the number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours). Use of portable gas or electrical utilities is not considered in this definition.

Number of "stubbed" expanded beds[1]: 179

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

12. Non-availability Statements. Please complete the following table for Non-availability statements (NAS):

NAS TYPE	FISCAL YEAR		
	1992	1993	1994
INPATIENT	573	465	212
OUTPATIENT	352	266	95

13. Supplemental Care. Please complete the following table for supplemental care:

CATEGORY OF PATIENT	SUPPLEMENTAL CARE[2]					
	FY 1992		FY 1993		FY 1994*	
	NO.[1]	COST[2] $000	NO.	COST $000	NO.	COST $000
AD	2,200	623	2,436	697	1,206	162
AD FAMILY	534	182	527	108	337	44
OTHER	564	157	848	128	452	63
TOTAL	3,298	962	3,811	933	1,995	269

[1] The total number of consults, procedures and admissions covered with supplemental care dollars.

[2] The total cost in thousands of dollars.

*NOTE: FY-94 data through 31 March 1994.

14. Costs. Complete the following table regarding your outpatient costs. Use the same definitions and assumptions that you use for reporting to Medical Expense and Performance Reporting System (MEPRS).

CATEGORY	FY 1992	FY 1993	FY 1994*
TOTAL COSTS	11,502,946	12,971,693	9,160,918
TOTAL OUTPATIENT VISITS	106,790	108,222	109,128
AVERAGE COST PER VISIT	107.72	119.86	83.95

*NOTE: FY-94 data projected.

14a. Costs. Complete the following tables regarding your inpatients costs. Use the same definitions and assumptions that you use for reporting Medical Expense and Performance Reporting System (MEPRS). Table A, B, C, and D are used to arrive at a cost per Relative Weighted Product (RWP). Table E develops costs for inflation and add-ons to produce the final FY 1994 cost per RWP. FY 1994 should be completed through the First Quarter FY 1994. Costs should be total costs for the category unless otherwise indicated.

Table A:

CATEGORY	FY 1992	FY 1993	FY 1994
A. TOTAL MEPRS-A EXPENSE (ALL ACCOUNTS)	7,916,064	10,401,865	2,035,927

Table B:

CATEGORY	FY 1992	FY 1993	FY 1994
B. GRADUATE MEDICAL EDUCATION SUPPORT (EBE)	0	0	0
C. EDUCATION AND TRAINING PROGRAM SUPPORT (EBF)	464,484	565,955	109,869
D. TOTAL EXPENSES IN EBE AND EBF (B+C)	464,484	565,955	109,869
E. TOTAL E EXPENSES (ALL ACCOUNTS)	10,665,514	14,531,064	3,496,783
F. % SELECTED E EXPENSES (D÷E)[1]	0.043550	0.038948	0.031420

[1] Record as a decimal to 6 digits.

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Table C:

CATEGORY	FY 1992	FY 1993	FY 1994
G. TOTAL E EXPENSES INCLUDED IN MEPRS A	2,470,266	3,079,859	569,330
H. E EXPENSES TO REMOVE FROM MEPRS A (F×G)	107,580	119,954	17,888
I. AREA REFERENCE LABORATORIES (FAA)	0	0	0
J. CLINICAL INVESTIGATION PROGRAM (FAH)	0	0	0
K. TOTAL SELECTED F (I+J)	0	0	0
L. CONTINUING HEALTH EDUCATION (FAL)	130,345	148,191	35,011
M. DECEDENT AFFAIRS (FDD)	0	0	0
N. INITIAL OUTFITTING (FDE)	0	0	0
O. URGENT MINOR CONSTRUCTION (FDF)	0	0	0
P. TOTAL (L+M+N+O)	130,345	148,191	35,011
Q. E EXPENSES INCLUDED IN ROW P	5,045	1,211	0
R. E EXPENSES TO REMOVE FROM ROW P (F×Q)	220	47	0
S. OTHER F'S LESS E (P-R)	130,125	148,144	35,011

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Table D:

CATEGORY	FY 1992	FY 1993	FY 1994
T. INPATIENT WORK UNIT (IWU)	2,326	2,079	573
U. TOTAL WORK UNITS (MWU)[2]	9,337	9,331	2,379
V. PERCENT INPATIENT (IWU÷AWU)	0.25	0.22	0.24
W. FINAL OTHER F EXPENSES (S×V)	32,531	32,592	8,403
X. FINAL F EXPENSES (K+W)	32,531	32,592	8,403
Y. TOTAL CATEGORY III EXPENSES (A-H+X)	7,840,745	10,314,503	2,026,442
Z. NUMBER OF BIOMETRICS DISPOSITIONS			
AA. TOTAL MEPRS DISPOSITIONS			
BB. ADJUSTED DISPOSITIONS (Z÷AA)			
CC. ADJUSTED MEPRS EXPENSES (Y×BB)			
DD. TOTAL RELATIVE WEIGHTED PRODUCT (RWP)			
EE. COST PER RWP (CC÷DD)			
FF. TOTAL CATEGORY II RWPs[3]			
GG. TOTAL CATEGORY II COST (EE×FF)			
HH. TOTAL ESTIMATED CATEGORY III EXPENSES (CC-GG)			
II. TOTAL CATEGORY III RWPs (DD-FF)			
JJ. COST PER CATEGORY III RWP (HH÷II)			

[2] Total work units (MWU) is the total of Inpatient Work Units plus Ambulatory Work Units (IWU+AWU).

[3] Category II RWP's are RWP's due to Diagnoses Not Normally Hospitalized (DXNNH), Potential Ambulatory

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Surgery (PAS), and Active Duty Excessive Length of Stay (ADELS).

TABLE E: BURDENING FOR ADD-ONS AND INFLATION

CATEGORY	FY 1992	FY 1993	FY 1994
KK. TOTAL OBDs (OCCUPIED BED DAYS)			
LL. CATEGORY II (AS DEFINED IN FF) OBDs			
MM. CATEGORY III OBDs (KK-LL)			
NN. AVERAGE DAYS/RWP (MM÷II)			
OO. ADD ON PER RWP (NN×77)			
PP. TOTAL COST PER RWP (JJ+OO)			
QQ. CIVILIAN PAY COST (PP×.15)			
RR. MILITARY PAY COST (PP×.56)			
SS. OTHER COSTS (PP×.29)			
TT. CIVILIAN PAY RAISES (QQ×1.037×1.0297)			
UU. MILITARY PAY RAISES (RR×1.037×1.0165)			
VV. UNFUNDED CIVILIAN RETIREMENT (TT×1.147)			
WW. CIVILIAN ASSET USE CHARGE (VV×1.04)			
XX. MILITARY ASSET USE CHARGE (UU×1.04)			
YY. OTHER ASSET USE CHARGES (SS×1.04)			
ZZ. OTHER COSTS DEFLATOR FACTOR (YY×1.083)			

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ADJUSTED CATEGORY III COSTS/RWP (WW+XX+ZZ)			

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TABLE A:

BEAUFORT

CATEGORY	FY 92	FY 93	FY 94
A. TOTAL MEPRS-A	7916064	10,401,865	

FY 94 INFORMATION NOT AVAILABLE

TABLE B:

CATEGORY	FY 92	FY 93	FY 94
B. GRADUATE MED ED (EBE)	0	0	
C. EDUCATION AND TRAINING (EBF)	464484	565955	
D. TOTAL EXP EBE AND EBF	464484	565955	0
E. TOTAL E EXPENSES	11984280	18106693	
F. % SELECTED E EXPENSES (D/E)	0.038758	0.031257	ERR

TABLE C:

CATEGORY	FY 92	FY 93	FY 94
G. TOTAL E IN MEPRS-A	5940014	1795523	
H. E EXPENSES TO REMOVE FROM A (FxG)	230221.7	56122.077	ERR
I. AREA REF LABS (FAA)	0	0	
J. CLINICAL INVEST (FAH)	0	0	
K. TOTAL SELECTED F (I+J)	0	0	0
L. CONTINUING HEALTH ED (FAL)	130345	148191	
M. DECEDENT AFFAIRS (FDD)	0	0	
N. INITIAL OUTFITTING (FDE)	0	0	
O. URGENT MINOR CONST (FDF)	0	0	
P. TOTAL (L+M+N+O)	130345	148191	0
E EXPENSE (FAL)	5045	1211	
E EXPENSE (FDD)	0	0	
E EXPENSE (FDE)	0	0	
E EXPENSE (FDF)	0	0	
Q. E EXPENSES INCLUDED IN ROW P	5045	1211	0
R. E EXPENSES TO REMOVE FROM P. (FxQ)	195.533	37.8518322	ERR
S. OTHER F'S LESS E (P-R)	130149.5	148153.148	ERR

TABLE D:

CATEGORY	FY 92	FY 93	FY 94
T. IWU	2326.37	2078.46	
U MWU	5049.9	4889.29	
V PERCENT INPATIENT	0.460676	0.42510467	ERR
W. FINAL OTHER F EXP (SxV)	59956.79	62980.5948	ERR
X FINAL F EXP (K+W)	59956.79	62980.5948	ERR
Y TOTAL CATEGORY III EXP (A-H+X)	7745799	10408723.5	ERR
Z NUMBER BIOMETRICS DISPOS	2537	2260	
AA. TOTAL MEPRS DISP	2565	2379	
BB. ADJ DISPOS (Z/AA)	0.989084	0.94997898	ERR
CC ADJ MERPS EXP (YxBB)	7661245	9888068.58	ERR
DD. TOTAL RWP	1684.515	1482.345	
EE COST PER RWP (CC/DD)	4548.042	6670.55819	ERR
CATEGORY II RWPS			
(DXNNH)	0	0	
(PAS)	539.961	387.153	
(ADELS)	22.8952	8.197	
FF. TOTAL CAT II RWPS	562.8562	395.35	0
GG. TOTAL CAT II COST (EExFF)	2559893	2637205.18	ERR
HH. TOTAL EXT CAT III EXP (CC-GG)	5101351	7250863.4	ERR
II. TOTAL CAT III RWPS (DD-FF)	1121.659	1086.995	0
JJ. COST PER CAT III RWP (HH/II)	4548.042	6670.55819	ERR

TABLE E

CATEGORY	FY 92	FY 93	FY 94
KK. TOTAL OBDS	9535	7443	
CAT II OBDS			
(DXNNH)	0	0	
(PAS)	1233	901	
(ADELS)	473	104	
LL TOTAL CAT II OBD	1706	1005	0
MM CAT III OBDS (KK-LL)	7829	6438	0
NN. AVG DAYS/RWP (MM/II)	6.979841	5.82275033	ERR
OO. ADD ON PER RWP (NNx77)	537.4478	456.051776	ERR
PP. TOTAL COST PER RWP (JJ+OO)	5085.49	7126.60997	ERR
QQ. CIVILIAN PAY COST (PPx.15)	762.8234	1068.99149	ERR
RR. MILITARY PAY COST (PPx.56)	2847.874	3990.90158	ERR
SS. OTHER COSTS (PPx.29)	1474.792	2066.71889	ERR
TT. CIVILIAN PAY RAISES (QQx1.037x1.0297))	814.542	1141.46794	ERR
UU. MILITARY PAY RAISES (RRx1.037x1.0165)	3001.974	4206.85126	ERR
VV. UNFUNDED CIV RET (TTx1.47)	1197.377	1677.95788	ERR
WW. CIVILAIN ASSET USE CHARGE (VVx1.04)	1245.272	1745.07618	ERR
XX. MILITARY ASSET USE CHARGE (UU*1.04)	3122.053	4375.12531	ERR
YY. OTHER ASSET USE CHARGES (SS*1.04)	1533.784	2149.38557	ERR
ZZ. OTHER COSTS DEFLATOR FACT (YY*1.083)	1661.088	2327.78457	ERR
ADJ CAT III COST/RWP	6028.412	8447.98607	ERR

BUMED
MED-825
GSA
6/2/94

15. Quality of Life.

a. Military Housing

(1) Family Housing:

(a) Do you have mandatory assignment to on-base housing? No.

*(b) For military family housing in your locale provide the following information:

*NOTE: Data submitted only for housing on Naval Hospital, Beaufort compound.

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+	N/A	N/A	N/A	N/A
Officer	3	8	8	N/A	N/A
Officer	1 or 2	N/A	N/A	N/A	N/A
Enlisted	4+	N/A	N/A	N/A	N/A
Enlisted	3	45	45	N/A	N/A
Enlisted	1 or 2	N/A	N/A	N/A	N/A
Mobile Homes	N/A	N/A	N/A	N/A	N/A
Mobile Home lots	N/A	N/A	N/A	N/A	N/A

(c) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

*(d) Complete the following table for the military housing waiting list. *NOTE: Data submitted only for housing on Naval Hospital, Beaufort compound.

Pay Grade	Number of Bedrooms	Number on List[1]	Average Wait
O-6/7/8/9	1	N/A	N/A
	2	N/A	N/A
	3	1	12 MONTHS
	4+	N/A	N/A
O-4/5	1	N/A	N/A
	2	N/A	N/A
	3	4	12-18 MONTHS
	4+	N/A	N/A
O-1/2/3/CWO	1	N/A	N/A
	2	N/A	N/A
	3	11	12 MONTHS
	4+	N/A	N/A
E7-E9	1	N/A	N/A
	2	N/A	N/A
	3	4	9-12 MONTHS
	4+	N/A	N/A
E1-E6	1	N/A	N/A
	2	N/A	N/A
	3	39	9-12 MONTHS
	4+	N/A	N/A

[1]As of 31 March 1994.

(e) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details.

	Top Five Factors Driving the Demand for Base Housing
1	COST
2	CONVENIENCE TO PERSONNEL IN HOSPITAL
3	SCHOOLS
4	SAFETY/SECURITY
5	QUALITY OF BASE HOUSING

(f) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)? 100%

(g) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	98.8%
Substandard	N/A
Inadequate	N/A

(h) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% (or vacancy over 2%), is there a reason? No change.

(2) BEQ:

(a) Provide the utilization rate for BEQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	60%
Substandard	75%
Inadequate	0%

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

RESPONSE: No. The reason occupancy is under 95% is most of the active duty members are married with dependents or active duty members are married to other active duty members. These members live in housing or reside in the local area.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$\textbf{AOB} = \frac{\textbf{(\# Geographic Bachelors x average number of days in barracks)}}{\textbf{365}}$$

RESPONSE: AOB geographic bachelors is six.

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	6	100%	
Spouse Employment (non-military)	N/A	N/A	
Other	N/A	N/A	
TOTAL	6	100	

(e) How many geographic bachelors do not live on base? Not Applicable.

(3) BOQ: Not applicable.

(a) Provide the utilization rate for BOQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$\text{AOB} = \frac{(\text{\# Geographic Bachelors x average number of days in barracks})}{365}$$

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)			
Spouse Employment (non-military)			
Other			
TOTAL			

(e) How many geographic bachelors do not live on base? Not Applicable.

b. For on-base MWR facilities[2] available, complete the following table for each separate location. For off-base government owned or leased recreation facilities indicate distance from base. If there are any facilities not listed, include them at the bottom of the table.

LOCATION Naval Hospital, Beaufort **DISTANCE** N/A

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Auto Hobby	Indoor Bays	1	N/A
	Outdoor Bays	4	N/A
Arts/Crafts	SF	0	N/A
Wood Hobby	SF	0	N/A
Bowling	Lanes	0	N/A
Enlisted Club	SF	1,764	N
Officer's Club	SF	0	N/A
Library	SF	0	N/A
Library	Books	0	N/A
Theater	Seats	0	N/A
ITT	SF	25	N/A
Museum/Memorial	SF	0	N/A
Pool (indoor)	Lanes	0	N/A
Pool (outdoor)	Lanes	4	N/A
Beach	LF	0	N/A
Swimming Ponds	Each	0	N/A
Tennis CT	Each	2	N/A

[2]Spaces designed for a particular use. A single building might contain several facilities, each of which should be listed separately.

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each	3	N/A
Basketball CT (outdoor)	Each	1	N/A
Racquetball CT	Each	0	N/A
Golf Course	Holes	0	N/A
Driving Range	Tee Boxes	0	N/A
Gymnasium	SF	0	N/A
Fitness Center	SF	660	N/A
Marina	Berths	0	N/A
Stables	Stalls	0	N/A
Softball Fld	Each	2	N/A
Football Fld	Each	0	N/A
Soccer Fld	Each	0	N/A
Youth Center	SF	0	N/A

c. Is your library part of a regional interlibrary loan program?
RESPONSE: Not applicable.

d. Base Family Support Facilities and Programs

(1). Complete the following table on the availability of child care in a child care center on your base. Not Applicable.

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos						
6-12 Mos						
12-24 Mos						
24-36 Mos						
3-5 Yrs						

(2). In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

Not Applicable.

(3). If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

Not Applicable.

(4). How many "certified home care providers" are registered at your base?

Not Applicable.

(5). Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).

- Marine Corps Recruit Depot, Child Care Center, capacity 85 children, 6 months to 6 yrs.
- Marine Corps Air Station, Child Care Center, three buildings:
  (1) Bldg 842, Capacity 78 children, 3 - 4 yrs;
  (2) Bldg 1142, Capacity 96 children, 6 months to 3 yrs;
  (3) Bldg 894, Capacity 58 children, 5 yrs and older.

(6). Complete the following table for services available on your base. If you have any services not listed, include them at the bottom.

Service	Unit of Measure	Qty
Exchange	SF	1419
Gas Station	SF	N/A
Auto Repair	SF	724
Auto Parts Store	SF	N/A
Commissary	SF	N/A
Mini-Mart/Gas Station	SF	578
Package Store	SF	N/A
Fast Food Restaurants	Each	N/A
Bank/Credit Union	Each	1
Family Service Center	SF	N/A
Laundromat	SF	N/A
Dry Cleaners	Each	N/A
ARC	PN	16
Chapel	PN	74
FSC Classrm/Auditorium	PN	312

NOTE: N/A = Not Applicable

e. Proximity of closest major metropolitan areas (provide at least three):

City	Distance (Miles)
CHARLESTON, SC	65
SAVANNAH, GA	45
AUGUSTA, GA	126

f. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	86.48	48.39
E2	86.48	54.39
E3	82.62	60.87
E4	81.99	57.22
E5	85.43	59.65
E6	81.99	55.43
E7	79.90	55.40
E8	69.05	52.20
E9	71.97	54.63
W1	N/A	N/A
W2	50.15	39.34
W3	80.78	65.67
W4	56.88	50.43
O1E	84.52	62.70
O2E	62.80	50.70
O3E	60.64	51.30
O1	78.83	58.09
O2	67.85	53.03
O3	47.30	39.82
O4	37.75	32.83
O5	35.19	29.10
O6	5.93	4.91
O7	N/A	N/A

g. Off-base housing rental and purchase

(1) Fill in the following table for average rental costs in the area for the period 1 April 1993 through 31 March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	295.00	175.00	50.00
Apartment (1-2 Bedroom)	530.00	250.00	100.00
Apartment (3+ Bedroom)	585.00	475.00	120.00
Single Family Home (3 Bedroom)	1000.00	400.00	180.00
Single Family Home (4+ Bedroom)	1200.00	450.00	225.00
Town House (2 Bedroom)	550.00	475.00	140.00
Town House (3+ Bedroom)	635.00	475.00	150.00
Condominium (2 Bedroom)	800.00	450.00	160.00
Condominium (3+ Bedroom)	850.00	540.00	165.00

(2) What was the rental occupancy rate in the community as of 31 March 1994?

Type Rental	Percent Occupancy Rate
Efficiency	98
Apartment (1-2 Bedroom)	97
Apartment (3+ Bedroom)	97
Single Family Home (3 Bedroom)	94
Single Family Home (4+ Bedroom)	99
Town House (2 Bedroom)	99
Town House (3+ Bedroom)	99
Condominium (2 Bedroom)	98
Condominium (3+ Bedroom)	98

(3) What are the median costs for homes in the area?

Type of Home	Median Cost
Single Family Home (3 Bedroom)	75,000
Single Family Home (4+ Bedroom)	100,000
Town House (2 Bedroom)	56,000
Town House (3+ Bedroom)	60,000
Condominium (2 Bedroom)	85,000
Condominium (3+ Bedroom)	89,900

(4) For calendar year 1993, from the local MLS listings provide the number of 2, 3, and 4 bedroom homes available for purchase. Use only homes for which monthly payments would be within 90 to 110 percent of the E5 BAQ and VHA for your area.

Month	Number of Bedrooms		
	2	3	4+
January	32	63	3
February	34	51	3
March	30	44	4
April	36	57	3
May	38	59	3
June	30	60	5
July	17	61	5
August	31	76	3
September	34	73	5
October	26	60	5
November	26	55	4
December	24	51	7

(5) Describe the principle housing cost drivers in your local area.

(a) Retirement/local resort area located on the Atlantic Coastal Waterway.

(b) Remote area from large metropolitan cities.

h. For the top five sea intensive ratings in the principle warfare community your base supports, provide the following: Not Applicable.

Rating	Number Sea Billets in the Local Area	Number of Shore billets in the Local Area

RESPONSE: Not Applicable.

i. Complete the following table for the average one-way commute for the five largest concentrations of military and civilian personnel living off-base.

Location	% Employees	Distance (mi)	Time (min)
BEAUFORT COUNTY	95.9	6	10
CHARLESTON COUNTY	1.0	75	90
JASPER COUNTY	1.2	20	30
HAMPTON COUNTY	1.1	25	35
COLLETON COUNTY	0.8	40	55

j. Complete the tables below to indicate the civilian educational opportunities available to service members stationed at the air station (to include any outlying fields) and their dependents:

(1) List the local educational institutions which offer programs available to dependent children. Indicate the school type (e.g. DODDS, private, public, parochial, etc.), grade level (e.g. pre-school, primary, secondary, etc.), what students with special needs the institution is equipped to handle, cost of enrollment, and for high schools only, the average SAT score of the class that graduated in 1993, and the number of students in that class who enrolled in college in the fall of 1994.

Institution	Type	Grade Level(s)	Special Education Available	Annual Enrollment Cost per Student	1993 Avg SAT/ ACT Score	% HS Grad to Higher Educ	Source of Info
LAUREL BAY SCHOOL	DODD S	PRE & K - 6	BASED ON IEP *	5,122	N/A	N/A	BUDGET OFFICE
BEAUFORT ACADEMY	PRIV	K - 12	LIMITED	3,044	973	100%	BUS. OFFICE
AGAPE CHRISTIAN SCHOOL	PRIV	K - 12	NO	50	N/A	85%	BUS. OFFICE
LITTLE PEOPLE COLLEGE	PRIV	K - 5	NO	1800	N/A	N/A	BUS. OFFICE
PRAISE CHRISTIAN SCHOOL	PRIV	K - 8	NO	1300	N/A	N/A	BUS. OFFICE
YORUBA ACADEMY	PRIV	K - 12	YES	0	N/A	100%	BUS. OFFICE
ST. PETER'S CATHOLIC	PRIV	K - 6	NO	3200	N/A	N/A	BUS. OFFICE
BEAUFORT ELEMENTARY	PUB	PRE & K -5	NO	0	N/A	N/A	ATTEND. COORD.
BROAD RIVER ELEMENTARY	PUB	3 - 5	NO	0	N/A	N/A	ATTEND. COORD.
DAVIS ELEMENTARY	PUB	PRE & K - 5	NO	0	N/A	N/A	ATTEND. COORD.
FIELDS ELEMENTARY	PUB	PRE & K - 5	NO	0	N/A	N/A	ATTEND. COORD.
HILTON HEAD ELEMENTARY	PUB	K - 2	NO	0	N/A	N/A	ATTEND. COORD.
HILTON HEAD PRIMARY	PUB	3 - 5	NO	0	N/A	N/A	ATTEND. COORD.
LADY'S ISLAND ELEMENTARY	PUB	PRE & K - 5	NO	0	N/A	N/A	ATTEND. COORD.

MOSSY OAKS ELEMENTARY	PUB	K - 5	NO	0	N/A	N/A	ATTEND. COORD.
PORT ROYAL ELEMENTARY	PUB	1 - 5	NO	0	N/A	N/A	ATTEND. COORD.
RILEY ELEMENTARY	PUB	PRE & K - 5	NO	0	N/A	N/A	ATTEND. COORD.
SHELL POINT ELEMENTARY	PUB	PRE & K - 3	NO	0	N/A	N/A	ATTEND. COORD.
ST. HELENA ELEMENTARY	PUB	PRE & K - 5	NO	0	N/A	N/A	ATTEND COORD.
MCCRACKEN MIDDLE	PUB	6 - 8	NO	0	N/A	N/A	ATTEND. COORD.
LADY'S ISLAND MIDDLE SCHOOL	PUB	6 - 8	NO	0	N/A	N/A	ATTEND. COORD.
ROBERT SMALLS MIDDLE SCHOOL	PUB	6 - 8	NO	0	N/A	N/A	ATTEND. COORD.
BATTERY CREEK HIGH SCHOOL	PUB	9 - 12	NO	0	832	46%	ATTEND. COORD.
BEAUFORT HIGH SCHOOL	PUB	9 - 12	NO	0	832	57%	ATTEND. COORD.
HILTON HEAD HIGH SCHOOL	PUB	9 - 12	NO	0	832	70%	ATTEND. COORD.
BEAUFORT SPECIAL ED PROGRAM	PUB	K - 12	YES	3700	N/A	N/A	ATTEND. COORD.
ATLANTIC SHORE	PRIV	K - 12	NO	1200	N/A	N/A	BUS. OFFICE

*NOTE: IEP = Individual Education Plan - A plan developed for a child who has been classified in the Special Education Category. Full Service, which could include physical disabilities, as well as Limited Service, which could include speech services or learning disabilities, are offered.

(2) List the educational institutions within 30 miles which offer programs off-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational / Technical	Undergraduate		Graduate
				Courses only	Degree Program	
WEBSTER UNIVERSITY	Day	NO	NO	NO	NO	NO
	Night	NO	NO	NO	NO	YES
LIMESTONE COLLEGE	Day	NO	NO	NO	NO	NO
	Night	NO	NO	YES	YES	NO
USC-BEAUFORT	Day	NO	NO	YES	YES	YES
	Night	NO	NO	YES	YES	YES
BEAUFORT-JASPER CAREER ED CENTER	Day	NO	YES	NO	NO	NO
	Night	YES	YES	NO	NO	NO
TECHNICAL COLL OF THE LOWCOUNTRY	Day	YES	YES	YES	YES	NO
	Night	YES	YES	YES	YES	NO

(3) List the educational institutions which offer programs on-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
WEBSTER UNIVERSITY	Day	NO	NO	NO	NO	YES
	Night	NO	NO	NO	NO	YES
	Corres-pondence	NO	NO	NO	NO	NO
LIMESTONE COLLEGE	Day	NO	NO	NO	NO	NO
	Night	NO	NO	YES	YES	NO
	Corres-pondence	NO	NO	NO	NO	NO
PARK COLLEGE	Day	NO	NO	NO	NO	NO
	Night	NO	NO	YES	YES	NO
	Corres-pondence	NO	NO	NO	NO	NO
UNIV OF SC - BEAUFORT	Day	NO	NO	YES	YES	YES
	Night	NO	NO	YES	YES	YES
	Corres-pondence	NO	NO	YES	YES	YES
TECHNICAL COLL OF THE LOWCOUNTRY	Day	YES	YES	YES	YES	NO
	Night	YES	YES	YES	YES	N0
	Corres-pondence	NO	NO	YES	YES	NO
CITY COLLEGE OF CHICAGO	Day	NO	NO	NO	NO	NO
	Night	NO	NO	YES	NO	NO
	Corres-pondence	NO	NO	NO	NO	NO

k. Spousal Employment Opportunities

Provide the following data on spousal employment opportunities.

Skill Level	Number of Military Spouses Serviced by Family Service Center Spouse Employment Assistance			Local Community Unemployment Rate
	1991	1992	1993	
Professional	10	6	5	N/A*
Manufacturing	3	2	1	N/A*
Clerical	12	9	13	N/A*
Service	27	21	15	N/A*
Other	0	0	0	N/A*

*NOTE: Local unemployment rates for the respective skill levels were not available. However, general local unemployment rates for the specified periods were:

- 1991 - 4.5%
- 1992 - 4.6%
- 1993 - 5.5%

l. Do your active duty personnel have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

- Medical: Due to its small size (49 beds), Naval Hospital, Beaufort is limited in some specialties which may require referral to other regional Military Treatment Facilities (MTFs) or civilian sources. With this exception, there are no other difficulties with access to medical care.

- Dental: Complete dental service is available to active duty members in the clinics at Marine Corps Recruit Depots (MCRD) and Marine Corps Air Station (MCAS).

m. Do your military dependents have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

- Medical: As stated before, Naval Hospital, Beaufort is limited in some specialties which may require referral to other regional MTFs or disengagement to civilian sources. In the Beaufort area, most specialties are available from civilian sources, but, due to the small physician population, the majority of the physicians don't accept CHAMPUS on an outpatient basis. Because of the larger physician population in the Savannah and Charleston area, access to various specialties are more readily available and competition among physicians is greater, resulting in increased CHAMPUS acceptance.

- Dental: Limited services is available to family members from the military sources, dependent on space availability and active duty priorities. There is a sufficient source of dental care from the civilian community under the Delta Dental Plan.

n. Complete the table below to indicate the crime rate for your air station for the last three fiscal years. The source for case category definitions to be used in responding to this question are found in NCIS - Manual dated 23 February 1989, at Appendix A, entitled "Case Category Definitions." Note: the crimes reported in this table should include 1) all reported criminal activity which occurred on base regardless of whether the subject or the victim of that activity was assigned to or worked at the base; and 2) all reported criminal activity off base.

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
2. Blackmarket (6C)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
3. Counterfeiting (6G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
4. Postal (6L)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
6. Burglary (6N)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
7. Larceny - Ordnance (6R)			
Base Personnel - military	1	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
8. Larceny - Government (6S)			
Base Personnel - military	1	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)			
Base Personnel - military	3	0	0
Base Personnel - civilian	0	2	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	1	0
10. Wrongful Destruction (6U)			
Base Personnel - military	0	0	1
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
11. Larceny - Vehicle (6V)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
12. Bomb Threat (7B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
14. Assault (7G)			
Base Personnel - military	0	1	1
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	2
Off Base Personnel - civilian	0	0	0
15. Death (7H)			
Base Personnel - military	0	0	1
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
16. Kidnapping (7K)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)			
Base Personnel - military	0	8	1
Base Personnel - civilian	0	0	1
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
19. Perjury (7P)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
20. Robbery (7R)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
21. Traffic Accident (7T)			
Base Personnel - military	3	13	12
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	1	2
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
23. Indecent Assault (8D)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
24. Rape (8F)			
Base Personnel - military	1	0	0
Base Personnel - civilian	1	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
25. Sodomy (8G)			
Base Personnel - military	0	1	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	1
Off Base Personnel - civilian	0	0	0

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DATA BEING CERTIFIED: Data Call No. 27

ACTIVITY COMMANDER

R. L. FINKE, CAPT/MSC/USN
NAME (Please type or print)

Signature

COMMANDING OFFICER
Title

26 MAY 1994
Date

NAVAL HOSPITAL, BEAUFORT, SC 29902-6148
Activity (UIC: 61337)

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) — x D F Hagen — Signature

CHIEF BUMED/SURGEON GENERAL

Title — June 2, 1994 — Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J B Greene Jr — NAME (Please type or print) — J B Greene Jr — Signature

Acting — Title — 6/9/94 — Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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DATA BEING CERTIFIED: Data Call No. 27 Amendment 2

ACTIVITY COMMANDER

M. V. BROWN, CAPT/MC/USN	MVB
NAME (Please type or print)	Signature
COMMANDING OFFICER	9 September 1994
Title	Date

NAVAL HOSPITAL, BEAUFORT, SC 29902-6148
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

HAROLD M. KOENIG, RADM, MC, USN
NAME (Please type or print)

Signature

ACTING CHIEF BUMED
Title

9-17-94
Date

BUREAU OF MEDICINE AND SURGERY
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER
NAME (Please type or print)

Signature

Title

9/21/94
Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DATA BEING CERTIFIED: Data Call No. 27 (pg 30)

ACTIVITY COMMANDER

M. V. BROWN, CAPT/MC/USN	MVB
NAME (Please type or print)	Signature
COMMANDING OFFICER	7 September 1994
Title	Date

NAVAL HOSPITAL, BEAUFORT, SC 29902-6148
Activity (UIC: 61337)

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) — Signature

CHIEF BUMED/SURGEON GENERAL

Title — Date 9-28-94

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.
NAME (Please type or print) — Signature

ACTING
Title — Date 13 OCT 1994

Document Separator

401

BRAC DATA CALL #26
CAPACITY ANALYSIS

NATIONAL NAVAL MEDICAL CENTER, BETHESDA
UIC 00168

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MISSION REQUIREMENTS (NNMC) DMIS 0067 UIC 00168

1. Population. Please identify your beneficiary population using the same definitions as used by RAPS. Use the following table to record your results.

TYPE	ACTUAL FY 1993			PROJECTED FY 2001		
	CATCHMENT[1]	ASSIGNED[2]	REGION[3]	CATCHMENT[1]	ASSIGNED[2]	REGION[3]
AD	76,295	23,122	184,582	68,469	20,977	159,325
FAMILY OF AD	111,818	22,301	295,524	100,127	21,384	254,444
SUBTOTAL	188,113	45,423	480,106	168,596	42,361	413,769
RETIRED AND FAMILY MEMBERS UNDER 65	117,533	25,210	377,826	114,442	26,249	367,933
RETIRED AND FAMILY MEMBERS OVER 654	36,113	10,125	139,113	45,847	13,769	176,837
OTHER	29,422	5,772	127,609	31,708	7,058	130,708
TOTAL	371,181	86,530	1,124,654	360,593	89,437	1,089,247

NOTE: THE FOLLOWING APPLIES TO ALL FACILITIES.

[1] THE BASIS FOR YOUR REPORTED POPULATION IS THE CATCHMENT AREA DEFINED AS SETS OF ZIP CODES EMANATING FROM THE CENTER OF THE ZIP CODE IN WHICH THE MTF IS LOCATED WITH A RADIUS OF 40 MILES.

[2] THIS IS THE POPULATION SPECIFICALLY ASSIGNED TO YOUR FACILITY IN CONTRAST TO THE POPULATION IN THE CATCHMENT AREA. THIS IS IMPORTANT IN FACILITIES WITH OVERLAPPING CATCHMENT AREAS.

[3] IF YOU ARE A DESIGNATED NAVAL MEDICAL CENTER, PLEASE REPORT YOUR LEAD AGENT POPULATION (SEE TRICARE POLICY GUIDELINES).

[4] THIS SECTION MUST BE COMPLETED.

Revised pg

MISSION REQUIREMENTS (NNMC) DMIS 0067 UIC 00168

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[3] IF YOU ARE A DESIGNATED NAVAL MEDICAL CENTER, PLEASE REPORT YOUR LEAD AGENT POPULATION (SEE TRICARE POLICY GUIDELINES).

[4] THIS SECTION MUST BE COMPLETED.

R

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	~~384~~ 342 VR BUMED 8240 10/3/94 R
Set Up Beds[1]:	~~75~~ 117 R
Expanded Bed Capacity[2]:	779

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	384
Set Up Beds[1]:	75
Expanded Bed Capacity[2]:	779

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

The following questions are designed to determine the level of services provided at your facility during FY 1993, your current maximum capability (i.e. your maximum capacity given the same set of parameters that you are currently functioning within), and the requirements of the community you support.

3. Workload. Complete the following table for FY 1993:

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	OTHER	TOT EACH ROW
OUTPATIENT VISITS	186,808	139,472	176,593	91,593	594,566
ADMISSIONS	4,926	5,448	5,799	477	16,650
LABORATORY TESTS (WEIGHTED)[1]	NA	NA	NA	NA	17,681,455
RADIOLOGY PROCEDURES (WEIGHTED)[1]	NA	NA	NA	NA	1,051,796
PHARMACY UNITS (WEIGHTED)[1]	NA	NA	NA	NA	1,810,518
OTHER (SPECIFY)					

Source: (a) Outpatient visits and Admissions - EIS
(b) Laboratory tests, Radiology Procedures and Pharmacy Units - SEARS

[1]If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

3a. Workload. Complete the following table for your maximum capacity. Assume the same facility, staff, equipment, and supplies you currently have. Do not change your scope of practice. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	OTHER	TOT EACH ROW
OUTPATIENT VISITS	173,955	123,452	162,731	101,006	561,144
ADMISSIONS	5,044	5,212	6,052	504	16,812
LABORATORY TESTS (WEIGHTED)[1]	NA	NA	NA	NA	17,681,455
RADIOLOGY[1] PROCEDURES (WEIGHTED)	NA	NA	NA	NA	1,051,796
PHARMACY UNITS (WEIGHTED)[1]	NA	NA	NA	NA	1,810,518
OTHER (SPECIFY)					

NOTE:

Currently the NNMC, Bethesda is operating at its identified maximum capacity considering the mission and responsibilies of a tertiary MTF with requirements to support Graduate Medical Education (GME) and Residency programs, in addition to providing healthcare to congressional and presidential patients. In order to support training programs, the NNMC is required to treat and absorb the costs of Medicaid patients, who if treated in civilian facilities would actually increase total overall government costs. In addition to its assigned catchment population, the NNMC serves as a major referral center for patients referred from CONUS and OCONUS facilities.

Although major efficiencies have not been identified that will permit the NNMC to increase productivity without increasing current MTF direct care resources, the NNMC continues to employ the principles of Total Quality Leadership (TQL) to identify and improve processes within this MTF that will develop the NNMC as a Most Efficient Organization (MOE).

---

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

[1]

3b. Workload. Complete the following table for the current workload demand of your supported population. Assume you are to provide all the care in your facility for your catchment area. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	OTHER	TOT EACH ROW
OUTPATIENT VISITS	174,340	157,532	220,772	101,006	653,650
ADMISSIONS	5,109	5,543	6,528	504	17,684
LABORATORY TESTS (WEIGHTED)[1]	NA	NA	NA	NA	17,681,623
RADIOLOGY PROCEDURES (WEIGHTED)[1]	NA	NA	NA	NA	1,051,906
PHARMACY UNITS (WEIGHTED)[1]	NA	NA	NA	NA	1,810,523
OTHER (SPECIFY)					

NOTES and CALCULATIONS:

(a) Used FY94 projected direct care Outpatient Visits (OPVs) and Admissions (ADMs).
(b) CHAMPUS - FY94 projections calculated from 1st Quarter FY93 CHAMPUS data (Source MCQA).

OPV calculation FY93 1st quarter OPVs 23,026 x 4 Qtrs/yr = 92,014 FY94 projected OPVs.
From FY93 actual OPVs, determine percentage of Beneficiaries (37% DEP ACDU, 19% RET/DEC, and 44% RET DEPS) and apply those percentages to FY94 projected OPVs.
[FY94 projected 92,104 x 37% = 34,078;.. x 19% = 17,500;.. x 44% = 40,526]

ADM calculation FY93 1st quarter ADMs 183 x 4 Qtrs/yr = 732 FY94 projected ADMs
From FY93 actual ADMs, determine percentage of Beneficiaries (45% DEP ACDU, 22% RET/DEC, and 33% RET DEPS) and apply those percentages to FY94 projected ADMs.
[FY94 projected 732 x 45% = 329;.. x 22% = 161;.. x 33% = 242]

(c) Laboratory Tests, Radiology Procedures and Pharmacy Units do not include CHAMPUS data.
(d) Projected Supplemental Care numbers included.

The following questions are designed to determine the level of services provided at your facility during FY 1993, your current maximum capability (i.e. your maximum capacity given the same set of parameters that you are currently functioning within), and the requirements of the community you support.

---

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

[1]

[1]

4. Staffing. Please complete the following table related to your provider staffing (only include those providers whose primary responsibility is patient care). Please include military, civilian, and contract providers. Do not include partnerships.

PROVIDER TYPE	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
PRIMARY CARE[1]	85	85	85	85	85	85	85	85
SPECIALTY CARE[2]	138	139	139	139	139	139	139	139
PHYSICIAN EXTENDERS[3]	107	108	93	93	93	93	93	93
INDEPENDENT DUTY CORPSMEN	6	6	6	6	6	6	6	6
TOTAL	336	338	323	323	323	323	323	323

[1] This includes General Medical Officers, Flight Surgeons, Diving Medical Officers, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.
[2] This is all other physician providers not included in the primary care category.
[3] This includes Physician Assistants and Nurse Practitioners.

Call #26

LOCATION

5. Community Providers. Complete the following table for the civilian providers within your 40 mile catchment area. The catchment area is defined as sets of zip codes emanating from the center of the ZIP code in which the MTF is located with a radius of 40 miles. If you are required to use another boundary please define the geographical region and the reason for its use.

PROVIDER TYPE	CURRENT
PRIMARY CARE[1]	6012
SPECIALTY CARE[2]	6706
PHYSICIAN EXTENDER[3]	884
TOTAL	13602

[1]This includes General Practioners, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.

[2]This is all other physician providers not included in the primary care category.

[3]This includes Physician Assistants and Nurse Practitioners.

NOTES:

1. Source of physician data: Donnelley Marketing Information Systems, calender year 1991

2. The number of Nurse Practioners in Washington DC were not obtainable.

3. The Physican Extender figure is an estimate based on the proportion of Maryland, Virginia, and Washington DC's population living in the Washington DC Metropolitan Statistical Area.

NNMC Bethesda
(Data Call #26 Revised Page)

LOCATION

5. Community Providers. Complete the following table for the civilian providers within your 40 mile catchment area. The catchment area is defined as sets of zip codes emanating from the center of the ZIP code in which the MTF is located with a radius of 40 miles. If you are required to use another boundary please define the geographical region and the reason for its use.

PROVIDER TYPE	CURRENT
PRIMARY CARE[1]	734
SPECIALTY CARE[2]	11,402
PHYSICIAN EXTENDER[3]	73
TOTAL	12,209

[1] This includes General Practioners, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.

[2] This is all other physician providers not included in the primary care category.

[3] This includes Physician Assistants and Nurse Practitioners.

ASSUMPTIONS:

1. **GEOGRAPHIC BOUNDARY IS THE WASHINGTON DC METROPOLITAN STATISTICAL AREA.**

2. **PRIMARY CARE ONLY INCLUDES FAMILY AND GENERAL PRACTICE PHYSICIANS AND ALL OTHER PROVIDERS ARE INCLUDED UNDER SPECIALTY CARE.**

3. **ONLY NONFEDERAL PHYSICIANS INVOLVED IN PATIENT CARE HAVE BEEN COUNTED.**

4. **UNDER PHYSICIAN EXTENDERS, ONLY PHYSCIAN ASSISTANT NUMBERS FOR WASHINGTON DC WERE AVAILABLE.**

6. Regional Population. Please provide the U. S. Census population for your 40 mile catchment area. If you are required to use another boundary please define the geographical region and the reason for its use. Also list the source of this information. This value should include your beneficiary population.

Region Population: 4,360,349

ASSUMPTIONS:

1. **SOURCE: US BUREAU OF CENSUS, 1992 POPULATION BASED ON 1990 CENSUS DATA.**

2. **GEOGRAPHIC BOUNDARY IS THE WASHINGTON METROPOLITAN STATISTICAL AREA DUE TO WASHINGTON DC LOCATION.**

7. Regional Community Hospitals. Please list in the table below all the community hospitals (as defined in the American Hospital Association publication Hospital Statistics) in your region (include military, civilian, and any federal facilities including Veterans Affairs):

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
WASHINGTON, DC		22 MILES	25-30 MINUTES	
CHILDREN'S NATIONAL MEDICAL CENTER	NOT-FOR-PROFIT (NFP)			
COLUMBIA HOSPITAL FOR WOMEN MEDICAL CARE	NFP			
DISTRICT OF COLUMBIA GENERAL HOSPITAL	CITY			
GEORGE WASHINGTON UNIVERSITY HOSPITAL	NFP			MOU: GME-GASTROENTEROLOGY GME-INFECTIOUS DISEASE GME-UMBRELLA MOU: RESEARCH
GEORGETOWN UNIVERSITY HOSPITAL	CHURCH OPERATED			MOU: GME-ANESTHESIOLOGY GME-GASTROENTEROLOGY GME-HEMATOPATHOLOGY GME-NEUROLOGY GME-NURSING GME-UMBRELLA
GREATER SOUTHEAST COMMUNITY HOSP	NFP			
HADLEY MEMORIAL HOSP	CHURCH			
HOSPITAL FOR SICK CHILDREN	NFP			
HOWARD UNIVERSITY HOSP	NFP			MOU: GME-HEMATOPATHOLOGY
NATIONAL REHABILITATION HOSP	NFP			
PROVIDENCE HOSP	NFP (CHURCH OPERATED)			

R

K

~~X~~ 11R 21 Oct 94
cfev BUMPA-823

7. Regional Community Hospitals. Please list in the table below all the community hospitals (as defined in the American Hospital Association publication Hospital Statistics) in your region (include military, civilian, and any federal facilities including Veterans Affairs):

ASSUMPTION: DISTANCES AND DRIVING TIMES ARE APPROXIMATED.

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
WASHINGTON		3 MILES	7 MINUTES	
CHILDREN'S NATIONAL MEDICAL CENTER	NOT-FOR-PROFIT (NFP)			
COLUMBIA HOSPITAL FOR WOMEN MEDICAL CARE	NFP			
DISTRICT OF COLUMBIA GENERAL HOSPITAL	CITY			
GEORGE WASHINGTON UNIVERSITY HOSPITAL	NFP			MOU: GME-GASTROENTEROLOGY GME-INFECTIOUS DISEASE GME-UMBRELLA MOU: RESEARCH
GEORGETOWN UNIVERSITY HOSPITAL	CHURCH OPERATED			MOU: GME-ANESTHESIOLOGY GME-GASTROENTEROLOGY GME-HEMATOPATHOLOGY GME-NEUROLOGY GME-NURSING GME-UMBRELLA
GREATER SOUTHEAST COMMUNITY HOSP	NFP			
HADLEY MEMORIAL HOSP	CHURCH			
HOSPITAL FOR SICK CHILDREN	NFP			
HOWARD UNIVERSITY HOSP	NFP			MOU: GME-HEMATOPATHOLOGY
NATIONAL REHABILITATION HOSP	NFP			
PROVIDENCE HOSP	NFP (CHURCH OPERATED)			
PSYCHIATRIC INSTITUTE OF WASHINGTON	CORPORATION			
SAINT ELIZABETHS HOSPITAL	CITY			
SIBLEY MEMORIAL HOSP	NFP			
VETERANS AFFAIRS MEDICAL CENTER	VETERANS ADMINISTRATION			MOU: GME-ANESTHESIOLOGY GME-UMBRELLA

(should be pg 11R)

PSYCHIATRIC INSTITUTE OF WASHINGTON	CORPORATION				R
SAINT ELIZABETHS HOSPITAL	CITY				R
SIBLEY MEMORIAL HOSP	NFP				R
VETERANS AFFAIRS MEDICAL CENTER	VETERANS ADMINISTRATION			MOU: GME-ANESTHESIOLOGY GME-UMBRELLA	R

R

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
WALTER REED ARMY MEDICAL CENTER	ARMY			MOU: GME-NEUROLOGY GME-UMBRELLA MOU: RESEARCH
WASHINGTON HOSPITAL CENTER	NFP			MOU: GME-ANESTHESIOLOGY GME-DENTAL GME-HEMATOPATHOLOGY GME-ORTHOPAEDICS GME-OTOLARYNGOLOGY GME-RADIOLOGY GME-SURGERY GME-UMBRELLA GME-UROLOGY
MARYLAND				
ANDREWS AFB		38 MILES	45 MIN	
MALCOLM GROW USAF MED CTR	AIR FORCE			MOU: GME-ANESTHESIOLOGY GME-NURSING GME-UMBRELLA GME-OB/GYN
ANNAPOLIS		60 MILES	70 MIN	
ANNE ARUNDEL MED CTR	NFP			
BALTIMORE		38 MILES	45 MIN	
BON SECOURS HOSP	NFP			

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FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
WALTER REED ARMY MEDICAL CENTER	ARMY			MOU: GME-NEUROLOGY GME-UMBRELLA MOU: RESEARCH
WASHINGTON HOSPITAL CENTER	NFP			MOU: GME-ANESTHESIOLOGY GME-DENTAL GME-HEMATOPATHOLOGY GME-ORTHOPAEDICS GME-OTOLARYNGOLOGY GME-RADIOLOGY GME-SURGERY GME-UMBRELLA GME-UROLOGY
MARYLAND				
ANDREWS AFB		38 MILES	45 MIN	
MALCOLM GROW USAF MED CTR	AIR FORCE			MOU: GME-ANESTHESIOLOGY GME-NURSING GME-UMBRELLA GME-OB/GYN
ANNAPOLIS		60 MILES	70 MIN	
ANNE ARUNDEL MED CTR	NFP			
BALTIMORE		38 MILES	45 MIN	
BON SECOURS HOSP	NFP			
CHILDREN'S HOSP AND CTR FOR RECONSTRUCTIVE SURGERY	NFP			
CHURCH HOSPITAL CORP	NFP			
DEATON HOSP	NFP			

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
FRANCIS SCOTT KEY MED CTR	NFP			

CHILDREN'S HOSP AND CTR FOR RECONSTRUCTIVE SURGERY	NFP			
CHURCH HOSPITAL CORP	NFP			
DEATON HOSP	NFP			

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FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
FRANCIS SCOTT KEY MED CTR	NFP			
FRANKLIN SQ HOSP CTR	NFP			
GOOD SAMARITAN HOSP	NFP			
GREATER BALTIMORE MED CTR	NFP			
HARBOR HOSP CTR	NFP			
JAMES LAWRENCE KERNAN HOSP	NFP			
JOHNS HOPKINS HOSP	NFP			MOU: GME-CARDIOLOGY GME-RADIOLOGY GME-UMBRELLA GME-UROLOGY MOU: RESEARCH
KENNEDY KRIEGER INSTITUTE	NFP			
LEVINDALE HEBREW GERIATRIC CTR AND HOSP	NFP			
LIBERTY MED CTR	NFP			
MARYLAND GEN HOSP	NFP			
MERCY MED CTR	CHURCH			
MONTEBELLO REHAB HOSP	NFP			
MT WASHINGTON PEDIATRIC HOSP	NFP			

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FRANKLIN SQ HOSP CTR	NFP			
GOOD SAMARITAN HOSP	NFP			
GREATER BALTIMORE MED CTR	NFP			
HARBOR HOSP CTR	NFP			
JAMES LAWRENCE KERNAN HOSP	NFP			
JOHNS HOPKINS HOSP	NFP			MOU: GME-CARDIOLOGY GME-RADIOLOGY GME-UMBRELLA GME-UROLOGY MOU: RESEARCH
KENNEDY KRIEGER INSTITUTE	NFP			
LEVINDALE HEBREW GERIATRIC CTR AND HOSP	NFP			
LIBERTY MED CTR	NFP			
MARYLAND GEN HOSP	NFP			
MERCY MED CTR	CHURCH			
MONTEBELLO REHAB HOSP	NFP			
MT WASHINGTON PEDIATRIC HOSP	NFP			
SHEPPARD AND ENOCH PRATT HOSP	NFP			MOU: GME-PSYCHIATRY
SINAI HOSP OF BALTIMORE	NFP			

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
ST AGNES HOSP	CHURCH			
UNION MEM HOSP	NFP			

SHEPPARD AND ENOCH PRATT HOSP	NFP			MOU: GME-PSYCHIATRY
SINAI HOSP OF BALTIMORE	NFP			

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
ST AGNES HOSP	CHURCH			
UNION MEM HOSP	NFP			
UNIV OF MD MEDICAL SYSTEM	NFP			MOU: GME-ANESTHESIOLOGY GME-HEMATOPATHOLOGY GME-NEUROSURGERY GME-ORTHOPAEDICS GME-PODIATRY GME-RADIOLOGY GME-SURGERY GME-UMBRELLA GME-UROLOGY
VETERANS AFFAIRS MEDICAL CTR	VETERANS ADMIN			MOU: GME-ANESTHESIOLOGY GME-UMBRELLA
BETHESDA		0 MILES	0 MIN	
CLINICAL CTR, NATIONAL INSTITUTE OF HEALTH	PUBLIC HEALTH SERVICE			MOU: GME-NEUROSURGERY GME-UMBRELLA MOU: RESEARCH (SEVERAL INSTITUTES)
SUBURBAN HOSP	NFP			MOU: GME-SURGERY GME-UMBRELLA
CATONSVILLE		27 MILES	35 MIN	
SPRING GROVE HOSP CTR	STATE			
CHEVERLY		22 MILES	30 MIN	
PRINCE GEORGE'S HOSP CTR	NFP			
CLINTON				
SOUTHERN MD HOSP	CORPORATION			

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UNIV OF MD MEDICAL SYSTEM	NFP			MOU: GME-ANESTHESIOLOGY GME-HEMATOPATHOLOGY GME-NEUROSURGERY GME-ORTHOPAEDICS GME-PODIATRY GME-RADIOLOGY GME-SURGERY GME-UMBRELLA GME-UROLOGY
VETERANS AFFAIRS MEDICAL CTR	VETERANS ADMIN			MOU: GME-ANESTHESIOLOGY GME-UMBRELLA
BETHESDA		0 MILES	0 MIN	
CLINICAL CTR, NATIONAL INSTITUTE OF HEALTH	PUBLIC HEALTH SERVICE			MOU: GME-NEUROSURGERY GME-UMBRELLA MOU: RESEARCH (SEVERAL INSTITUTES)
SUBURBAN HOSP	NFP			MOU: GME-SURGERY GME-UMBRELLA
CATONSVILLE		27 MILES	35 MIN	
SPRING GROVE HOSP CTR	STATE			
CHEVERLY		22 MILES	30 MIN	
PRINCE GEORGE'S HOSP CTR	NFP			
CLINTON				
SOUTHERN MD HOSP	CORPORATION			
COLUMBIA		25 MILES	35 MIN	
HOWARD COUNTY GEN HOSP	NFP			
CROWNSVILLE		40 MILES	50 MIN	
CROWNSVILLE HOSP CTR	STATE			

COLUMBIA		25 MILES	35 MIN	
HOWARD COUNTY GEN HOSP	NFP			
CROWNSVILLE		40 MILES	50 MIN	
CROWNSVILLE HOSP CTR	STATE			
ELLIOT CITY		30 MILES	40 MIN	
TAYLOR MANOR HOSP	CORPORATION			
EMMITSBURG		60 MILES	60 MIN	
MOUNTAIN MANOR TREATMENT CTR FOR ALCOHOLISM	CORPORATION			
FREDRICK		31 MILES	40 MIN	
FREDRICK MEM HOSP	NFP			
GLEN BURNIE		40 MILES	50 MIN	
NORTH ARUNDEL HOSP	NFP			
JESSUP		32 MILES	40 MIN	
CLIFTON T PERKINS HOSP CTR	STATE			
LA PLATA		58 MILES	68 MIN	
PHYSICIAN'S MEM HOSP	NFP			

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ELLIOT CITY		30 MILES	40 MIN	
TAYLOR MANOR HOSP	CORPORATION			
EMMITSBURG		60 MILES	60 MIN	
MOUNTAIN MANOR TREATMENT CTR FOR ALCOHOLISM	CORPORATION			
FREDRICK		31 MILES	40 MIN	
FREDRICK MEM HOSP	NFP			
GLEN BURNIE		40 MILES	50 MIN	
NORTH ARUNDEL HOSP	NFP			
JESSUP		32 MILES	40 MIN	
CLIFTON T PERKINS HOSP CTR	STATE			
LA PLATA		58 MILES	68 MIN	
PHYSICIAN'S MEM HOSP	NFP			
LANHAM		16 MILES	24 MIN	
DOCTORS COMM HOSP	NFP			
LAUREL		16 MILES	25 MIN	
GREATER LAUREL BELTSVILLE HOSP	NFP			

LANHAM		16 MILES	24 MIN	
DOCTORS COMM HOSP	NFP			
LAUREL		16 MILES	25 MIN	
GREATER LAUREL BELTSVILLE HOSP	NFP			
OLNEY		14 MILES	21 MIN	
MONTGOMERY GEN HOSP	NFP			
PATUXENT RIVER		40 MILES	50 MIN	
NAVAL HOSPITAL	NAVY			
RANDALLSTOWN		45 MILES	56 MIN	
NORTHWEST HOSP CTR	NFP			
ROCKVILLE		4 MILES	7 MIN	
CHESTNUT LODGE HOSP	CORPORATION			MOU: GME-PSYCHIATRY
PSYCHIATRIC INSTITUTE OF MONTGOMERY COUNTY	CORPORATION			
SHADY GROVE ADVENTIST HOSP	CHURCH			
SILVER SPRING		2 MILES	5 MIN	
HOLY CROSS HOSP OF SILVER SPRING	CHURCH			
SUITLAND		NA	NA	
ST LUKE INSTITUTE	NFP			

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OLNEY		14 MILES	21 MIN	
MONTGOMERY GEN HOSP	NFP			
PATUXENT RIVER		40 MILES	50 MIN	
NAVAL HOSPITAL	NAVY			
RANDALLSTOWN		45 MILES	56 MIN	
NORTHWEST HOSP CTR	NFP			
ROCKVILLE		4 MILES	7 MIN	
CHESTNUT LODGE HOSP	CORPORATION			MOU: GME-PSYCHIATRY
PSYCHIATRIC INSTITUTE OF MONTGOMERY COUNTY	CORPORATION			
SHADY GROVE ADVENTIST HOSP	CHURCH			
SILVER SPRING		2 MILES	5 MIN	
HOLY CROSS HOSP OF SILVER SPRING	CHURCH			
SUITLAND		NA	NA	
ST LUKE INSTITUTE	NFP			
SYKESVILLE		NA	NA	
SPRINGFIELD HOSP CTR	STATE			

SYKESVILLE		NA	NA	
SPRINGFIELD HOSP CTR	STATE			
TAKOMA PARK		12 MILES	18 MIN	
WASHINGTON ADVENTIST HOSP	CHURCH			
TOWSON		55 MILES	65 MIN	
ST JOSEPH HOSP	CHURCH			
VIRGINIA				
ALEXANDRIA		30 MILES	40 MIN	
ALEXANDRIA HOSP	NFP			
MT VERNON HOSP	NFP			
ARLINGTON		23 MILE	31 MIN	
ARLINGTON HOSP	NFP			
HOSPICE OF NORTHERN VIRGINIA	NFP			
NATIONAL HOSP FOR ORTHOPAEDICS AND REHABILITATION	NFP			
NORTHERN VIRGINIA DOCTORS' HOSP	CORPORATION			
FAIRFAX		30 MILES	40 MIN	
FAIR OAKS HOSP	NFP			

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TAKOMA PARK		12 MILES	18 MIN	
WASHINGTON ADVENTIST HOSP	CHURCH			
TOWSON		55 MILES	65 MIN	
ST JOSEPH HOSP	CHURCH			
VIRGINIA				
ALEXANDRIA		30 MILES	40 MIN	
ALEXANDRIA HOSP	NFP			
MT VERNON HOSP	NFP			
ARLINGTON		23 MILE	31 MIN	
ARLINGTON HOSP	NFP			
HOSPICE OF NORTHERN VIRGINIA	NFP			
NATIONAL HOSP FOR ORTHOPAEDICS AND REHABILITATION	NFP			
NORTHERN VIRGINIA DOCTORS' HOSP	CORPORATION			
FAIRFAX		30 MILES	40 MIN	
FAIR OAKS HOSP	NFP			
FALLS CHURCH				
FAIRFAX HOSP	NFP			

FALLS CHURCH				
FAIRFAX HOSP	NFP			
HCA DOMINION HOSP	CORPORATION			
NORTHERN VIRGINIA MENTAL HEALTH INSTITUTE	STATE			MOU: GME-PSYCHIATRY
LEESBURG		NA	NA	
GRAYDON MANOR	NFP			
LOUDOUN HOSP CTR	NFP			
SPRINGWOOD PSYCHIATRIC INSTITUTE	CORPORATION			MOU: GME-PSYCHIATRY
MANASSAS		44 MILES	54 MIN	
PRINCE WILLIAM HOSP	NFP			
RESTON		31 MILES	40 MIN	
HCA RESTON HOSP CTR	CORPORATION			
WOODBRIDGE		40 MILES	50 MIN	
POTAMAC HOSP	NFP			

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* Distance is measured from NNMC to center of city listed using a local area map. Driving times are estimated based on distance and whether freeway or city driving.

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HCA DOMINION HOSP	CORPORATION			
NORTHERN VIRGINIA MENTAL HEALTH INSTITUTE	STATE			MOU: GME-PSYCHIATRY
LEESBURG		NA	NA	
GRAYDON MANOR	NFP			
LOUDOUN HOSP CTR	NFP			
SPRINGWOOD PSYCHIATRIC INSTITUTE	CORPORATION			MOU: GME-PSYCHIATRY
MANASSAS		44 MILES	54 MIN	
PRINCE WILLIAM HOSP	NFP			
RESTON		31 MILES	40 MIN	
HCA RESTON HOSP CTR	CORPORATION			
WOODBRIDGE		40 MILES	50 MIN	
POTAMAC HOSP	NFP			

7a. Regional Community Hospitals. For each facility listed in the preceding table complete the following table:

FACILITY	BEDS[1]	JCAHO APPROVED	OCCUPANCY[1]	UNIQUE FEATURES[2]
WASHINGTON				
CHILDREN'S NATIONAL MED CTR	279	YES (Y)	73.8	BURN CARE UNIT
COLUMBIA HOSP FOR WOMEN MEDICAL CARE	141	Y	65.4	
DISTRICT OF COLUMBIA GEN HOSPITAL	435	Y	68	NEONATAL ICU
GEORGE WASHINGTON UNIV HOSP	425	Y	82.8	ONCOLOGY CTR
GEORGETOWN UNIV HOSP	500	Y	97.8	BURN CARE UNIT
GREATER SOUTHEAST COMM HOSP	470	Y	80	
HADLEY MEM HOSP	81	Y	NOT REPORTED	
HOSP FOR SICK CHILDREN	80	Y	96.3	PEDIATRIC REHABILITATION
HOWARD UNIV HOSP	437	Y	70.6	COMPLICATED OBSTETRICS
NATIONAL REHAB HOSP	160	Y	76.9	REHABILITATION
PROVIDENCE HOSP	342	Y	76	
PSYCHIATRIC INSTITUTE OF WASHINGTON	210	Y	50	PSYCHIATRIC
ST ELIZABETHS HOSP	1221	NO	99	PSYCHIATRIC
SIBLEY MEM HOSP	362	Y	61.6	
VETERANS AFFAIRS MED CTR	577	Y	NA	

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7a. Regional Community Hospitals. For each facility listed in the preceding table complete the following table:

FACILITY	BEDS[1]	JCAHO APPROVED	OCCUPANCY[1]	UNIQUE FEATURES[2]
WASHINGTON				
CHILDREN'S NATIONAL MED CTR	279	YES (Y)	73.8	BURN CARE UNIT
COLUMBIA HOSP FOR WOMEN MEDICAL CARE	141	Y	65.4	
DISTRICT OF COLUMBIA GEN HOSPITAL	435	Y	68	NEONATAL ICU
GEORGE WASHINGTON UNIV HOSP	425	Y	82.8	ONCOLOGY CTR
GEORGETOWN UNIV HOSP	500	Y	97.8	BURN CARE UNIT
GREATER SOUTHEAST COMM HOSP	470	Y	NA	
HADLEY MEM HOSP	81	Y	NA	
HOSP FOR SICK CHILDREN	80	Y	96.3	PEDIATRIC REHABILITATION
HOWARD UNIV HOSP	437	Y	70.6	COMPLICATED OBSTETRICS
NATIONAL REHAB HOSP	160	Y	76.9	REHABILITATION
PROVIDENCE HOSP	342	Y	76	
PSYCHIATRIC INSTITUTE OF WASHINGTON	210	Y	NA	PSYCHIATRIC
ST ELIZABETHS HOSP	1221	NO	99	PSYCHIATRIC
SIBLEY MEM HOSP	362	Y	61.6	
VETERANS AFFAIRS MED CTR	577	Y	NA	

WALTER REED ARMY MED CTR	793	Y	80.6	
WASH HOSP CTR	874	Y	76.7	TRAUMA CTR
MARYLAND				
ANDREWS AFB				
MALCOLM GROW USAF MED CTR	291	Y	57	
ANNAPOLIS				
ANNE ARUNDEL MED CTR	303	Y	67	
BALTIMORE				
BON SECOURS HOSP	156	Y	94	
CHILDREN'S HOSP AND CTR FOR RECONSTRUCTIVE SURGERY	76	Y	42.1	
CHURCH HOSP CORP	216	Y	68.5	
FRANCIS SCOTT KEY MED CTR	347	Y	NOT REPORTED	BURN CARE UNIT
FRANKLIN SQ HOSP CTR	427	Y	76.1	NEONATAL ICU
GOOD SAMARITAN HOSP	269	Y	83.6	
GREATER BALTIMORE MED CTR	386	Y	78.2	TRAUMA CENTER
HARBOR HOSP CTR	287	Y	74.2	

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WALTER REED ARMY MED CTR	793	Y	80.6	
WASH HOSP CTR	874	Y	76.7	TRAUMA CTR
MARYLAND				
ANDREWS AFB				
MALCOLM GROW USAF MED CTR	291	Y	57	
ANNAPOLIS				
ANNE ARUNDEL MED CTR	303	Y	67	
BALTIMORE				
BON SECOURS HOSP	156	Y	94	
CHILDREN'S HOSP AND CTR FOR RECONSTRUCTIVE SURGERY	76	Y	42.1	
CHURCH HOSP CORP	216	Y	68.5	
DEATON HOSP	360	NO	NA	
FRANCIS SCOTT KEY MED CTR	347	Y	NA	BURN CARE UNIT
FRANKLIN SQ HOSP CTR	427	Y	76.1	NEONATAL ICU
GOOD SAMARITAN HOSP	269	Y	83.6	
GREATER BALTIMORE MED CTR	386	Y	78.2	TRAUMA CENTER
HARBOR HOSP CTR	287	Y	74.2	

JAMES LAWRENCE KERNAN HOSP	69	Y	53.6	
JOHNS HOPKINS HOSP	959	Y	80.9	BONE MARROW TRANSPLANTS
KENNEDY KRIEGER INSTITUTE	51	Y	74.5	
LEVINDALE HEBREW GERIATRIC CTR AND HOSP	76	Y	98	
LIBERTY MED CTR	260	Y	76.9	
MARYLAND GEN HOSP	247	Y	75.7	
MERCY MED CTR	302	Y	68.5	WOMEN'S HEALTH CTR
MONTBELLO REHAB HOSP	137	Y	67.2	
MT WASHINGTON PEDIATRIC HOSP	130	Y	89.2	
SHEPPARD AND ENOCH PRATT HOSP	260	Y	83.8	
SINAI HOSP OF BALTIMORE	487	Y	78.9	TRAUMA CTR
ST AGNES HOSP	396	Y	79.8	NEONATAL ICU
UNION MEM HOSP	344	Y	78	
UNIV OF MD MED SYSTEM	713	Y	78.5	ORGAN/TISSUE TRANSPLANTS
VETERANS AFFAIRS MED CTR	184	Y	80.4	
BETHESDA				
CLINICAL CTR, NATIONAL INSTITUTE OF HEALTH	415	Y	57.8	RESEARCH

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JAMES LAWRENCE KERNAN HOSP	69	Y	53.6	
JOHNS HOPKINS HOSP	959	Y	80.9	BONE MARROW TRANSPLANTS
KENNEDY KRIEGER INSTITUTE	51	Y	74.5	
LEVINDALE HEBREW GERIATRIC CTR AND HOSP	76	Y	NA	
LIBERTY MED CTR	260	Y	76.9	
MARYLAND GEN HOSP	247	Y	75.7	
MERCY MED CTR	302	Y	68.5	WOMEN'S HEALTH CTR
MONTBELLO REHAB HOSP	137	Y	67.2	
MT WASHINGTON PEDIATRIC HOSP	130	Y	89.2	
SHEPPARD AND ENOCH PRATT HOSP	260	Y	83.8	
SINAI HOSP OF BALTIMORE	487	Y	78.9	TRAUMA CTR
ST AGNES HOSP	396	Y	79.8	NEONATAL ICU
UNION MEM HOSP	344	Y	NA	
UNIV OF MD MED SYSTEM	713	Y	78.5	ORGAN/TISSUE TRANSPLANTS
VETERANS AFFAIRS MED CTR	184	Y	80.4	
BETHESDA				
CLINICAL CTR, NATIONAL INSTITUTE OF HEALTH	415	Y	57.8	RESEARCH

SUBURBAN HOSP	277	Y	78.5	
CATONSVILLE				
SPRING GROVE HOSP CTR	508	Y	100	
CHEVERLY				
PRINCE GEORGE'S HOSP CTR	356	Y	79.2	
CLINTON				
SOUTHERN MD HOSP	328	Y	71.6	
COLUMBIA				
HOWARD COUNTY GEN HOSP	213	Y	66.7	
CROWNSVILLE				
CROWNSVILLE HOSP CTR	327	Y	76.5	
ELLIOT CITY				
TAYLOR MANOR HOSP	96	Y	66.7	
EMMITSBURG				
MOUNTAIN MANOR TREATMENT CTR FOR ALCOHOLISM	88	NO	70	

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SUBURBAN HOSP	277	Y	NA	
CATONSVILLE				
SPRING GROVE HOSP CTR	508	Y	100	
CHEVERLY				
PRINCE GEORGE'S HOSP CTR	356	Y	79.2	
CLINTON				
SOUTHERN MD HOSP	328	Y	71.6	
COLUMBIA				
HOWARD COUNTY GEN HOSP	213	Y	66.7	
CROWNSVILLE				
CROWNSVILLE HOSP CTR	327	Y	76.5	
ELLIOT CITY				
TAYLOR MANOR HOSP	96	Y	66.7	
EMMITSBURG				
MOUNTAIN MANOR TREATMENT CTR FOR ALCOHOLISM	88	NO	NA	

FREDRICK				
FREDRICK MEM HOSP	188	Y	98.4	WOMEN'S HEALTH CTR
GLEN BURNIE				
NORTH ARUNDEL HOSP	329	Y	77.2	
JESSUP				
CLIFTON T PERKINS HOSP CTR	220	Y	17.7	FORENSIC PSYCHIATRY
LA PLATA				
PHYSICIAN'S MEM HOSP	104	Y	74	
LANHAM				
DOCTORS COMM HOSP	250	Y	64	
LAUREL				
GREATER LAUREL BELTSVILLE HOSP	176	Y	67	
OLNEY				
MONTGOMERY GEN HOSP	229	Y	59.4	
PATUXENT RIVER	20	NO	25	
NAVAL HOSP				

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FREDRICK				
FREDRICK MEM HOSP	188	Y	98.4	WOMEN'S HEALTH CTR
GLEN BURNIE				
NORTH ARUNDEL HOSP	329	Y	77.2	
JESSUP				
CLIFTON T PERKINS HOSP CTR	220	Y	17.7	FORENSIC PSYCHIATRY
LA PLATA				
PHYSICIAN'S MEM HOSP	104	Y	74	
LANHAM				
DOCTORS COMM HOSP	250	Y	64	
LAUREL				
GREATER LAUREL BELTSVILLE HOSP	176	Y	67	
OLNEY				
MONTGOMERY GEN HOSP	229	Y	59.4	
PATUXENT RIVER	20	NO	25	

RANDALLSTOWN				
NORTHWEST HOSP CTR	227	Y	85.9	
ROCKVILLE				
CHESTNUT LODGE HOSP	100	Y	60	
PSYCHIATRIC INSTITUTE OF MONTGOMERY COUNTY	92	Y	63	
SHADY GROVE ADVENTIST HOSP	243	Y	73.3	
SILVER SPRING				
HOLY CROSS HOSP OF SILVER SPRING	414	Y	76.8	BONE MARROW TRANSPLANTS
SUITLAND				
ST LUKE INSTITUTE	24	NO	100	RESIDENTIAL TREATMENT FACILITY R
SYKESVILLE				
SPRINGFIELD HOSP CTR	445	Y	93.9	PSYCHIATRIC R
TAKOMA PARK				
WASHINGTON ADVENTIST HOSP	300	Y	78	
TOWSON				
ST JOSEPH HOSP	415	Y	77.1	NEONATAL ICU

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NAVAL HOSP				
RANDALLSTOWN				
NORTHWEST HOSP CTR	227	Y	85.9	
ROCKVILLE				
CHESTNUT LODGE HOSP	100	Y	60	
PSYCHIATRIC INSTITUTE OF MONTGOMERY COUNTY	92	Y	63	
SHADY GROVE ADVENTIST HOSP	243	Y	73.3	
SILVER SPRING				
HOLY CROSS HOSP OF SILVER SPRING	414	Y	76.8	BONE MARROW TRANSPLANTS
SUITLAND				
ST LUKE INSTITUTE	24	NO	NA	
SYKESVILLE				
SPRINGFIELD HOSP CTR	619	Y	NA	
TAKOMA PARK				
WASHINGTON ADVENTIST HOSP	300	Y	78	
TOWSON				

VIRGINIA				
ALEXANDRIA				
ALEXANDRIA HOSP	363	Y	64.5	TRAUMA CTR
MT VERNON HOSP	229	Y	62.9	
ARLINGTON				
ARLINGTON HOSP	389	Y	62.7	NEONATAL ICU
HOSPICE OF NORTHERN VIRGINIA	13	Y	NOT REPORTED	HOSPICE
NATIONAL HOSP FOR ORTHOPAEDICS AND REHABILITATION	105	Y	49.5	
NORTHERN VIRGINIA DOCTORS' HOSP	211	Y	44.1	
FAIRFAX				
FAIR OAKS HOSP	144	Y	67.8	ORGAN/TISSUE TRANSPLANTS
FALLS CHURCH				
FAIRFAX HOSP	656	Y	86.4	
HCA DOMINION HOSP	100	Y	55	
NORTHERN VIRGINIA MENTAL HEALTH INSTITUTE	114	Y	91.2	

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ST JOSEPH HOSP	415	Y	77.1	NEONATAL ICU
VIRGINIA				
ALEXANDRIA				
ALEXANDRIA HOSP	363	Y	64.5	TRAUMA CTR
MT VERNON HOSP	229	Y	62.9	
ARLINGTON				
ARLINGTON HOSP	389	Y	62.7	NEONATAL ICU
HOSPICE OF NORTHERN VIRGINIA	13	Y	NA	
NATIONAL HOSP FOR ORTHOPAEDICS AND REHABILITATION	105	Y	49.5	
NORTHERN VIRGINIA DOCTORS' HOSP	211	Y	44.1	
FAIRFAX				
FAIR OAKS HOSP	144	Y	67.8	ORGAN/TISSUE TRANSPLANTS
FALLS CHURCH				
FAIRFAX HOSP	656	Y	86.4	
HCA DOMINION HOSP	100	Y	55	

LEESBURG				
GRAYDON MANOR	61	NO	72.1	
LOUDOUN HOSP CTR	103	Y	34.8	
SPRINGWOOD PSYCHIATRIC INSTITUTE	77	Y	74	
MANASSAS				
PRINCE WILLIAM HOSP	170	Y	50	
RESTON				
HCA RESTON HOSP CTR	135	Y	NOT REPORTED	
WOODBRIDGE				
POTAMAC HOSP	158	Y	49.4	NEONATAL ICU

[1] Use definitions as noted in the American Hospital Association publication Hospital Statistics.

[2] Such as regional trauma center, burn center, Graduate Medical Education Center, etc.

25aR 21 Oct 94
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c. Training Facilities:

(1) By facility Category Code Number (CCN), provide the usage requirements for each course of instruction required for all formal schools on your installation. A formal school is a programmed course of instruction for military and/or civilian personnel that has been formally approved by an authorized authority (ie: Service Schools Command, Weapons Training Battalion, Human Resources Office). Do not include requirements for maintaining unit readiness, GMT, sexual harassment, etc. Include all applicable 171-xx, 179-xx CCN's.

Type of Training Facility/CCN	School	Type of Training	FY 1993 Requirements			FY 2001 Requirements		
			A	B	C	A	B	C
171-10	Surg Tech School (STS)	Didactic	90	145	13,050	SAME		
171-10	STS	Lab/Pract	90	234	21,060	SAME		
171-10	STS	Clinical	90	600	54,000	SAME		
171-10	Clin Nuc Med (CNMT)	Didactic	60	537	32,220	SAME		
171-10	CNMT	Lab/Pract	60	159	9,540	SAME		

171-10	CNMT	Clinical	4	1,288	5,152	SAME		
171-10	Cyto	Didactic	12	300	3,600	SAME		
171-10	Cyto	Lab/Pract	12	652	7,824	SAME		
171-10	Cyto	Clinical	12	968	11,616	SAME		
171-10	Electro-neuro Diag (END)	Didactic	20	171	3,420	12	171	2,052
171-10	END	Lab/Pract	20	208	4,160	12	208	2,496
171-10	END	Clinical	20	600	12,000	12	600	7,200
171-10	Cardio Vasc Tech (CVT)	Didactic	24	550	13,200	20	550	11,000

171-10	CVT	Lab/Pract	24	117	2,808	20	117	2,340
171-10	CVT	Clinical	24	1,320	31,680	20	1,320	26,400
171-10	Biomed Photo Tech (BPT)	Didactic	3	399	1,197	SAME		
171-10	BPT	Lab/Pract	3	345	1,035	SAME		
171-10	BPT	Clinical	3	480	1,440	SAME		
171-10	Med Lab Tech (MLT)	Didactic	72	636	45,792	96	636	61,056
171-10	MLT	Lab/Pract	72	274	19,728	96	636	26,304
171-10	MLT	Clinical	72	1,024	73,728	96	1,024	98,304

171-10	Strat Med Readiness Conting Course (SMRCC)	Didactic	150	80	12,000	SAME		
171-10	Plans, Operation/ Med Intellig (POMI)	Didactic	60	80	4,800	SAME		
171-10	Design Educ Med Dept Person (DEEPME DDEP)	Didactic	72	40	2,880	SAME		
171-10	Patient Affairs Course (PAC)	Didactic	72	160	11,520	SAME		
171-10	Quality Assur/ Risk Managmt (QA/RM)	Didactic	70	40	2,800	SAME		
171-10	Finan Mater Managemt (FMMTC)	Didactic	32	480	15,360	SAME		
171-10	Joint Med Planner Course (JMPC)	Didactic	80	120	9,600	SAME		
171-10	Health Resourc Managmt (HRM)	Didactic	288	80	23,040	SAME		

171-10	Senior Naval Leader (SNAV)	Didactic	30	80	2,400	SAME		
171-10	Inter Naval Leader (INAV)	Didactic	120	80	9,600	SAME		
171-10	Managmt Develop (MANDEV)	Didactic	288	80	23,040	SAME		
171-10	Nurse Corps Anesth	Didactic	16	176	2,816	SAME		
171-10	Nurse Anes	Clinical	4	3,480	13,920	SAME		
171-10	Dental Admin Managmt Course	Didactic	15	40	600	SAME		
171-10	Physical Therapy	Clinical	6	336	2,016	SAME		
171-10	Maxillo-Facial	Clinical	2	1,040	2,080	SAME		

A = STUDENTS PER YEAR
B = NUMBER OF HOURS EACH STUDENT SPENDS IN THIS TRAINING FACILITY FOR THE TYPE OF TRAINING

RECEIVED
C = A x B

(2) By Category Code Number (CCN), complete the following table for all training facilities aboard the installation. Include all 171-*xx* and 179-*xx* CCN's.

For example: in the category 171-10, a type of training facility is academic instruction classroom. If you have 10 classrooms with a capacity of 25 students per room, the design capacity would be 250. If these classrooms are available 8 hours a day for 300 days a year, the capacity in student hours per year would be 600,000.

Type Training Facility/CCN	Total Number	Design Capacity (PN)[2]	Capacity (Student HRS/YR)
171-10 Didactic MLT	2	24	99,840
171-10 Didactic STS	1	35	72,800
171-10 Didactic CNMT	1	30	62,400
171-10 Didactic CYTO	1	6	12,480
171-10 Didactic END	1	10	20,800
171-10 Didactic CVT	1	15	31,200
171-10 Didactic CVT	1	8	16,640
171-10 Laboratory MLT	3	24	149,760
171-10 Laboratory STS	3	12	74,880
171-10 Laboratory CNMT	1	30	62,400
171-10 Laboratory CYTO	1	6	12,480
171-10 Laboratory END	1	15	31,200

[2] Design Capacity (PN) is the total number of seats available for students in spaces used for academic instruction; applied instruction; and seats or positions for operational trainer spaces and training facilities other than buildings, i.e., ranges. Design Capacity (PN) must reflect current use of the facilities.

171-10 Laboratory BPT	1	8	16,640
171-10 Laboratory (Learning Resource Center)	1	20	41,600
171-10 Didactic SMRCC	1	30	62,400
171-10 Didactic POMI	1	30	62,400
171-10 Didactic DEEPMEDDEP	1	24	49,920
171-10 Didactic PAC	1	20	41,600
171-10 Didactic QA/RM	1	36	74,880
171-10 Didactic FMMTC	1	20	41,600
171-10 Didactic JMPC	1	30	62,600
171-10 Didactic HRM	1	36	74,880
171-10 Didactic SNAV	1	30	62,600
171-10 Didactic INAV	1	30	62,600
171-10 Didactic MANDEV	1	36	74,880
171-10 Didactic Nurse Anes	1	16	8,320
171-10 Dental Admin/Manage	1	20	41,600

(3) Describe how the Student HRS/YR value in the preceding table was derived.

Student HRS/YR = Total # of Rooms times **Design Capacity** times **8 hrs/day availability** times **260 days/year**

PLEASE NOTE:

NSHS instructors teach additional courses at local hotel conference rooms due to lack of classroom space on this compound (ie. TQL Facilitators Course, Department Head Course).

Also, there are courses which are designed to be taught off compound at selected MTFs. These include Command Naval Leadership, Senior Naval Leadership (except one course at Bethesda), Intermediate Naval Leadership (except 4 courses at Bethesda), all TQL courses (except Facilitators at Bethesda) and the new Executive Management Education

program.

A number of the C-Schools are attended by Army, Air Force, and Coast Guard personnel in addition to Navy. These schools include Clinical Nuclear Medicine, Medical Laboratory Technician, Electroneurodiagnostic Technician, and Surgical Technician School.

NORTHERN VIRGINIA MENTAL HEALTH INSTITUTE	114	Y	91.2	
LEESBURG				
GRAYDON MANOR	61	NO	72.1	
LOUDOUN HOSP CTR	103	Y	34.8	
SPRINGWOOD PSYCHIATRIC INSTITUTE	77	Y	74	
MANASSAS				
PRINCE WILLIAM HOSP	170	Y	50	
RESTON				
HCA RESTON HOSP CTR	135	Y	NA	
WOODBRIDGE				
POTAMAC HOSP	158	Y	49.4	NEONATAL ICU

[1] Use definitions as noted in the American Hospital Association publication Hospital Statistics.

[2] Such as regional trauma center, burn center, Graduate Medical Education Center, etc.

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

D. M. LICHTMAN
NAME (Please type or print)

Signature

Commanding Officer
Title

31 MAY 94
Date

National Naval Medical Center, Bethesda
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) _____ Signature _____

CHIEF BUMED/SURGEON GENERAL

Title _____ Date 6-2-94

BUREAU OF MEDICINE & SURGERY

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE JR. _____ Signature _____

NAME (Please type or print)

ACTING _____ 8 JUNE 1994

Title Date

Revision Pg 9

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

D. M. LICHTMAN
NAME (Please type or print)

Signature

Commander
Title

24 JUN 94
Date

National Naval Medical Center
Bethesda
Activity

Revision pg 9

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) _____ Signature _____

CHIEF BUMED/SURGEON GENERAL

Title _____ Date 6-30-94

BUREAU OF MEDICINE & SURGERY

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.
NAME (Please type or print) _____ Signature _____

ACTING
Title _____ Date 07 JUL 1994

P93

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. I. RIDENOUR, RADM, MC, USN
NAME (Please type or print)

Signature

COMMANDER
Title

15 September 1994
Date

NATIONAL NAVAL MEDICAL CENTER
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) — Signature

CHIEF BUMED/SURGEON GENERAL

Title — Date 9-19-94

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print) — Signature

Title — Date 9/21/94

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

DON D. WILSON
NAME (Please type or print)

Signature

ACTING COMMANDER
Title

Date 940929

NATIONAL NAVAL MEDICAL CENTER
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) _____ Signature X D F Hagen

CHIEF BUMED/SURGEON GENERAL

Title _____ Date X 10/3/94

BUREAU OF MEDICINE & SURGERY

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) _____ Signature J B Greene Jr

ACTING

Title _____ Date 10 OCT 1994

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. I. Ridenour, MC, USN
NAME (Please type or print)

RIRidenour
Signature

Commander
Title

Date

National Naval Medical Medical Center, Bethesda
Activity

I certify that the information contained herein is accurate and complete to the best of my know
belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowle
belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print)

Signature

Title

Date

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge
belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print)

X D F Hagen

Signature

CHIEF BUMED/SURGEON GENERAL

Title

X Oct 26, 94

Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and
belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print)

W A Earner

Signature

Title

11/3/94

Date

401

BRAC DATA CALL #27
MILITARY VALUE ANALYSIS

NATIONAL NAVAL MEDICAL CENTER, BETHESDA
UIC 00168

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MISSION REQUIREMENTS

1. Mission Statement. State the mission of your medical facility in sufficient detail so that it can be distinguished from other medical facilities.

The mission of NNMC is to provide a comprehensive range of emergency, outpatient, and inpatient health care services to active duty Navy and Marine Corps personnel and active duty members of other Federal Uniformed Services; to ensure that all assigned military personnel are both aware of and properly trained for the performance of their assigned contingency and wartime duties; to ensure that the command is maintained in a proper state of material and personnel readiness to fulfill wartime and contingency mission plans; to provide, as directed, health care services in support of the operation of the Navy and Marine Corps shore activities and units of the operating forces; subject to the availability of space and resources, to provide the maximum range and amount of comprehensive health care services possible for other authorized persons as prescribed by Title 10, U.S. Code, and other applicable directives; to conduct appropriate education programs for assigned military personnel to ensure that both military and health care standards of conduct and performance are achieved and maintained; to conduct graduate and postgraduate education programs for medical students and Medical Department officers; to participate as an integral element of the Navy and Tri-Service Regional Health Care System; to cooperate with military and civil authorities in matters pertaining to public health, local disasters, and other emergencies; to maintain the command in such a manner so as to ensure the successful accreditation and recognition of appropriate governmental and civilian agencies and commissions, to include the Joint Commission on Accreditation of Hospital Organizations (JCAHO).

Functions

1. Provides comprehensive inpatient and ambulatory health care services to Navy and Marine Corps units of the operating forces, shore activities, and other authorized beneficiaries as prescribed by Title 10, U.S. Code.

2. Develops and maintains designated personnel and material assets in an operationally ready status in support of the Mobile Medical Augmentation Readiness System and the TAH-20 USNS COMFORT.

3. Develops, operates, and manages administrative and logistical plans and programs in compliance with current directives.

4. Directs and coordinates the operation of subordinate health care commands and activities.

5. Maintains a liaison with the shore commands and units of the operating forces receiving medical, dental, surgical, and related care from the command.

6. Conducts a patient education and public relations program to promote consumer awareness and satisfaction.

7. Maintains standards of health care for accreditation and recognition as required by governmental and civilian agencies and commissions.

8. Operates an effective Quality Assurance/Risk Management Program to assess and improve health care provided in both inpatient and ambulatory settings.

9. Operates a whole blood donor center and maintains a command blood program to maximize utilization of blood products by interchange of blood and blood components between commands.

10. Provides support to the Naval School of Health Sciences (NSHS) for the practical phase of formal training of Group XIV Hospital Corpsmen and Dental Technicians.

11. Provides on-the-job training for Group XIV Hospital Corpsment and Dental Technicians.

12. Provides a command indoctrination program for all reporting personnel.

13. Conducts selective rotation of personnel for education and training purposes and to maximize efficient and effective use of health care assets.

14. Provides administrative and logistical support to the Navy Clinical Investigation Program as directed.

15. Negotiaties and executes Memoranda of Understanding (MOUs) and Interservice Support Agreements (ISSAs) for the purpose of mutual education, training, or support services.

16. Conducts the Decedent Affairs Program under the general supervision of the BUMED as outlined in current directives.

17. Provides medical equipment maintenance and repair services to assigned health care treatment facilities in the local area as required or requested.

18. Operates equal opportunity programs in accordance with

existing laws and regulations.

19. Maintains a liaison with and provides naval representation to various military, governmental, commercial, scientific, or professional committees, groups, and organizations with regard to health care and related subjects as required.

20. Develops plans, objectives, priorities, procedures, and standards to ensure that the health care requirements of the Navy and Marine Corps units of the operating forces, shore activities and other authorized personnel within the assigned area are met in an effective, efficient, and timely manner.

21. Ensures operational disaster plans for the command are in place and functional, including procedures for care of mass casualties.

22. Budgets for and designates resource and manpower levels for the NNMC.

23. Operates a budget execution system and ensures that financial accountability is maintained for the command.

24. Operates the Offices of Medical and Dental Affairs to manage the non-naval medical and dental care program.

25. Provides support as prescribed in the Board of Visitors charter.

26. Serves as the focal point and liaison for all audits conducted on subordinate activities and reviews and ensures follow up action on audit findings.

27. Conducts periodic inspections of subordinate activities to evaluate mission accomplishment, wartime and contingency readiness, resource management, conformance with accreditation standards, and the effectiveness of quality assurance/risk management programs to ensure and promote the delivery of quality health care.

28. Provides or undertakes other appropriate functions as directed by higher authority.

R

2. Customer Base. In the table below, identify your active duty customers. Include both Naval and non-Naval active duty components. Begin with the largest activity and work down to the smallest. Include the customer Unit Identification Code (UIC).

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
REFER TO ATTACHMENT 2			

R

NOTE: Attachment 2 lists the name, UIC, unit location, and unit size of activities within a 40 mile radius of NNMC

4R 1 Nov 94
SPCU BCMGD-823

57 NNMC BETHESDA

UIC	Unit Name		Zip	Input to RAPS ----- Service-Supplied Endstrengths ---- FY94	FY95	FY96	FY97	FY98	FY99	RAPS Output ---- Reconciled Service Endstrengths --- FY94	FY95	FY96	FY97	FY98	FY99
W03J-A	CMD USA MED R&D		21701	49	47	43	43	43	43	49	45	41	40	40	40
W05J-A	AGY USA MED MATERIEL		21701	38	38	33	33	33	33	38	37	31	31	31	31
W06505	HQ GARRISON	W065 FT DET MILPO	21701	4	4	4	4	4	4	4	4	4	4	4	4
W0PB-A	CTRUSAISC EC TELE		21701	152	154	154	154	154	154	152	148	145	143	143	143
W2KR32	ACTUSA MED DEPT	W2KR USA HEALTH CLINIC	21701	4	4	4	4	4	4	4	4	4	4	4	4
W2KR33	ACTUSA MED DEPT	W2KR USA DENTAL CLINIC	21701	5	5	5	5	5	5	5	5	5	5	5	5
W2S9AA	IST LETTERMAN RSCH		21701	17	0	0	0	0	0	17	0	0	0	0	0
W3EA1U	FTSFTS 97 ARCOM	WSV6AA 558 SIG CO (FTS)	21702	1	1	1	1	1	1	1	1	1	1	1	1
W3HVAA	GARHQ USA FT DETRCK		21701	44	44	44	44	44	44	44	42	42	41	41	41
W3J101	ELE USA JNT HLTH SVS	W3J1 USA DEF MED STHDRDIZTN B	21701	5	5	5	5	5	5	5	5	5	5	5	5
W3L803	GRPUSA FOREIGN MA	W3L8 INSCOM FMIB DET AFMIC	21701	1	1	1	1	1	1	1	1	1	1	1	1
W3TDAA	LAB MED BIOENGR R&D		21701	9	0	0	0	0	0	9	0	0	0	0	0
W4GPAA	IST MED RES INFEC DIS		21701	275	274	249	249	249	249	274	263	234	232	233	233
W4PB01	ACTMGT ENG	W4PB EASTERN AREA MARS	21701	0	0	0	0	0	0	0	0	0	0	0	0
W4PZAA	AGY MED RES ACQ		21701	2	1	0	0	0	0	2	1	0	0	0	0
W4QFAA	ACT MED MATERIEL DEV		21701	18	20	17	17	17	17	18	19	16	16	16	16
W4V212	ELEDEF COUR SVC	W4VZ NORTH AMERICAN REGION	21701	2	2	2	2	2	2	2	2	2	2	2	2
W4XQ20	AGYSPACE	W4XQ ARSPACE FT DET MSQ 114 D	21701	15	15	15	15	15	15	15	14	14	14	14	14
W4XQ40	AGYSPACE	W4XQ ARSPACE FT DET DSCSOC DE	21701	54	54	54	54	54	54	54	52	51	50	50	51
W4XQ80	AGYSPACE	W4XQ ARSPACE COMUS THEATER DE	21701	1	1	1	1	1	1	1	1	1	1	1	1
WD1QAA	DETAREA MED LAB		21701	0	44	44	44	44	44	0	42	42	41	41	41
WD2KAA	TN INV CONT (SM)		21701	0	0	0	0	0	0	0	0	0	0	0	0
WDCYAA	DETTNNMC		21701	0	41	41	41	41	41	0	39	39	38	38	38
Army total:				696	755	717	717	717	717	695	725	678	669	670	671
00011	OPNAV		20350	704	661	633	633	648	648	745	702	683	673	682	683
00012	DONSO AAUNSECNAV		20350	27	27	27	27	27	27	29	29	29	29	28	28
00013	NAV JAG ALEX VA		22332	20	19	19	19	19	19	21	20	20	20	21	20
00014	ONR WASH DC		22217	36	36	36	36	36	36	38	38	39	38	38	38
00015	OMI W DC		20395	69	69	69	69	69	69	73	73	74	73	72	72
00016	DIRNAVPETRES WDC		20585	1	1	1	1	1	1	1	1	1	1	1	1
00018	BUMED WASH DC		20372	207	207	207	207	207	207	220	220	223	220	217	217
00019	NAVAIRSYSCOMHQ		22243	27	27	27	17	17	17	29	29	29	18	18	18
00020	NAVACCTGFINCEN W		20370	0	0	0	0	0	0	0	0	0	0	0	0
00022	BUPERS WASH DC		20370	89	88	87	0	0	0	94	93	94	0	0	0
00023	CNSUPSYSCOM WAS		20889	0	29	29	29	29	29	0	31	31	31	30	30
00023	CNSUPSYSCOM WAS		22241	58	29	28	28	28	28	61	31	30	30	29	29
00024	NSESYSCOM WASH		22242	24	24	24	24	24	24	25	25	26	25	25	25
00025	NFACENGCOMHQ ALE		20889	0	0	38	38	38	38	0	0	41	40	40	40
00025	NFACENGCOMHQ ALE		22332	40	39	0	0	0	0	42	41	0	0	0	0
00027	HQ USMC WASH DC		20380	24	24	24	0	0	0	25	25	26	0	0	0
00027	HQ USMC WASH DC		20889	0	0	0	24	24	24	0	0	0	25	25	25
00029	OSD		20301	97	92	92	92	91	91	103	98	99	98	95	96
00030	DIR SIRSYSPROG		22241	74	74	74	74	74	74	78	78	80	80	78	78
00031	NAVFSSO WASH DC		20374	7	7	7	7	7	7	7	7	8	7	7	7
00032	PEOCPD WASH DC		20361	48	48	48	10	10	10	51	51	52	11	10	11
00033	CONSC WASH DC		20398	40	40	40	40	40	40	42	42	43	42	43	42
00039	CSPAWARSYSCOM		22245	14	14	14	13	13	12	15	15	15	14	14	13

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00063	CNAVCOMTELCOM DC	20394	81	81	81	81	81	81	86	86	87	86	85	85
00069	CNSECGRU WASH DC	20393	180	174	101	101	0	0	191	185	109	107	0	0
00075	NNRSCHDEVC BETH	20889	16	16	15	15	15	15	17	17	16	16	16	16
00079	NIPO CASE FUND	22203	3	3	3	3	3	3	3	3	3	3	3	3
00166	NAF WASH DC	20396	19	15	33	33	33	33	20	16	36	35	35	35
00167	NSWC CDBETH MD	20084	12	12	12	12	12	12	13	13	13	13	13	13
00168	NNMC BETHESDA	20889	1637	1677	1676	1676	1676	1676	1735	1779	1808	1781	1762	1761
00171	HQ NDW WASHDC	20374	13	13	13	13	13	13	14	14	14	14	14	14
00173	NRL W DC	20375	14	14	14	14	14	14	15	15	15	15	15	15
00174	NSWCD IN HD MD	20640	7	5	5	5	5	5	7	5	5	5	5	5
00424	NPETO ALEXANDRIA	22304	4	4	4	4	4	4	4	4	4	4	4	4
00600	NAVREGCOMTC WASH	20374	2	2	2	2	2	2	2	2	2	2	2	2
00788	NAVCOMDT C MD	20397	67	67	67	67	67	67	72	72	73	71	70	70
0431A	DNA AFRDBIOLRINT	20889	2	2	3	1	1	1	2	2	3	1	1	1
0434A	NBAND WASHDC	20374	164	164	164	164	164	164	174	174	177	174	172	172
0464A	NEODTECHD INDHD	20640	53	48	45	45	45	45	56	51	48	48	47	47
0498A	NATNAVMEDCEN BET	20889	0	0	0	0	0	0	0	0	0	0	0	0
0529A	NAVMARTRIJUD DC	20374	3	3	3	3	3	3	3	3	3	3	3	3
0574A	HQ NMCMSTA MD	20397	13	13	13	13	13	13	14	14	14	14	14	14
0608A	NNDC BETH	20889	135	135	135	135	135	135	143	143	145	143	142	143
0619A	NS NNMC BETHESDA	20889	51	51	51	51	51	51	54	54	55	54	54	54
0622A	NSNS BETHESDA MD	20889	120	119	119	119	119	119	127	127	128	126	126	125
0708A	NSWC MWEA VA	20889	7	7	7	7	7	7	7	7	8	7	7	7
30027	HQMDDC CEREM GRD	20374	193	193	193	193	193	193	205	205	209	205	203	203
30054	OPNAV TCC WDC	20350	58	58	58	58	58	58	61	62	63	62	62	61
30056	CNCTC SPCOMMDIV	20394	5	5	5	5	5	5	5	5	5	5	5	5
30117	AIDES&SPEC ASSTS	20506	11	11	11	11	11	11	12	12	12	12	12	12
30118	HQMDDC ARLINGTN	20350	6	6	6	6	6	6	6	6	6	6	6	6
30354	NEXCH DET INDHD	20640	1	1	1	1	1	1	1	1	1	1	1	1
30446	STU NAVSCOLEOD I	20640	92	83	71	67	64	64	97	88	77	71	67	67
30571	DON SO GEN COUNS	20350	2	2	2	2	2	2	2	2	2	2	2	2
30637	S NSHS BETH MD	20889	182	164	163	163	163	163	193	174	176	173	171	171
30640	S MD OST BETH	20889	12	12	12	12	12	12	13	13	14	13	13	13
30773	BRMCL ARL ANNEX	20370	28	28	28	28	28	28	30	30	30	30	29	29
31051	S INDCOL AFOR DC	20319	34	34	34	34	34	34	37	36	37	36	36	36
31052	S NATWARCOL DC	20319	27	27	27	27	27	27	29	29	29	29	28	28
31058	NADUN FLD ACTS	20370	1	1	1	1	1	1	1	1	1	1	1	1
31096	DLAADMSUPCENALEX	22304	2	2	2	2	2	2	2	2	2	2	2	2
31186	NSS BUPERS	20370	27	27	27	27	27	27	29	29	29	29	28	28
31193	NAVINTACT SUITMD	20395	9	3	3	3	3	3	10	3	3	3	3	3
31221	NAVINTACT SCM DV	20395	33	34	26	26	26	26	35	36	28	28	27	27
31393	STU PG AMERICAN	20372	0	0	0	0	0	0	0	0	0	0	0	0
31444	STU PG GEORGETOW	20372	0	0	0	0	0	0	0	0	0	0	0	0
31447	STU PG GEO WASHI	20372	0	0	0	0	0	0	0	0	0	0	0	0
31476	JUST DEPT WASHDC	20038	6	5	6	6	9	9	6	5	6	6	9	9
31698	SEC OF NAVY	20350	22	22	22	22	22	22	23	23	24	23	23	23
31699	UNDSEC OF NAVY	20350	3	3	3	3	3	3	3	3	3	3	3	3
31702	ASST SECNAV FINM	20350	2	2	2	2	2	2	2	2	2	2	2	2
31705	DON SO INFO	20350	14	14	14	14	14	14	15	15	15	15	15	15

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31706	DON SO PRAPPRAI	20350	11	11	11	11	11	11	12	12	12	12	12	12
31707	NDBDM WASH DC	22332	2	2	2	2	2	2	2	2	2	2	2	2
31750	NDQTRS NAVDIST W	20372	0	0	0	0	0	0	0	0	0	0	0	0
31797	STU SSPR GEORGE	20372	0	0	0	0	0	0	0	0	0	0	0	0
31863	NAVAUDSVCAP	20370	0	0	0	0	0	0	0	0	0	0	0	0
32563	BRMCL WNY DC	20374	48	48	48	48	48	48	51	51	52	51	50	50
32565	BRMCL NSECSTA DC	20889	3	3	3	3	3	3	3	3	3	3	3	3
32567	BRMCL NRL WASH	20374	4	4	4	4	4	4	4	4	4	4	4	4
32636	BRMCL NSWC W OAK	20903	3	3	3	3	3	3	3	3	3	3	3	3
32654	S DDIVNREACT DOE	20585	8	8	8	8	8	8	8	8	9	8	8	8
32666	NAVIMTACT PENTAG	20350	17	17	17	17	17	17	18	18	18	18	18	18
32690	NAVSECSTA WASH/E	20393	3	3	3	3	3	3	3	3	3	3	3	3
32726	NSS CC WASH DC	20393	58	58	58	58	58	58	61	62	63	62	61	62
32787	NSSC SSBM SNMSO	22202	2	2	2	2	2	2	2	2	2	2	2	2
32790	IMNED OFFSNAVRPN	20350	1	1	1	1	1	1	1	1	1	1	1	1
32791	OPNAV/RPN	20350	0	0	0	0	0	0	0	0	0	0	0	0
32792	BUPERS WASH DC/	20370	1	1	1	0	0	0	1	1	1	0	0	0
32793	CNCTC/RPN	20394	0	0	0	0	0	0	0	0	0	0	0	0
32794	COMSC/RPN	20398	0	0	0	0	0	0	0	0	0	0	0	0
32796	NAIRSYSCOMHQ/RP	20361	1	1	1	0	0	0	1	1	1	0	0	0
32858	DCNS WASH DC	20393	51	51	51	51	51	51	54	54	55	54	54	54
32959	1ST NH BETHESDA	20889	4	4	4	4	4	4	4	4	4	4	4	4
32967	CNSFA D ECHONSFW	20550	3	3	3	3	3	3	3	3	3	3	3	3
33047	DMAHTC	20816	2	1	1	1	1	1	2	1	1	1	1	1
33288	NTCC WNY W DC	20374	11	7	4	0	0	0	12	7	4	0	0	0
33329	BRMCL NOS IND HD	20640	25	25	25	25	25	25	26	27	27	27	26	26
33355	HQ NDWASH SUPAC	20374	84	84	84	84	84	84	90	89	91	90	88	88
33381	BUPERS D NODAC	20374	51	49	49	0	0	0	54	52	53	0	0	0
35054	ONI W DC RPN	20395	0	0	0	0	0	0	0	0	0	0	0	0
35056	SUPSYSCOMHQ/RPN	20376	0	0	0	0	0	0	0	0	0	0	0	0
35058	DEPT NSTAFOF/RPN	20350	0	0	0	0	0	0	0	0	0	0	0	0
35327	NTCC W CIRC WASH	20394	12	12	10	13	13	13	13	13	11	14	14	14
35333	SPAWAR SPTECH PG	20375	102	100	99	99	99	99	108	106	107	106	104	104
35352	ARNED SER BLD PR	22041	1	1	1	1	1	1	1	1	1	1	1	1
35366	NSSC PMS WASH DC	20362	82	69	70	69	69	69	87	73	76	73	72	72
35391	NBAMD DC PRMGTBU	20370	4	4	4	0	0	0	4	4	4	0	0	0
35587	NMTJ W LNT C WAS	20374	1	1	1	1	1	1	1	1	1	1	1	1
35643	SPCC NACOPG WASH	22241	30	20	20	20	20	20	32	21	22	21	21	21
35688	BRMCL NAF DC	20396	15	15	15	15	15	15	16	16	16	16	16	16
35721	PEOSPACONSEN WDC	22202	15	15	15	17	17	17	16	16	16	18	18	18
35753	BRDCL NOS IND HD	20640	4	4	4	4	4	4	4	4	4	4	4	4
35978	S USUHS BETH	20814	192	173	147	140	133	133	203	185	158	149	141	141
39001	AFIS WASH DC	22314	16	17	17	17	17	17	17	18	18	18	18	18
39003	DARPA WASH DC	20301	4	4	4	4	4	4	4	4	4	4	4	4
39006	NON-DOD EXEC DEP	20372	0	0	0	0	0	0	0	0	0	0	0	0
39028	JNTSTFJCS WA CON	20301	10	10	10	10	10	10	11	11	11	11	10	11
39054	SPAWAR D HANSCON	20363	2	2	2	2	2	2	2	2	2	2	2	2
39102	PEP ADMIN-W DC	20370	2	2	2	2	2	2	2	2	2	2	2	2
39210	COMSC/WWNCCS ADP	20398	5	5	5	5	5	5	5	5	5	5	5	5

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39215	WWNCCS OPCEN WDC	20374	73	62	62	62	62	62	77	66	67	66	65	65
39280	DMDC (FN&P) A VA	22209	2	2	2	2	2	2	2	2	2	2	2	2
39329	NRPC WASH DET	20370	4	4	4	0	0	0	4	4	4	0	0	0
40735	NSEASYCM REPEDCA	20362	1	1	1	1	1	1	1	1	1	1	1	1
41300	STU LAW ED PRG W	20372	0	0	0	0	0	0	0	0	0	0	0	0
41357	OFF ATT PHY US C	20515	16	16	16	16	16	16	17	17	17	17	17	17
41421	DON SO DEPCOM DC	20370	1	1	1	1	1	1	1	1	1	1	1	1
41475	NSSC PNS DCFMSCO	20362	2	2	2	2	2	2	2	2	2	2	2	2
41478	NBAMD DC MUSPLIA	20350	1	1	1	0	0	0	1	1	1	0	0	0
41517	NCTC SUPP W DC	20390	32	32	32	32	32	32	34	34	35	34	34	34
41524	CNSG WASH RPN	20393	0	0	0	0	0	0	0	0	0	0	0	0
41564	NSUPSYSCOMHQ FMS	20376	3	3	3	3	3	3	3	3	3	3	3	3
41565	BUPERS FMS	20370	2	2	2	0	0	0	2	2	2	0	0	0
41566	NIPO FMS	22203	32	32	32	32	32	32	34	34	34	34	34	34
41567	OFF SEC DEF RPN	20350	-2	-2	-2	-2	-2	-2	0	-1	-1	-1	-1	-1
41600	SSPC FMDEVPRNVAR	20361	8	8	8	8	8	8	8	8	9	8	8	8
41615	NASC FMS MGMT OF	20361	3	3	3	3	3	3	3	3	3	3	3	3
41810	DISA CCCC SYS	22204	0	0	0	0	0	0	0	0	0	0	0	0
41832	STU LAW ED PRG G	20372	0	0	0	0	0	0	0	0	0	0	0	0
41920	NRRCREG 6/RPN	20374	0	0	0	0	0	0	0	0	0	0	0	0
41991	NNMC BRC WHOUSE	20500	6	6	6	6	6	6	6	6	6	6	6	6
42062	STU DEFINTEL AGE	20370	0	0	0	0	0	0	0	0	0	0	0	0
42136	NAVSCOLEOD GST	20640	75	68	68	68	68	68	79	72	73	72	71	71
42182	S MD DPT OS TRNG	20052	1	1	319	319	304	290	1	1	344	339	319	305
42191	NASC OPSUPFLD DC	20361	223	219	194	193	193	193	236	232	210	205	203	203
42192	NSSC OP SUPFOWAS	20362	136	115	115	112	112	112	144	122	124	119	118	118
42200	SPAWARSYCOM PMO	20363	151	145	145	142	142	142	160	154	156	151	149	149
42217	OFF OF ASW MRA	20350	12	12	12	12	12	12	13	13	13	13	13	13
42466	WASH HDQTRSSERDC	20301	31	31	30	30	30	30	33	33	32	32	31	32
42485	ASSTFORADMIN/USN	20372	0	0	0	0	0	0	0	0	0	0	0	0
42528	JNTSTFJCS RPN	20318	0	0	0	0	0	0	0	0	0	0	0	0
42539	PSD NAFANDAFB MD	20390	8	8	7	7	7	7	8	8	8	7	7	7
42552	NAVREPOFF JTC3A	22090	1	1	1	1	1	1	1	1	1	1	1	1
42553	PSA WASH DC	20374	12	12	12	12	12	12	13	13	13	13	13	13
42554	PSD BETHESDA MD	20889	40	40	40	40	40	40	42	42	43	42	42	42
42555	PSD CRYST CTY VA	22241	57	57	57	57	57	57	60	60	61	61	60	60
42556	PSD NAVSECSTA DC	20372	0	0	0	0	0	0	0	0	0	0	0	0
42557	PSD ANACOSTIA DC	20374	22	22	22	22	22	22	23	23	24	23	23	23
42837	STU AEPR GEORGE	22031	0	0	0	0	0	0	0	0	0	0	0	0
42878	STU AEPR GEORGE	20372	0	0	0	0	0	0	0	0	0	0	0	0
42884	FLSWNGDT WASH DC	20396	63	63	63	63	63	63	67	67	68	67	66	66
43023	OPN NAVYCOMCTRDC	20350	3	3	3	3	3	3	3	3	3	3	3	3
43119	NCIS (FCI)	20388	16	17	18	19	19	19	17	18	19	20	20	20
43452	SB&CA ASD/RA/RPN	22241	0	0	0	0	0	0	0	0	0	0	0	0
43461	STU AEPR GEORGET	20372	0	0	0	0	0	0	0	0	0	0	0	0
43659	MPSA WASH DC	22331	4	4	4	4	4	4	4	4	4	4	4	4
43818	DCMO VIRGINIA	22110	2	2	2	2	2	2	2	2	2	2	2	2
43964	S FAC TRNG-SURF	20370	10	10	10	10	10	10	11	11	11	11	10	11
43965	S FAC TRNG-AIR	20370	7	7	7	7	7	7	7	7	8	7	7	7

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N	43966	S FAC TRNG-CR/IN	20889	3	3	3	3	3	3	3	3	3	3	3	3
N	43986	STU EEAP MONTGOM	20230	0	0	0	0	0	0	0	0	0	0	0	0
N	44071	US CG HQS-M REIM	20371	1	1	1	1	1	1	1	1	1	1	1	1
N	44072	SB&CA USACFSC-AF	22241	1	1	1	1	1	1	1	1	1	1	1	1
N	44101	STU MED DEPT OST	20370	0	0	0	0	0	0	0	0	0	0	0	0
N	44106	STU MED DEPT OST	20889	0	0	0	0	0	0	0	0	0	0	0	0
N	44152	STU MED DEPT OST	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	44200	EFA CHES INDHD	20640	2	2	2	2	2	2	2	2	2	2	2	2
N	44492	NAF WASHDC RAIMD	20396	-1	-5	-6	-6	-6	-6	0	-3	-4	-5	-5	-5
N	44547	STU MED DEPT IWS	20889	0	0	0	0	0	0	0	0	0	0	0	0
N	44548	STU MD IST WALTE	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	44586	NSECSTA WASH/NRL	20372	4	4	4	4	4	4	4	4	4	4	4	4
N	44604	NSS CSS WASH DC	20393	7	6	7	7	7	7	7	6	8	7	7	7
N	44690	NCIV LAW SUP ACT	22332	41	41	41	41	41	41	43	43	44	44	43	43
N	44724	OSD HYATSVLE MD	20782	1	1	1	1	1	1	1	1	1	1	1	1
N	44843	NIMAGCOM WH IMSU	20374	9	9	9	9	9	9	10	10	10	10	9	9
N	44859	PERS RES DEV OFF	20370	9	9	9	9	9	9	10	10	10	10	9	9
N	44860	NINTCOM DNI SUPP	20350	1	1	1	1	1	1	1	1	1	1	1	1
N	45028	SPAWAR CCP WASH	20363	5	5	5	5	5	5	5	5	5	5	5	5
N	45030	PEP USAF FT DETR	21702	0	0	0	0	0	0	0	0	0	0	0	0
N	45104	STU NTELSYSCOM C	20397	0	0	0	0	0	0	0	0	0	0	0	0
N	45145	DEF INSP GEN	20301	8	8	8	8	8	8	8	8	9	8	8	8
N	45147	OSD DMSSC W DC	20301	11	10	10	10	10	10	12	11	11	11	10	11
N	45157	CNSG W DC/ECCM	20393	6	6	6	6	6	6	6	6	6	6	6	6
N	45161	STU MD IST INST	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	45184	NSEADT NEODFLIAU	20640	5	3	3	3	3	3	5	3	3	3	3	3
N	45226	FMSTRPR NSCOLEOD	20640	6	6	6	6	6	6	6	6	6	6	6	6
N	45236	DISADF NWK SYSOR	22204	42	42	42	42	42	42	45	45	45	45	44	44
N	45440	BUMED/RPN	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	45520	SPCC NPG DAHLGRN	20360	1	1	1	1	1	1	1	1	1	1	1	1
N	45570	DISA SPEC PROG	20506	9	9	9	9	9	9	10	10	10	10	9	9
N	45571	DISAOFFOFEMGY	22204	4	4	4	4	4	4	4	4	4	4	4	4
N	45575	NATO MILCOMJCSDC	22241	1	0	0	0	0	0	1	0	0	0	0	0
N	45590	SPAWAR OPSUP FLD	20363	10	10	10	10	10	10	11	11	11	11	10	11
N	45595	NAMTRAGRU LIA OF	20361	1	1	1	1	1	1	1	1	1	1	1	1
N	45613	NSUPSYCNHQ PNO	20376	11	0	0	0	0	0	12	0	0	0	0	0
N	45614	NSUP OPSUP/FD DC	20376	18	0	0	0	0	0	19	0	0	0	0	0
N	45614	NSUP OPSUP/FD DC	20889	0	16	16	16	16	16	0	17	17	17	17	17
N	45615	NFAC OPSUP/FD DC	22332	1	1	1	1	1	1	1	1	1	1	1	1
N	45680	HSETC/RPN	20889	0	0	0	0	0	0	0	0	0	0	0	0
N	45745	ATTSUBPNONP WASH	20362	2	2	2	2	2	2	2	2	2	2	2	2
N	45769	NSECDT WASH DC	20350	15	15	15	15	15	15	16	16	16	16	16	16
N	45770	NLIASM GRP WDC	20395	14	14	14	14	14	14	15	15	15	15	15	15
N	45881	STU MECP COMNAVD	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	45932	NAVSEASYSCOM PNS	20370	0	0	0	0	0	0	0	0	0	0	0	0
N	45941	DCMC PLFA	22304	1	1	1	1	1	1	1	1	1	1	1	1
N	45948	DEF LOG AGENCY (	20362	0	0	0	0	0	0	0	0	0	0	0	0
N	45979	JNATINTDEVSTF MD	20395	4	4	4	4	4	4	4	4	4	4	4	4
N	45997	CHMPERSUP WASHDC	20370	8	8	8	8	8	8	8	8	9	8	8	8

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N	46043	DEF LIA DIV	20350	22	22	22	22	22	22	23	23	24	23	23	23
N	46089	STU NAVINTELTRA	20395	0	0	0	0	0	0	0	0	0	0	0	0
N	46308	NELE ARMFORMICEN	21701	5	5	5	5	5	5	5	5	5	5	5	5
N	46439	NSGSA WASH DC	20393	39	39	38	37	37	37	41	41	41	39	39	39
N	46486	BALMISSILEDEF OR	20371	4	4	4	4	4	4	4	4	4	4	4	4
N	46508	NAERO AP DARPADC	20361	1	1	1	0	0	0	1	1	1	0	0	0
N	46537	STU ECP GEORGE W	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	46643	DITSO INFOSVCEN	22204	1	0	0	0	0	0	1	0	0	0	0	0
N	46650	NFECHQ/RPN ALEX	22332	0	0	0	0	0	0	0	0	0	0	0	0
N	46667	EP COMMERCE DEPA	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	46676	JNTSTFJCS R&D DC	20318	2	2	2	2	2	2	2	2	2	2	2	2
N	46758	DMASC	22031	2	2	2	2	2	2	2	2	2	2	2	2
N	46764	DMATSC	22031	2	2	2	2	2	2	2	2	2	2	2	2
N	46801	STU EEAP #1 UNIV	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	46806	NIC/DNI PROD	20350	29	29	29	29	29	29	31	31	31	31	30	30
N	47134	DMDS NMCNCR BETH	20889	2	2	2	2	2	2	2	2	2	2	2	2
N	47135	DN NNMC BETH	20889	202	202	202	202	202	202	214	214	218	215	212	212
N	47139	DMS BRMCL WMY DC	20374	3	3	3	3	3	3	3	3	3	3	3	3
N	47140	DN NNDC BETH	20814	20	20	20	20	20	20	21	21	22	21	21	21
N	47202	USCINCSOC DC LOF	22241	4	4	4	4	4	4	4	4	4	4	4	4
N	47217	DLA SYS MNGT OFF	22304	0	0	0	0	0	0	0	0	0	0	0	0
N	47315	NAVAPLVACT	20374	4	4	4	4	4	4	4	4	4	4	4	4
N	47323	I&I STF BCD 4LA	21701	0	0	0	0	0	0	0	0	0	0	0	0
N	47326	NAVINSGEN WASHDC	20374	25	25	25	25	25	25	27	27	27	27	26	26
N	47343	NSEA SWPRGOFF DC	22242	9	7	8	8	8	8	10	7	9	8	8	8
N	47358	NIACEN SP COMNAV	20395	0	0	0	0	0	0	0	0	0	0	0	0
N	47402	WWMCCS OPSDT WDC	20374	20	20	20	20	20	20	21	21	22	21	21	21
N	47429	S MSC INSPRO PRG	20889	25	25	25	25	25	25	26	27	27	27	26	26
N	47446	MSGCD DET POT DC	20374	33	33	25	25	25	25	35	35	27	27	26	26
N	47454	CNAVRESF STF DET	20350	0	0	0	0	0	0	0	0	0	0	0	0
N	47458	USCINSO DC L OFF	22241	2	2	2	2	2	2	2	2	2	2	2	2
N	47525	OSIA WASH DC	20041	37	37	37	37	37	37	39	39	40	39	39	39
N	47553	BUPERS SDS FSS	20374	22	22	21	21	21	21	23	23	23	22	22	22
N	47612	NSWCD INHD N-NTF	20374	22	4	4	4	4	4	23	4	4	4	4	4
N	47655	DIA/D-W M SUPP	22201	5	5	5	5	5	5	5	5	5	5	5	5
N	47659	USSPACECOM WASH	20370	0	0	0	0	0	0	0	0	0	0	0	0
N	47672	ARSP WASH DC	22241	2	2	2	2	2	2	2	2	2	2	2	2
N	47689	WHITE HOUSE M/D	20500	9	8	8	8	8	8	10	8	9	8	8	8
N	47695	NAVINTACT NPOC	20395	5	5	5	5	5	5	5	5	5	5	5	5
N	47728	DEF SECASSTAG DC	20301	4	4	4	4	4	4	4	4	4	4	4	4
N	47757	STU DEFENSE LANG	20370	0	0	0	0	0	0	0	0	0	0	0	0
N	47767	NRESCRUCOM DT 5	20866	1	-12	-14	-14	-14	-14	1	-11	-13	-14	-14	-14
N	47772	NDRI DT BETHESDA	20889	5	5	4	4	4	4	5	5	4	4	4	4
N	47783	DISA DNSO FT RCH	22204	1	1	1	1	1	1	1	1	1	1	1	1
N	47784	DISA CHINFOFFCER	22204	0	0	0	0	0	0	0	0	0	0	0	0
N	47809	NAIRTECSVFACD DC	20374	1	1	1	1	1	1	1	1	1	1	1	1
N	47931	RIPO AREA 19	20390	1	1	1	1	1	1	1	1	1	1	1	1
N	47970	DLIFLC LIAOFF DC	22241	1	1	1	1	1	1	1	1	1	1	1	1
N	47995	STU COMMUNICATIO	22031	0	0	0	0	0	0	0	0	0	0	0	0

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N	48137	PEOTACAIR WASH	22243	46	46	46	30	30	30	49	49	50	32	31	32
N	48138	PEOASWASH WASH	22243	53	53	44	34	41	41	56	56	47	36	43	43
N	48142	ASSTSECNAV RDA	20350	39	39	39	39	39	39	41	41	42	41	41	41
N	48143	ASECNAV IE W DC	22244	9	9	9	9	9	9	10	10	10	10	9	9
N	48144	OSC WASH DC	22202	1	1	1	1	1	1	1	1	1	1	1	1
N	48154	PEO USW/PMO UUV	20362	24	24	21	20	20	20	25	25	23	21	21	21
N	48155	PEO UNSEAWARFARE	22242	16	16	16	16	16	16	17	17	17	17	17	17
N	48160	PEO SUBMARINES	22242	56	55	55	54	55	55	59	58	59	57	58	58
N	48304	DLEA WASH DC	20374	15	15	15	15	16	16	16	16	16	16	17	17
N	48335	DEFCURSTA DC	22202	4	4	4	4	4	4	4	4	4	4	4	4
N	48401	2D FSSG DET NVH	20889	1	1	1	1	1	1	1	1	1	1	1	1
N	48430	DIA/CONSEC PROG	20374	1	1	1	1	1	1	1	1	1	1	1	1
N	48431	DEF LEGL SVCS	20374	0	0	0	0	0	0	0	0	0	0	0	0
N	48432	OFFICE OF ECONOM	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	48433	DEF TECH SEC ADM	20301	3	3	3	3	3	3	3	3	3	3	3	3
N	48445	UNMANNED AV PROG	20361	20	20	20	4	4	4	21	21	22	4	4	4
N	48449	STU EEAP #2 GEOR	22031	0	0	0	0	0	0	0	0	0	0	0	0
N	48450	JCATE	22241	7	8	8	1	0	0	7	8	9	1	0	0
N	48459	NNMTC BETHESDA	20889	237	237	237	237	237	237	251	251	255	252	249	249
N	48463	NNDC TRNG BETH	20889	47	47	47	47	47	47	51	50	51	50	49	49
N	48482	STU TRNG USUHS B	20889	0	0	0	0	0	0	0	0	0	0	0	0
N	48485	NRL SUP DET WASH	20375	26	26	25	23	23	23	28	28	27	24	24	24
N	48498	NRLFLOPDTPAXRIV	20570	48	25	25	25	25	25	51	27	27	27	26	26
N	48539	NEHCD BETHESDA	20889	17	17	17	17	17	17	18	18	18	18	18	18
N	48545	NSGCD POT DC T/T	20374	2	2	2	2	2	2	2	2	2	2	2	2
N	48621	BUPERS SERVMBR/F	20370	4	4	4	0	0	0	4	4	4	0	0	0
N	48688	STU EEAP GEORGE	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	48712	HDQTRS N D W FSC	20374	2	2	2	2	2	2	2	2	2	2	2	2
N	48716	NTCC IN HEAD MD	20374	0	0	0	0	0	0	0	0	0	0	0	0
N	48837	DCMC HQ	22241	1	1	1	1	1	1	1	1	1	1	1	1
N	48838	PGMGR AX W DC	22243	5	5	5	0	0	0	5	5	5	0	0	0
N	48855	SP BD COM POAC	20301	1	1	1	1	1	1	1	1	1	1	1	1
N	48856	SP BD COM DODESB	20301	1	1	1	1	1	1	1	1	1	1	1	1
N	48857	SP BD COM JIMTAC	20301	1	1	1	1	1	1	1	1	1	1	1	1
N	48858	SP BD COM MINGEN	20374	4	4	4	4	4	4	4	4	4	4	4	4
N	48859	SP BD COM ASDPAE	20301	2	2	2	2	2	2	2	2	2	2	2	2
N	48860	SP BD COM PER DI	20301	1	1	1	1	1	1	1	1	1	1	1	1
N	48861	SP BD CON DOCON	20301	1	1	1	1	1	1	1	1	1	1	1	1
N	48909	NTIC SUB COMP	20374	5	5	5	5	5	5	5	5	5	5	5	5
N	49024	DECA DOD/LEG L O	22241	0	0	0	0	0	0	0	0	0	0	0	0
N	49139	MPHIBSCOL NAVLD	20374	3	3	3	3	3	3	3	3	3	3	3	3
N	49156	DOE MILAPP REIMB	20545	1	0	0	0	0	0	1	0	0	0	0	0
N	49290	DODDE AGY	22241	1	1	1	1	1	1	1	1	1	1	1	1
N	49305	NAVY CAMPUS W DC	20374	0	0	0	0	0	0	0	0	0	0	0	0
N	49317	DSA AGY	22241	1	0	0	0	0	0	1	0	0	0	0	0
N	49414	BUPERS PRECOMM S	20372	0	0	0	0	0	0	0	0	0	0	0	0
N	49429	PEP USA PANAMA C	20370	0	0	0	0	0	0	0	0	0	0	0	0
N	49436	HQ MTMC CMD	22041	2	2	2	2	2	2	2	2	2	2	2	2
N	49565	DISA DECCO DSA	22242	1	1	1	1	1	1	1	1	1	1	1	1

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49566	DITSO INPRCN ARL	22241	35	35	35	35	35	35	37	37	38	37	37	37
49567	DISA CIN	22241	0	0	0	0	0	0	0	0	0	0	0	0
49606	NSGSA/CCP	20393	7	7	5	5	5	5	7	7	5	5	5	5
49663	CIA	20350	0	0	0	0	0	0	0	0	0	0	0	0
49693	DESC COUNSELOR	20889	1	1	1	1	1	1	1	1	1	1	1	1
49699	NAVOCEANO SD CP	22031	8	8	8	8	8	8	8	8	9	8	8	8
49724	CIO WASHDC	20372	20	20	20	20	20	20	21	21	22	21	21	21
49870	NWAC DET W DC	20395	1	1	5	5	5	5	1	1	5	5	5	5
49943	STU LEGIS FELLOW	20372	0	0	0	0	0	0	0	0	0	0	0	0
52731	CRNCF 1ST RNCB A	22332	0	0	0	0	0	0	0	0	0	0	0	0
55617	VR-53	20396	0	0	0	0	0	0	0	0	0	0	0	0
59201	NSESYCM PMS 3500	22242	2	2	2	0	0	0	2	2	2	0	0	0
60921	NSWC D SL SPRING	20889	0	0	0	0	0	5	0	0	0	0	0	5
60921	NSWC D SL SPRING	20903	7	5	4	4	5	0	7	5	4	4	5	0
61894	NMCRC WASH DC	20374	7	7	7	7	7	7	7	7	8	7	7	7
62285	NAVOBSY WASH DC	20392	23	24	25	23	25	25	24	25	27	24	26	26
62312	BRDCL WNY DC	20374	68	68	62	65	65	65	72	72	67	69	68	68
62387	NSCCENTACT W DC	20398	8	8	8	8	8	8	8	8	9	8	8	8
62477	EFA CHES W DC	20374	30	29	28	27	27	27	32	31	30	30	28	28
62640	NSCOLEOD INDHD	20640	15	15	15	15	15	15	16	16	16	16	16	16
62643	NAVICECEN	20395	34	34	30	30	30	30	36	36	32	32	31	32
62645	NAVMEDLOGCOM MD	21702	31	31	31	31	31	31	33	33	33	33	33	33
62695	NAUDSVCHQ FLCHUR	22041	13	13	13	13	13	13	14	14	14	14	14	14
62733	NADUM WASH DC	20500	52	52	50	50	50	50	55	55	54	53	52	53
62844	CNAVIMAGCOM DC	20374	40	40	40	40	40	40	42	42	43	42	42	42
62845	NAVINTELSUPPCEN	20395	0	0	0	0	0	0	0	0	0	0	0	0
62850	FUELSUPCEN ALEX	22304	7	7	7	7	7	7	7	7	8	7	7	7
62907	NTR LAUREL MD	20723	1	1	1	1	1	1	1	1	1	1	1	1
62930	NAVOPINTCEN FT G	20395	0	0	0	0	0	0	0	0	0	0	0	0
62980	BUPERS FLD COMP	20370	808	816	806	0	0	0	856	865	869	0	0	0
63039	NRC ADELPHI MD	20783	1	1	1	1	1	1	1	1	1	1	1	1
63084	NTACSUPA WASH D	20374	10	9	8	8	8	8	11	10	9	8	8	8
63151	NTST CEN WASH DC	20374	22	19	22	22	22	22	23	20	24	23	23	23
63165	NCTS WASH DC	20374	43	43	43	43	43	43	45	46	46	47	45	45
63285	NCIS WASH DC	20388	44	44	42	42	42	42	47	47	45	45	44	44
63382	S DEFINTEL C DC	20340	18	18	25	24	26	26	19	19	28	25	27	27
63415	DEFINTEL AGENCY	22201	187	181	184	186	186	186	198	192	198	198	195	195
63420	NAVINTACT W DC	20389	24	24	24	24	24	24	25	25	26	25	25	25
63854	FED AVADM WASHDC	20590	4	4	4	4	4	4	4	4	4	4	4	4
63855	AFDW SK A&L CTR	20330	1	1	1	1	1	1	1	1	1	1	1	1
63959	PQMM SPEC WASH A	20350	22	22	22	22	22	22	23	23	24	23	23	23
64092	DOE MIL APPLICAT	20585	8	8	8	8	8	8	8	8	9	8	8	8
64116	US CG HDQ-REIMB	20371	2	2	2	2	2	2	2	2	2	2	2	2
64122	ARMCOM&DISARMAGY	20451	6	5	5	5	5	5	6	5	5	5	5	5
64168	DIRDIVOFNREACDOE	20585	206	192	192	192	192	192	219	204	207	204	201	202
64180	S INTERAMERDEFCO	20319	1	1	1	1	1	1	1	1	1	1	1	1
64215	ARMFORINST PATHO	20306	69	68	68	68	68	68	73	72	73	72	71	71
64223	NRESCHINST BETHA	20889	217	227	233	234	234	234	230	242	251	249	246	246
64243	SPEC BDS COMMITS	20372	0	0	0	0	0	0	0	0	0	0	0	0

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64338	S FELLOWSHP PROG	20350	2	2	2	2	2	2	2	2	2	2	2	2
64358	NATL DEF UNIV	20319	26	26	26	26	26	26	28	28	28	28	27	27
64458	RHA N2 RESPON	20374	-1	19	0	0	0	0	0	20	0	0	0	0
64688	NADUN FACTSREIMB	20370	1	1	1	1	1	1	1	1	1	1	1	1
65116	NMARAJAG WASH DC	20374	31	31	31	31	31	31	33	33	33	33	33	33
65126	NMEDINFOMGCEN MD	20889	45	43	43	29	29	29	48	46	46	31	30	30
65143	INTERAMER DEF BD	20441	9	9	9	8	8	8	10	10	10	8	8	8
65145	JNTPERSPSHPOF DC	22304	4	4	4	4	4	4	4	4	4	4	4	4
65146	OPNVSUPACT WASH	20350	72	75	75	75	75	75	76	80	81	80	79	79
65153	NQ MIL TRAFMGMT	22041	6	5	5	5	5	5	6	5	5	5	5	5
65270	NIC COMP 50	20395	5	5	5	5	5	5	5	5	5	5	5	5
65386	DEF LOG AGENCY	22304	25	24	20	18	20	20	26	25	22	19	21	21
65387	DEFMED S10121 BD	21702	5	5	5	5	5	5	5	5	5	5	5	5
65394	DEFCOMMENGCEN VA	22204	0	0	0	0	0	0	0	0	0	0	0	0
65398	JARNFORHOUSREOFF	20374	1	1	1	1	1	1	1	1	1	1	1	1
65399	ARNFOR PESTMGTBD	20307	1	1	1	1	1	1	1	1	1	1	1	1
65462	DISA HQ	22204	17	16	16	15	15	15	18	17	17	16	16	16
65472	DCA OPER CENTER/	20372	0	0	0	0	0	0	0	0	0	0	0	0
65474	DEFSYSSUPPORG	22204	72	72	72	72	72	72	76	76	78	76	76	76
65475	W HOUSE COMM AGY	20374	131	131	131	131	131	131	139	139	141	139	137	138
65487	JNTSTF JCS WASH	20318	276	272	272	272	272	272	292	288	293	289	286	287
65498	NAVSUPPUNSTDEPT	20814	7	7	7	7	7	7	7	7	8	7	7	7
65839	NATL COMM SYS	22204	2	2	2	2	2	2	2	2	2	2	2	2
65894	CIA	20350	0	0	0	0	0	0	0	0	0	0	0	0
66032	ITACEN WASH DC	20374	6	6	6	6	6	6	6	6	6	6	6	6
66123	DON SO LEGIS AFF	20350	35	35	35	35	35	35	37	37	38	37	37	37
66294	NEXCH BETHESDA	20889	1	1	1	1	1	1	1	1	1	1	1	1
66627	NCPB DET BETH MD	20889	2	2	2	2	2	2	2	2	2	2	2	2
66715	NAVCRUIT COMD DC	22203	193	183	188	188	188	188	204	194	203	200	197	197
66760	DEPTNAVSTFOF/PAO	20350	20	20	20	20	20	20	21	21	22	21	21	21
66935	NTCC CP W DC	20360	27	27	27	27	27	27	29	29	29	29	28	28
66976	NTS W DC	20397	47	47	47	47	47	47	50	50	51	50	49	49
67029	MAR BKS BTN&I DC	20390	2	2	2	2	2	2	2	2	2	2	2	2
67235	MAG 41 DET A DC	20396	1	1	1	1	1	1	1	1	1	1	1	1
67353	HQ BN HQ USNC DC	20380	5	4	4	4	4	4	5	4	4	4	4	4
67597	FIELD SUPPACT D	20374	6	6	6	6	6	6	6	6	6	6	6	6
67684	4TH CAG 4NARDIV	20374	1	1	1	1	1	1	1	1	1	1	1	1
67687	4TH FSSGHCO 4NBN	20374	3	3	2	2	2	2	3	3	2	2	2	2
67815	4MAW VMFA321MA41	20396	1	1	1	1	1	1	1	1	1	1	1	1
67854	MARCORPSDET WDC	20380	7	7	7	7	7	7	7	7	8	7	7	7
68027	NAVDEPNOAA DC	20230	6	6	6	6	6	6	6	6	6	6	6	6
68042	NAVINRELACT	20374	13	13	13	13	13	13	14	14	14	14	14	14
68076	HQ DMA	22031	14	15	15	15	15	15	15	16	16	16	16	16
68166	NNIC WASHDC	20395	334	317	317	317	317	317	353	336	342	337	333	333
68208	DMACSC	20816	2	2	2	2	2	2	2	2	2	2	2	2
68306	NRRCREG 6 WASHDC	20374	1	2	4	4	4	4	1	2	4	4	4	4
68323	CNLEGSVCC ALEX	22332	5	5	5	5	5	5	5	5	5	5	5	5
68336	USUHS BETHESDA	20814	71	71	55	44	25	25	75	75	59	47	26	26
68346	NASC PROJ MGMT O	20361	106	106	106	85	85	85	113	112	114	90	89	89

0067 NNMC BETHESDA

S	UIC	Unit Name	Input to RAPS: Service-Supplied Endstrengths FY94	FY95	FY96	FY97	FY98	FY99	RAPS Output: Reconciled Service Endstrengths FY94	FY95	FY96	FY97	FY98	FY99
N	68346	NASC PROJ MGMT O												
N	68382	NLEGSVCOFF WASH												
N	68392	EXEC SUPP VP QTR												
N	68469	HQMDOC CAA CTR												
N	68481	NBCSTSVC WASH DC												
N	68491	NREHC NASAPO DC												
N	68499	DIRNCPB ARL VA												
N	68589	STATE DEPT DC												
N	68726	NROTCU GW U												
N	68771	S AFIPOINSHSBETH												
N	68817	THEMULEPPROMAN23												
N	68822	ABFC FMP HOTEL												
N	68838	PM FLHOSP PML500												
N	68864	NCSTCEN ARL VA												
N	68871	CBU 422												
N	68876	NIPO WASH DC												
N	68879	DIR PROCUREMENT												
N	68896	NIMVSERV NCRG DC												
N	68925	PWKS CEN WASH DC												
N	68927	DFAS HDQTRS												
N	68933	CNSWC WASH DC												
N	68939	NISMC WASH DC												
N	68955	NSPACECOM D												
N	68965	NUSWCD W DC												
N	70092	NSECSTA WASH DC												
N	79106	UNPKO W DC												
N	G0195	RHA N096 RESP												
Navy total:			12568	12300	12389	11273	11158	11143	13295	13032	13346	11957	11695	11692
V	09301	VP 68												
V	30002	NSUPPUNSTDEPT CP												
V	32818	NELEXSECEN/COMSE												
V	32902	DISSSPARDUOUSEAC												
V	32998	NMIC OP SEADU CP												
V	32999	BUPERS SEA DUTY												
V	33401	BUPERS HQ MGMT												
V	35715	NSESYSCOM SDCOM												
V	43725	WHITE HOUSE COMA												
V	44463	BUPERS W NEUT D												
V	44633	SPAWAR TCP												
V	44945	NBCS MOB DT 1												
V	45439	NBCSTSVCMOB DT 2												
V	45940	PEO SHIP DEF SDC												
V	46003	COMSC NEUT DU CO												
V	46624	NMIC NEUDUCOMP												
V	47290	CNCTC SCND F T S												
V	47428	CNCTC DC N DUTY												
V	47477	CNSUPSYSCM D S C												
20889			0	0	0	21	21	21	0	0	0	22	22	22
20374			22	22	22	22	22	22	23	23	24	23	23	23
20501			10	10	10	10	10	10	11	11	11	11	10	11
20374			3	3	3	3	3	3	3	3	3	3	3	3
20374			32	32	32	32	32	32	34	34	34	34	34	34
20374			3	3	3	3	3	3	3	3	3	3	3	3
22203			24	24	24	24	24	24	25	25	26	25	25	25
20520			6	6	6	6	6	6	6	6	6	6	6	6
20052			9	9	9	9	9	9	10	10	10	10	9	9
20306			2	2	2	2	2	2	2	2	2	2	2	2
20362			2	2	2	2	0	0	2	2	2	2	0	0
20396			0	-4	-4	-4	-4	-4	0	-2	-3	-3	-3	-3
22202			6	6	6	6	6	6	6	6	6	6	6	6
20350			16	15	15	15	15	15	17	16	16	16	16	16
20374			43	45	45	45	45	45	45	48	48	48	47	47
20350			11	11	11	11	11	11	12	12	12	12	12	12
20370			0	0	0	0	0	0	0	0	0	0	0	0
20372			1	1	1	1	1	1	1	1	1	1	1	1
20374			10	9	9	9	9	9	11	10	10	10	9	9
22240			2	0	0	0	0	0	2	0	0	0	0	0
22242			3	3	3	3	3	3	3	3	3	3	3	3
22202			5	5	5	5	5	5	5	5	5	5	5	5
20375			18	18	18	18	18	18	19	19	19	19	19	19
22241			1	1	1	1	1	1	1	1	1	1	1	1
20393			121	123	123	123	123	123	128	131	133	131	129	129
20374			1	1	1	1	1	1	1	1	1	1	1	1
20372			-1	-1	0	0	0	0	0	0	0	0	0	0
20396			5	5	5	5	5	5	5	5	5	5	5	5
20521			110	110	110	110	110	110	116	117	119	117	115	116
20393			7	2	0	0	0	0	7	2	0	0	0	0
20370			23	23	23	23	23	23	24	24	25	24	24	24
20395			36	36	36	36	36	36	39	38	39	38	38	38
22215			14	13	13	13	13	13	15	14	14	14	14	14
20370			13	13	13	0	0	0	14	14	14	0	0	0
20362			1	1	1	1	1	1	1	1	1	1	1	1
20374			34	34	34	34	34	34	36	36	37	36	36	36
20370			2	2	2	0	0	0	2	2	2	0	0	0
20363			7	7	7	7	7	7	7	7	8	7	7	7
20374			3	3	3	0	0	0	3	3	3	0	0	0
20374			3	3	3	0	0	0	3	3	3	0	0	0
20362			3	3	3	3	3	3	3	3	3	3	3	3
20398			2	2	2	2	2	2	2	2	2	2	2	2
20395			2	2	2	2	2	2	2	2	2	2	2	2
20394			5	5	5	5	5	5	5	5	5	5	5	5
20394			5	5	5	5	5	5	5	5	5	5	5	5
22241			2	2	2	2	2	2	2	2	2	2	2	2

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S	UIC	Unit Name	Zip	Input to RAPS ----- Service-Supplied Endstrengths ---- FY94	FY95	FY96	FY97	FY98	FY99	RAPS Output ---- Reconciled Service Endstrengths --- FY94	FY95	FY96	FY97	FY98	FY99
V	47577	NASC PMS260 MD C	22243	7	6	6	0	0	0	7	6	6	0	0	0
V	47673	DIA SEA DUTY	20374	1	1	1	1	1	1	1	1	1	1	1	1
V	47690	NPETC N/D/C ALEX	22304	1	1	1	1	1	1	1	1	1	1	1	1
V	47710	NSUPUNSTDREINNUE	20814	2	2	2	2	2	2	2	2	2	2	2	2
V	47740	NCTC ER DT	20394	10	10	10	10	10	10	11	11	11	11	10	11
V	47826	OSIA WASH DC SDC	20041	57	57	57	57	57	57	60	60	61	61	60	60
V	48115	NTSIC NSMI/TT	20397	8	8	8	8	8	8	8	8	9	8	8	8
V	48159	AEGIS PG MGR	22242	43	37	37	38	38	38	45	39	40	40	40	40
V	49282	MEDINSPGEN ENL	20372	3	3	3	3	3	3	3	4	3	3	3	3
V	52893	VR 48	20396	43	43	43	43	43	43	45	46	46	46	45	45
V	52909	NIC ICE COMP	20395	9	8	8	9	9	9	10	8	9	10	9	9
V	53870	VAQ 209	20396	129	21	20	20	20	20	136	22	22	21	21	21
V	62852	NELEXSECEN WDC	20393	29	2	2	2	2	2	31	2	2	2	2	2
V	68019	CNCTC SPCOMMDIV	20394	1	1	1	1	1	1	1	1	1	1	1	1
Navy Afloat total:				620	471	468	443	443	443	652	496	503	468	462	464
M	03003	NAVY FIELD OPERA	20390	216	216	216	216	216	216	233	234	234	232	235	235
M	54005	NAVY DEPARTMENT	22214	274	274	274	274	274	274	296	297	297	294	298	298
M	54008	MCRRTC	22214	842	842	842	842	842	842	910	912	912	904	917	917
M	54026	MCRRTC	22214	1158	1158	1158	1158	1158	1158	1251	1253	1253	1241	1261	1261
M	54031	HQ CO MAR SPT BN	20393	31	31	31	31	31	31	34	34	34	33	34	34
M	54900	MARINE BARRACKS	20390	1097	1097	1097	1097	1097	1097	1186	1188	1188	1177	1194	1194
M	54980	HUMAN RESOURCES	20380	1	1	1	1	1	1	1	1	1	1	1	1
M	54982	PAROLEE TRACKING	20380	41	41	41	41	41	41	44	44	44	44	45	45
M	54993	MANPOWER INFORMA	20380	3	3	3	3	3	3	3	3	3	3	3	3
M	54995	MANPOWER PLANS &	20380	1	1	1	1	1	1	1	1	1	1	1	1
M	54997	HUMAN RESOURCES	20380	11	11	11	11	11	11	12	12	12	12	12	12
M	82090	I-I STF CO B 4TH	21701	13	13	13	13	13	13	14	14	14	14	14	14
M	82271	I-I STF RATCO/SU	20374	28	28	28	28	28	28	30	30	30	30	30	30
Marines total:				3716	3716	3716	3716	3716	3716	4015	4023	4023	3986	4045	4045
F			20014	192	192	192	192	192	192	194	192	188	188	184	183
F	AUAETF07W AU0JF07W 317	RECRUITING SQ ROCKVILLE	CTY 20850	1	1	1	1	1	1	1	1	1	1	1	1
F	AUAMCFFL7 AU1LFFL7 89	MEDICAL GP BETHESDA/NAVY	HSP 20014	4	4	4	4	4	4	4	4	4	4	4	4
F	AUELMF4JY AU3VF4JY 0	AFELM MWHIO ME FT DETRICK	AIN 21701	3	3	3	3	3	3	3	3	3	3	3	3
F	AUELMF5CW AU3VF5CW 0	AFELM DOD MED SPT ME FT DETRICK	AIN 21701	1	1	0	0	0	0	1	1	0	0	0	0
F	AUELMF8W6 AU3VF8W6 0	AFELM MED INTEL ME FT DETRICK	AIN 21701	1	1	1	1	1	1	1	1	1	1	1	1
F	AUELMFFXP AU3VFFXP 0	AFELM HLTH DATA ST ME FT DETRICK	AIN 21701	9	9	6	0	0	0	9	9	6	0	0	0
F	AUELMFP3T AU3VFP3T 0	AFELM AFMLO ME FT DETRICK	AIN 21701	20	20	20	18	18	18	20	20	20	18	17	17
F	BPAETF6NZ BPOJF6NZ 333	TRAINING SQ STERLING	CTY 20166	6	6	6	6	6	6	6	6	6	6	6	6
F	BPELMFBCP BP3VFBCP 0	AFELM DIA JI FT DETRICK	AIN 21701	5	5	5	5	5	5	5	5	5	5	5	5
F	HHELMF44K HH3VF44K 0	AFELM DNA SYST CE JM BETHESDA	CTY 22090	9	9	9	9	9	9	9	9	9	9	9	9
F	HHELMF4M5 HH3VF4M5 0	AFELM DISA JC MCLEAN	CTY 22101	23	23	23	23	23	23	23	23	22	22	22	22
F	HHELMF6PK HH3VF6PK 0	AFELM DISA/FLD AG JC RESTON	CTY 22090	26	26	26	26	26	26	27	26	25	25	25	25
F	HHELMF6QQ HH3VF6QQ 0	AFELM DISA JC RESTON	CTY 22090	9	9	9	9	9	9	9	9	9	9	9	9
F	HHELMFDOL HH3VFDOL 0	AFELM NOAA FE SILVER SPRING	CTY 20910	1	1	1	1	1	1	1	1	1	1	1	1
F	HHELMFDWW HH3VFDWW 0	AFELM DCA FIELD AC JC TYSONS CORNER	CTY 22103	2	2	2	2	2	2	2	2	2	2	2	2

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UIC	Unit Name		Zip	Input to RAPS ----- Service-Supplied Endstrengths ---- FY94	FY95	FY96	FY97	FY98	FY99	RAPS Output ---- Reconciled Service Endstrengths --- FY94	FY95	FY96	FY97	FY98	FY99
HHELMFF87 HH3VFF87 0	AFELM NOAA	FE ROCKVILLE CTY	20852	3	3	3	3	3	3	3	3	3	3	3	3
HHELMFGNO HH3VFGNO 0	AFELM DISA	JC RESTON CTY	22090	1	1	1	1	1	1	1	1	1	1	0	0
HHELMFLCX HH3VFLCX 0	AFELM DISA	JC RESTON CTY	22090	9	9	9	9	9	9	9	9	9	9	9	9
HHELMFLFN HH3VFLFN 0	AFELM JT TAC C3 AG	JC RESTON CTY	22090	3	3	3	3	3	3	3	3	3	3	3	3
HHELMFLR9			20889	0	0	0	0	0	0	0	0	0	0	0	0
HHELMFMP6 HH3VFMP6 0	AFELM DISA	JC MCLEAN CTY	22101	2	2	2	2	2	2	2	2	2	2	2	2
HHELMFP01 HH3VFP01 0	AFELM USUHS	ME BETHESDA CTY	20014	14	13	13	13	13	13	14	13	13	13	12	12
HHELMFRJQ HH3VFRJQ 0	AFELM DISA/FLD AG	JC RESTON CTY	22070	10	10	10	10	10	10	10	10	10	10	10	10
HHELMFZ27 HH3VFZ27 0	AFELM DISA/FLD AG	JC FT DETRICK AIN	21701	1	1	1	1	1	1	1	1	1	1	1	1
HNAETFOTF HNOJFOTF 318	RECRUITING	SQ FREDERICK CTY	21701	1	1	1	1	1	1	1	1	1	1	1	1
HNAETF9J2 HNOJF9J2 318	RECRUITING	SQ FREDERICK CTY	21701	1	1	1	1	1	1	1	1	1	1	1	1
WGELMFYXB WG3VFYXB 0	AFELM DODMMB	ME FT DETRICK AIN	21701	4	3	3	3	3	3	4	3	3	3	3	3
r Force total:				361	359	355	347	347	347	364	359	349	341	334	333
			20889	2	2	2	2	2	2	2	2	2	2	2	2
ast Guard total:				2	2	2	2	2	2	2	2	2	2	2	2
			20814	58	58	58	58	58	58	58	58	58	58	58	58
			20817	3	3	3	3	3	3	3	3	3	3	3	3
			20837	6	6	6	6	6	6	6	6	6	6	6	6
			20850	67	67	67	67	67	67	67	67	67	67	67	67
			20851	2	2	2	2	2	2	2	2	2	2	2	2
			20852	92	92	92	92	92	92	92	92	92	92	92	92
			20853	1	1	1	1	1	1	1	1	1	1	1	1
			20855	5	5	5	5	5	5	5	5	5	5	5	5
			20857	613	613	613	613	613	613	613	613	613	613	613	613
			20877	1	1	1	1	1	1	1	1	1	1	1	1
			20889	2	2	2	2	2	2	2	2	2	2	2	2
			20892	904	904	904	904	904	904	904	904	904	904	904	904
			20894	5	5	5	5	5	5	5	5	5	5	5	5
			20895	1	1	1	1	1	1	1	1	1	1	1	1
			20902	2	2	2	2	2	2	2	2	2	2	2	2
			20906	1	1	1	1	1	1	1	1	1	1	1	1
			20910	62	62	62	62	62	62	62	62	62	62	62	62
			21702	9	9	9	9	9	9	9	9	9	9	9	9
			22101	1	1	1	1	1	1	1	1	1	1	1	1
ther total:				1835	1835	1835	1835	1835	1835	1835	1835	1835	1835	1835	1835
atchment 0067 total:				19798	19438	19482	18333	18218	18203	20858	20472	20736	19258	19043	19042

2. Customer Base. In the table below, identify your active duty customers. Include both Naval and non-Naval active duty components. Begin with the largest activity and work down to the smallest. Include the customer Unit Identification Code (UIC).

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
NNMC Bethesda	00168	Bethesda,Maryland	
Dewitt ACH-Ft Belvoir	*	Ft. Belvoir, Virginia	
Kimbrough ACH-Ft. Meade	*	Ft. Meade, Maryland	
Malcolm Grow MC-Andrews	*	Camp Spring, Maryland	
NH Paxtuxent River	66098	Maryland	
NH Portsmouth	00183	Virginia	
Walter Reed AMC	*	Washington, D.C.	
Pennsylvania	**		
NH Jacksonville	00232	Florida	
Wyman Park USTF	*	Baltimore, Maryland	
NH Camp Lejeune	68093	Jacksonville, N.C.	
New York	**		
436th MED GRP	*	Dover, Delaware	
NH Groton	61726	Connecticut	

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*** Non-Navy Active Duty Components. UIC not available.**

**** NONCATCHMENT AREA - Combined geographical areas inside a state which are not contained in any catchment area.**

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
Walson ACH-	*	Ft Dix, NJ	
NH Philadelphia	68101	Philadelphia, Pennsylvania	
Maryland	**		
NH Newport	68086	New Port, Rhode Island	
NH Charleston	68094	South Carolina	
Maine	**		
NH Pensacola	00203	Florida	
New Jersey	**		
Virginia	**		
Georgia	**		
NH Great Lakes	00211	Michigan	
Michigan	**		
NH Millington	60002	Tennessee	
Patterson ACH	*	Ft. Monmouth	

Table 2 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
42nd MED GRP	*	Loring	
380th MED GRP	*	Plattsburgh	
NH Cherry PT	66094	North Carolina	
Ohio	**		
Florida	**		
NH Orlando	65492	Florida	
NH Beaufort	61337	South Carolina	
Cutler ACH	*	Ft. Devens	
31st MED GRP	*	Homestead	
Kenner ACH-	*	Ft Lee	
West Virginia	**		
Keller ACH	*	West Point	
56th MED GRP	*	Macdill	
Wisconsin	**		

Table 3 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
North Carolina	**		
Massachusetts	**		
Texas	**		
Minnesota	**		
NH Rota	66101	Spain	
McDonald ACH	*	Ft Eustis, Virginia	
4th MED GRP	*	Seymour Johnson, N. C.	
Louisiana	**		
Illinois	**		
Puerto Rico	**		
416th MED GRP	*	Griffiss	
NH Keflavik	68875		
NH Naples	66096	Italy	
St Johns USTF	*	Nassau Bay, Bahamas	

Table 4 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
Irwin ACH	*	Ft Riley	
NH Long Beach	68090	California	
Connecticut	**		
NH Roosevelt Roads	65428	Puerto Rico	
363rd MED GRP	*	Shaw	
Mississippi	**		
Iowa	**		
California	**		
Hawley ACH	*	Ft Ben Harrison	
Eisenhower AMC	*	Ft Gordon	
325th MED GRP	*	Tyndall	
Fitzsimons AMC	*	Denver, Colorado	
United Kingdom	*		
Tennessee	**		

Table 5 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
Missouri	**		
Kentucky	**		
NH Guantanamo Bay	61564	Cuba	
1st MED GRP	*	Langley	
354th MEd GRP	*	Myrtle Beach, South Carolina	
Keesler Medical Center	*		
Martin ACH	*	Ft Benning, Georgia	
Fox ACH	*	Redstone Arsenal	
South Carolina	**		
New Hampshire	**		
Kansas	**		
Arkansas	**		
Alabama	**		
654th MED GRP	*	Tinker	

Table 6 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
14th MED Squad	*	Columbus, Ohio	
Tripler AMC	*	Ft Shafter	
NH Lemoore	66095	California	
NH Camp Pendleton	68094	California	
58th MED GRP	*	Luke	
Bliss ACH	*	Ft Huachuca	
Oregon	**		
Montana	**		
Indiana	**		
Delaware	**		
Colorado	**		
48th MED GRP	*	Lakenheath	
20th MED GRP	*	Upper Heyford	
BH Sigonella	*		

Table 7 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
Pacific Medical USTF	*	Seattle, Washington	
NH Oak Harbor	66097	Washington	
USAF MED Ctr	*	Wright-Patterson	
5th MED GRP	*	Minot	
Womack AMC	*	Ft Bragg, North Carolina	
347th MED GRP	*	Moody	
646th MED GRP	*	Eglin	
Evans ACH	*	Ft Carson	
Letterman USA Hosp-Presidio	*		
Other Caribbean	*		
Canada	**		
Italy	**		
Wyoming	**		
Nebraska	**		

Table 8 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
7100th CSW MED	*	Wiesbaden, Germany	
USA HOSP	*	Landstuhl	
649th MED GRP	*	Hill	
NH Corpus Christi	00285	Texas	
Darnall ACH	*	FT Hood, Texas	
Moncrief ACH	*	Ft Jackson,	
2nd MED GRP	*	Barksdale	
Ireland ACH	*	Ft Knox	
Munson ACH	*	Ft Leavenworth Kansan	
USAF MED CTR Scott	*		
653th MED GRP	*	Robins	
Winn ACH	*	Ft Stewart, Georgia	
NH San Diego	00259	California	
Hays ACH	*	Ft Ord	

Table 9 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
82nd FTW Hosp	*	Williams	
Turkey	**		
Portugal	**		
Vermont	**		
Arizona	**		
Alaska	**		
36th MEd GRP	*	Bitburg, Germany	
NH Yokosuka	45123	Japan	
NH Guam	68096	Guam	
NH Subic Bay			
USA HOSP	*	Nuernberg	
USA HOSP	*	Heidelberg	
USA HOSP	*	Frankfurt	
Madison AMC	*	Ft Lewis	

Table 10 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
Wilford Hall MED CTR	*	Lackland	
R. Thompson STRAT Hosp	*	Carswell	
396th MED GRP	*	Sheppard	
Brooke AMC	*	Ft Sam Houston	
Wm Beaumont AMC	*	Ft Bliss	
Reynolds ACH	*	Ft Sill	
319th MED GRP	*	Grand Forks	
49th MEd GRP	*	Holloman	
542th MED GRP	*	Kirtland	
Ehrling Berquist Hosp	**	Offutt	
351st MEd GRP	*	Whiteman	
Bayne-Jones ACH	*	Ft Polk	
Chanute TTC Hosp	*		
45th MED GRP	*	Patrick	

Table 11 of 12

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)
USAF Academy Hosp	*		
NH Oakland	00619	California	
831th MED GRP	*	George	
650th MEd GRP	*	Edwards	
BH NAVSTA	*	ADAK	
502nd MED GRP	*	Maxwell	
Lyster ACH	*	FT Rucker	
Nobel ACH	*	Ft Mccellan	

Table 12 of 12

3. Workload. Identify your FY 1994 workload (this should include both completed and projected workload through the end of the Fiscal Year) as indicated in the table below by beneficiary type. Use the same categorization and definitions as that used in the MEPRS Manual (DoD 6010.13-M).

BENEFICIARY TYPE	ADMISSIONS	OUTPATIENT VISITS	AVERAGE LENGTH OF STAY	AVG DAILY PATIENT LOAD
ACTIVE DUTY N/MC	5,044	173,955	4.83	74.83
ACTIVE DUTY NON N/MC	NA	NA	NA	NA
TOTAL ACTIVE DUTY	5,044	173,955		74.83
FAMILY OF AD	5,212	123,452	2.85	44.17
RETIRED AND FAMILY MEMBERS UNDER 65	6,052	162,731	5.55 AVG	48.57 AVG
RETIRED AND FAMILY MEMBERS OVER 65	NA	NA	NA	NA
OTHER	504	101,006	4.27	7.50
TOTAL	16,812	561,144		223.63

What is your occupancy rate for FY 1994 to date ? **65.39**

Note: See Notes and Calculations on next page.

NOTES and CALCULATIONS:

(a) Used SEARS report to calculate number of Outpatient Visits (OPVs) and Admissions (ADMs). Report covered 6-months (Oct 93 to Mar 94).

ADM and OPV calculations are from RCMAS FY93 actual dispositions, determined percentage of Retired and Family Members under 65, Family Member over 65, Active Duty Navy/Marine Corps and Active Duty Nonnavy/Marine Corps. These percentages are applied to projected admissions from EIS.

OPV calculation Average numbers of OPV/month 46,762 x 12 months = 561,144. From FY93 actual OPVs, determine percentage of Beneficiaries (31% ACDU, 22% DEP ACDU, 29% RET/RET DEP, 18% Unknown/other) and apply those percentages to FY94 projected OPVs. [FY94 projected 561,144 x 31% = 173,955;.. x 22% = 123,452; ..x 29% = 162,731;.. x 18% = 101,006]

ADM calculation Average number of ADM/month 1,401 x 12 months = 16,812. From FY93 actual ADMs, determine percentage of Beneficiaries (30% ACDU, 31% DEP ACDU, 36% RET/RET DEP, 3% Unknown/other) and apply those percentage to FY94 projected ADMs. [FY94 projected 16,812 x 30% = 5,044; .. x 31% = 5,212; .. x 36% = 6,052; .. x 3% = 504]

(b) Source for Occupancy rate, ALOS and Avg Daily patient Load - EIS

Revised pg

NOTES and CALCULATIONS:

(a) Used SEARS report to calculate number of Outpatient Visits (OPVs) and Admissions (ADMs). Report covered 6-months (Oct 93 to Mar 94).

OPV calculation Average numbers of OPV/month 46,762 x 12 months = 561,144. From FY93 actual OPVs, determine percentage of Beneficiaries (31% ACDU, 22% DEP ACDU, 29% RET/RET DEP, 18% Unknown/other) and apply those percentages to FY94 projected OPVs. [FY94 projected 561,144 x 31% = 173,955;.. x 22% = 123,452; ..x 29% = 162,731;.. x 18% = 101,006]

ADM calculation Average number of ADM/month 1,401 x 12 months = 16,812. From FY93 actual ADMs, determine percentage of Beneficiaries (30% ACDU, 31% DEP ACDU, 36% RET/RET DEP, 3% Unknown/other) and apply those percentage to FY94 projected ADMs. [FY94 projected 16,812 x 30% = 5,044; .. x 31% = 5,212; .. x 36% = 6,052; .. x 3% = 504]

(b) Source for Occupancy rate, ALOS and Avg Daily patient Load - EIS

Footnote 1: - Includes Retired and Family Members over 65. Unable to break out.
- Also Avg Daily Patient Load and ALOS are provided as an average. [Separate Avg Daily Patient Load for RET (61.37), DEP RET (35.77); ALOS RET (5.82), DEP RET (5.27)]

4. Projected Workload. Complete the following tables for your projected workload. Please show and develop any assumptions and calculations used to complete the table. Be sure to note any impact prior closure and realignment decisions have had on your facility.
Please be sure to include any impact your participation in the managed care initiative (TRICARE), previous BRAC actions, and force structure reductions will have on your workload.

	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
OUTPAT. VISITS	479,335	479,232	479,486	479,473	479,465	N/A	N/A
ADMISS.	15,628	15,655	15,531	15,508	15,478	N/A	N/A

Please show all assumptions and calculations in the space below:

Outpatient Visits: From RAPS Model Utilization Project Report. Based upon FY92 Base Year Utilization for Direct Care Outpatient Visits.

Admissions: Data source is DMIS/RAPS which provides information by disposition as opposed to admissions.

5. Medical Support. Indicate in the table below all the medical support you provide that is not direct patient care, and identify the time spent providing such support (i.e. food service inspections, medical standby for physical fitness tests, flight operations, field training,rifle range, MWR support for sporting events, etc.).

NON-PATIENT CARE SUPPORT	TIME SPENT/ QTR	STAFF NEEDED/ EVENT
Semi-Annual PRT Administration	110 hours	8
Semi-Annual PRT Preparation	380 hours	2
Semi-Annual PRT Follow-up	240 hours	2
Softball	190 hours	3
Basketball	192 hours	4
Volleyball	96 hours	3
5K and other Runs	20 &hours	6
Aerobics class	48 hours	2
Readiness	4810 hours	7

6. Graduate Medical Education. In the table provided, identify all the training programs (to include transitional internships and fellowships) at your facility and the numbers graduated per year. Also identify major non-physician training programs (such as OR nurse, nurse anesthetist, etc.). Be sure to take into account any planned program changes, and prior base closure and realignment decisions.

PROGRAM	NUMBER TRAINED BY FISCAL YEAR							
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Internship Programs:								
Internal Medicine	23	21*	21*	21*	21*	21*	21*	21*
Obstetrics and Gynecology	4	4*	4*	4*	4*	4*	4*	4*
Pediatrics	5	5*	5*	5*	5*	5*	5*	5*
Psychiatry	5	6*	6*	6*	6*	6*	6*	6*
Surgery	13	13*	13*	13*	13*	13*	13*	13*
Transitional	12	12*	12*	12*	12*	12*	12*	12*
Residency and Fellowship Programs:								
Anatomic and Clinical Pathology	2	3	2	1	2*	2*	2*	2*
Cytopathology	1	1*	1*	1*	1*	1*	1*	1*
Hematopathology	1	1*	1*	1*	1*	1*	1*	1*
Anesthesiology	4	6	6	6*	6*	6*	6*	6*

*** Actual trainee numbers are not available for these years. Numbers provided are based on total training positions authorized for NNMC.**

Table continued on following two pages.

PROGRAM	NUMBER TRAINED BY FISCAL YEAR							
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Dermatology	3	3	3	3*	3*	3*	3*	3*
Diagnostic Radiology	4	6	5	5	5*	5*	5*	5*
Imaging	1	1*	1*	1*	1*	1*	1*	1*
Internal Medicine	6	7	8*	8*	8*	8*	8*	8*
Cardiovascular Diseases	2	2	2	2*	2*	2*	2*	2*
Critical Care	1	2*	2*	2*	2*	2*	2*	2*
Endocrinology & Metabolism	1	1	2*	2*	2*	2*	2*	2*
Gastroenterology	1	1	1	2*	2*	2*	2*	2*
Hematology/Oncology	1	1	2	2*	2*	2*	2*	2*
Infectious Diseases	2	1	2*	2*	2*	2*	2*	2*
Pulmonary Medicine	1	1	2*	2*	2*	2*	2*	2*
Neurology	2	3	3	3*	3*	3*	3*	3*
Neurosurgery	1	1	0	2	2	1*	1*	1*
Nuclear Medicine	0	1	1*	1*	1*	1*	1*	1*
Obstetrics and Gynecology	4	4	4	4*	4*	4*	4*	4*
Ophthalmology	4	4	4	4*	4*	4*	4*	4*
Orthopaedics	3	3	4	3	3*	3*	3*	3*
Otolaryngology	2	2	2	2	2*	2*	2*	2*
Pediatrics	4	4	4*	4*	4*	4*	4*	4*
Psychiatry	1	3	4	4*	4*	4*	4*	4*

PROGRAM	NUMBER TRAINED BY FISCAL YEAR							
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Surgery	3	3	3	3	3*	3*	3*	3*
Urology	1	1	1	1	1*	1*	1*	1*
**** Other Medical Education Programs:**								
General Practice in Dentistry	5	5*	5*	5*	5*	5*	5*	5*
Oral and Maxillofacial Surgery	1	1	1	1	1*	1*	1*	1*
Podiatry	1	1*	1*	1*	1*	1*	1*	1*
Psychology	8	8*	8*	8*	8*	8*	8*	8*

* Actural trainee numbers are not available for these years. Numbers provided are based on total training positions authorized for NNMC.

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6a. Graduate Medical Education. Complete the following table for each Graduate Medical Education program that requires accreditation by the Accreditation Council for Graduate Medical Education (ACGME):

PROGRAM	STATUS[1]	CERT.[2]	COMMENTS[3]
Anatomic and Clinical Pathology	F	100%	
Cytopathology	Pro-visional	No Cert. Board	Provisional accreditation is granted for initial accreditation of a program.
Hematopathology	F	100%	
Anesthesiology	F	100%	
Dermatology	F	100%	
Diagnostic Radiology	F	100%	
Internal Medicine	F	100%	
Cardiovascular Diseases	F	100%	
Critical Care	F	0%	Program 1 yr old. Fellows not eligible to sit for certification board.
Endocrinology and Metabolism	F	100%	
Gastroenterology	F	100%	
Hematology/ Oncology	F	66%/ 100%	
Infectious Diseases	F	0%	Program 1 yr old. Fellows not eligible to sit for certification board.
Pulmonary Medicine	F	100%	
Neurology	F	100%	

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6a. Graduate Medical Education. Complete the following table for each Graduate Medical Education program that requires accreditation by the Accreditation Council for Graduate Medical Education (ACGME):

PROGRAM	STATUS[1]	CERT.[2]	COMMENTS[3]
Anatomic and Clinical Pathology	F	Not avail-able	
Cytopathology	Pro-visional	N/A	Provisional accreditation is granted for initial accreditation of a program.
Hematopathology	F	N/A	
Anesthesiology	F	N/A	
Dermatology	F	N/A	
Diagnostic Radiology	F	N/A	
Internal Medicine	F	N/A	
Cardiovascular Diseases	F	N/A	
Critical Care	F	N/A	
Endocrinology and Metabolism	F	N/A	
Gastroenterology	F	N/A	
Hematology/ Oncology	F	N/A	
Infectious Diseases	F	N/A	
Pulmonary Medicine	F	N/A	
Neurology	F	N/A	

PROGRAM	STATUS[1]	CERT.[2]	COMMENTS[3]
Neurosurgery	F	N/A	
Nuclear Medicine	F	N/A	
Obstetrics and Gynecology	F	N/A	
Ophthalmology	F	N/A	
Orthopaedics	F	N/A	
Otolaryngology	F	N/A	
Pediatrics	F	N/A	
Psychiatry	F	N/A	
Surgery	F	N/A	
Transitional	F	N/A	
Urology	F	N/A	

[1] Use F for fully accredited, P for probation, and N for not accredited.
[2] List the percentage of program graduates that achieve board certification.
[3] Complete this section for all programs that you entered a P or N in the Status column. Indicate why the program is not fully accredited and when it is likely to become fully accredited.

FACILITIES

7. Facilities Description. Complete the following table for all buildings for which you maintain an inventory record. Use only one row for each building. Provide the 5 digit category code number (CCN) where possible. Do not include any buildings that would receive their own data calls (such as a Branch Medical Clinic):

FACILITY TYPE (CCN)	BUILDING NAME/USE[1]	SQUARE FEET	AGE (IN YEARS)	CONDITION CODE[2]
610-10	1 Medical Facility	241,594	53	Adequate
170-25	2 Medical Facility	150,309	53	Adequate
610-10	3 Medical Facility	38,612	51	Substandard
610-10	4 Medical Facility	16,710	53	Adequate
610-10	5 Medical Facility	38,612	51	Adequate
610-10	6 Medical Facility	20,189	52	Adequate
510-10	7 Medical Facility	65,907	31	Adequate
310-31	8 Medical Facility	83,371	31	Adequate
510-10	9 Medical Facility	584,559	14	Adequate
510-10	10 Medical Facility	322,133	14	Adequate
724-11	11 BOQ	72,946 ?	53 ?	Substandard
724-40	Enlisted Men's Barracks/ NPPSO	53,982 ?	51 ?	Substandard
219-10	13 Public Works Shops	18,593	53	Adequate
610-10	14 Public Works Administration	27,558	52	Adequate
213-56	15 Public Works Shops	11,760	50	Adequate
821-09	16 Utility Plant	50,028	53	Adequate
730-10	20 Fire Station	3,690	50	Adequate
740-60	23 Officers' Club	89,844	49	Adequate
690-10	30 Flagpole	1 EA.	52	Adequate
721-11	50 BEQ	48,004	26	Substandard
740-30	51 Navy Exchange Service	2,465	22	Adequate
740-20	52 Navy Guest Lodge	13,260	23	Adequate
730-80	54 Parking Garage/ Supply Warehouse	330,040	17	Adequate
730-80	55 Parking Garage/ Child Care Center	386,107	14	Adequate

Table continued on following two pages.

FACILITY TYPE (CCN)	BUILDING NAME/USE[1]	SQUARE FEET	AGE (IN YEARS)	CONDITION CODE[2]
740-40	56 Bowling Alley	18,382	15	Adequate
740-01	57 Navy Exchange	44,210	15	Adequate
740-31	58 Navy Exchange Gas Station	2,200	15	Adequate
721-11	60 BEQ	105,848 ✓	8 ✓	Adequate
N/A	125 Vacant - Demolished	37,678	0	Inadequate
310-27	139 General Warehouse	6,500 ✓	49 ✓	Adequate
610-10	141 Teaching Facility	42,334	50	Inadequate
219-77	143 Public Works Maintenance Storage	1,680	50	Adequate
441-10	147 General Warehouse	4,000 ✓	45 ✓	Adequate
441-10	148 General Warehouse	4,091 ✓	45 ✓	Adequate
219-20	149 Pavement Grounds Equipment Shed	4,000	45	Adequate
441-10	152 Navy Exchange Central Warehouse	4,000	43	Adequate
441-10	153 General Warehouse	4,000 ✓	43 ✓	Adequate
219-77	154 Public Works Maintenance Storage	8,000 ✓	43 ✓	Adequate
214-20	155 Auto Vehicle Shop	4,020	42	Substandard
750-10	159 Tennis Court	2 EA.	46	Adequate
750-10	160 Tennis Court	3 EA.	46	Adequate
750-20	161 Softball Fields	1 EA.	49	Adequate
123-10	163 Filling Station	2 OL.	47	Adequate
730-65	188 Underground Shelter	1,225	32	Adequate
111-20	200 Helicopter Landing Pad	2,500SY	33	Adequate
123-10	207 Filling Station	20 OL.	32	Adequate
219-20	225 Pavement Grounds Equipment Shed	4,000	26	Adequate

FACILITY TYPE (CCN)	BUILDING NAME/USE[1]	SQUARE FEET	AGE (IN YEARS)	CONDITION CODE[2]
441-10	239 General Warehouse	4,000 ✓	21 ✓	Adequate
610-10	241 Administration (ROICC)	5,970	19	Adequate
441-10	242 General Warehouse	1,640 ✓	18 ✓	Adequate
740-78	257 Recreation Pavilion	2,752	14	Adequate
730-75	259 Public Toilet	361	14	Adequate
740-31	61 BEQ	83,160 ✓	1 ✓	Adequate
740-20	24 Fisher House I	4,864 ✓	3 ✓	Adequate
740-20	25 Fisher House II	4,864 ✓	1 ✓	Adequate

[1] Use refers to patient care, administration, laboratory, warehouse, power plant, etc.

[2] This should be based on NAVFACINST 11011.44E Shore Facilities Planning Manual and the condition recorded should be recorded as Adequate, Substandard, or Inadequate. Chapter 5 of NAVFACINST 11011.44E provides guidance on this scoring system.

7a. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

1. Facility Type/Code:
2. What makes it inadequate?
3. What use is being made of the facility?
4. What is the cost to upgrade the facility to substandard?
5. What other use could be made of the facility and at what cost?
6. Current improvement plans and programmed funding:
7. Has this facility condition resulted in "C3" or "C4" designation on your BASEREP?

7a. Answer to Inadequate Facilities

1. Building 141: Teaching Facility, cat code 74076

2. Building 141 houses the Naval School of Health Sciences and was constructed in 1944 as a semi-permanent facility. Mechanical and electrical systems are extremely outdated and frequently malfunction. Large quantities of asbestos containing materials are present.

3. Building is currently used as a consolidated training facility.

4. Demolition of current facility and construction of a new training facility is estimated to cost $9.8 million.

5. N/A

6. Improvement project is included in Master Plan and is detailed in MILCON p-963. Project is currently unprogrammed.

7. A "C3" designation was assigned to this facility in most recent BASEREP.

7b. Capital Improvement Expenditures. List the project number, description, funding year, and value of the **capital improvements at your facility completed (beneficial occupancy) during 1988 to 1994.** Indicate if the capital improvement is a result fo BRAC realignments or closures.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
P-912	BEQ, BLDG 61	FY91	$8.6 Mil
P-947	Addition - Navy Lodge	FY92	$3.7 Mil
	Fisher House I	Donated	$580 K
	Fisher House II	Donated	$600 K

7c. Planned Capital Improvements. List the project number, funding year, and value of the **non-BRAC related capital improvements planned** for years 1995 through 1997.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
FA-05	Research Facility Addition (AFRRI)	HOLD	
P-086	Blood Research Facility (NMRI)	HOLD	
P-923	Renovate BEQ, BLDG 50	FY93	$2.6 Mil
P-935	Child Care Development Center	PY94	$2.7 Mil
P-931	Patient Parking Structure	FY96	$10.9 Mil

7d. Planned Capital Improvements. List the project number, description, funding year, and value of the **BRAC related capital improvements planned** for 1995 through 1999.

Currently, there are no known BRAC related capital improvements planned for 1995 through 1997.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
N/A	N/A	N/A	N/A

7e. Please complete the following Facility Condition Assessment Document (FCAD) DD Form 2407: Instructions follow the form.

DD Form 2407 on following page.

7e. R

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO
1. FACILITY NAME:	National Naval Medical Center, Bethesda, MD			
2. UIC N00168	3. CATEGORY CODE 510-10	4. NO. OF BUILDINGS 5		
5. SIZE	A. GSF 1,320,528	B. NORMAL BEDS 600-700		C.DTRS
6. LOCATION	A. CITY Bethesda		B.STATE MD	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	75	1	24	B14,A09	
(2) ADMINISTRATION	99	1	0	A01, A02, A09	
(3)CENTRAL STERILE SVCS.	99	1	0	C15, A02	
(4)DENTAL	99	1	0	A04, B12	
(5) EMERGENCY SVCS.	99	1	0	B17	
(6) FOOD SERVICES	99	1	0	A02, A01, B06	
(7)LABORATORIES	99	1	0	A01	
(8) LOGISTICS	98	2	0	A17	
(9) INPATIENT NURSING UNITS	99	1	0	A09, F01, C12	
(10) LABOR-DEL-NURSERY	99	1	0	B17	
(11) OUTPATIENT CLINICS	99	1	0	A09, A02, A11, F01	
(12) PHARMACY	99	1	0	A11, A02	
(13) RADIOLOGY	99	1	0	A04	
(14) SURGICAL SUITE	99	1	0	A01	
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	96	4	0	A09	
(B) HVAC	99	1	0	A01	
(C) PLUMBING	99	1	0	A02	
(D) ELECTRICAL SVCS.	99	1	0		

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DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO
1. FACILITY NAME: National Naval Medical Center, Bethesda, MD				
2. UIC N000168	3. CATEGORY CODE	4. NO. OF BUILDINGS 75		
5. SIZE	A. GSF	B. NORMAL BEDS 600-700		C.DTRS
6. LOCATION	A. CITY Bethesda		B.STATE MD	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	70	10	20	B14,A09	
(2) ADMINISTRATION	90	N/A	10	B17	
(3)CENTRAL STERILE SVCS.	80	20	N/A	A17	
(4)DENTAL	90	5	5	B17,A04	
(5) EMERGENCY SVCS.	90	N/A	10	B17,A09	
(6) FOOD SERVICES	80	10	10	A03,B17,C17	
(7)LABORATORIES	90	5	5	B17,A01,C12	
(8) LOGISTICS	60	N/A	40	C17	
(9) INPATIENT NURSING UNITS	95	5	N/A	A01,A08	
(10) LABOR-DEL-NURSERY	90	5	5	A01,B17	
(11) OUTPATIENT CLINICS	90	5	5	A01,B17,C15	
(12) PHARMACY	95	N/A	5	B17	
(13) RADIOLOGY	90	5	5	B17,A01,A02, A06	
(14) SURGICAL SUITE	95	5	N/A	A01	
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100	N/A	N/A		
(B) HVAC	90	5	5	A01	
(C) PLUMBING	98	2	N/A	A02	
(D) ELECTRICAL SVCS.	95	5	N/A	A03	
(E) ELECTRICAL DISTRIBUTION	98	N/A	2	C06	
(F) EMERGENCY POWER	95	5	N/A	A07	

(E) ELECTRICAL DISTRIBUTION	99	1	0	C06	
(F) EMERGENCY POWER	99	1	0	A07	

FORM INSTRUCTIONS

1. This form is not intended to be used as detailed engineering evaluation of the condition of the facilities. It is primarily designed to assist in assessing the adequacy and condition of Medical/Dental Facilities. Complete only one form for all of your facilities.

2. The Functions/Systems should be evaluated on a consolidated basis for the entire facility.

3. Not more than 4 deficiencies should be identified in the Deficiency Codes column for each item listed under the Function/System column.

4. Fill in N/A (not applicable) where certain Function/System is not present in the facility. For example, Inpatient Nursing Units and Labor-Delivery-Nursery are not applicable to Clinics.

5. Numbers under % Adequate, % Substandard, % Inadequate must total 100 for each function/System.

6. After completion, the form must be signed by the Commander/Commanding Officer/Officer-in-Charge of the facility.

7. Use DoD Standard Data Element Codes for State when entering codes in item 6.

DEFINITIONS

CATEGORY CODE - Facility Category Code is a numeric code used to identify a particular use of Military Department's real property for Hospital and other Medical Facilities usage (i.e., building, structure or utility). The first three digits of the code are a DoD standard (DoDI 4165.3); the fourth, fifth and sixth (if applicable) digits are added to provide more definitive categorization of the Military Department's facilities.

CONSTRUCTION TYPE - Type is either Permanent, Semi-permanent, or Temporary construction at the time building was built.

% ADEQUATE - Percent Adequate is the capacity of a facility or portion thereof, in percentage form, that is in adequate condition and associated with a designated function (USE). Adequate is defined as being capable of supporting the designated function without a need for capital improvements.

% SUBSTANDARD - Percent Substandard is the capacity of a facility or portion thereof, in percentage form, that is in substandard condition and associated with a designated function (USE). Substandard is defined as having deficiencies which prohibit of severely restrict, or will prohibit or severely restrict within the next five years due to expected deterioration , the use of a facility for its designated function. Substandard is further defined as having deficiencies which can be economically corrected by capital improvements and/or repairs.

% INADEQUATE - Percent Inadequate is the capacity of a facility of portion thereof, in percentage form, that is in inadequate condition and associated with a designated function (USE). Inadequate is defined as having deficiencies due to physical

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FORM INSTRUCTIONS

1. This form is not intended to be used as detailed engineering evaluation of the condition of the facilities. It is primarily designed to assist in assessing the adequacy and condition of Medical/Dental Facilities. Complete only one form for all of your facilities.

2. The Functions/Systems should be evaluated on a consolidated basis for the entire facility.

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5. Numbers under % Adequate, % Substandard, % Inadequate must total 100 for each function/System.

6. After completion, the form must be signed by the Commander/Commanding Officer/Officer-in-Charge of the facility.

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DEFINITIONS

CATEGORY CODE - Facility Category Code is a numeric code used to identify a particular use of Military Department's real property for Hospital and other Medical Facilities usage (i.e., building, structure or utility). The first three digits of the code are a DoD standard (DoDI 4165.3); the fourth, fifth and sixth (if applicable) digits are added to provide more definitive categorization of the Military Department's facilities.

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% SUBSTANDARD - Percent Substandard is the capacity of a facility or portion thereof, in percentage form, that is in substandard condition and associated with a designated function (USE). Substandard is defined as having deficiencies which prohibit of severely restrict, or will prohibit or severely restrict within the next five years due to expected deterioration , the use of a facility for its designated

function. Substandard is further defined as having deficiencies which can be economically corrected by capital improvements and/or repairs.

% INADEQUATE - Percent Inadequate is the capacity of a facility of portion thereof, in percentage form, that is in inadequate condition and associated with a designated function (USE). Inadequate is defined as having deficiencies due to physical deterioration, functional inadequacy or hazardous location or situation which prohibit or severely restrict, or will prohibit or severely restrict within the next five years, the use of a facility for its designated function. Inadequate is further defined as having deficiencies which cannot be economically corrected to meet the requirements of the designated function.

DEFICIENCY CODE - Code is a three character code indicating the type of deficiency existing in a facility or portion thereof that is in a substandard or inadequate condition and associated with a designated function (USE). The first character of the code indicates one of the six types of deficiencies. The next two characters specify the facility component(s) or related items which are deficient.

(1) Deficient Status of Condition Types - first character
- A - Physical Condition
- B - Functional or Space Criteria
- C - Design Criteria
- D - Location or Siting Criteria
- E - Nonexistence
- F - Total Obsolescence or Deterioration

(2) Facility Components or Related Items - last two characters
- 01 - Heating, Ventilating and Air Conditioning (HVAC)
- 02 - Plumbing Fixtures
- 03 - Fire Protection/Life Safety Code
- 04 - Medical Gases
- 05 - Lighting Fixtures
- 06 - Power Capacity
- 07 - Emergency Generators
- 08 - Communications
- 09 - Building or Structure (total)
- 10 - Seismic Design
- 11 - Roof/Ceiling
- 12 - Building Interior/Configuration
- 13 - Sound Proofing/Excessive Noise
- 14 - Compliance of Installation with Master Plan
- 15 - OSHA Deficiency
- 16 - JCAH Deficiency
- 17 - Functionality
- 18 - Site Location
- 19 - Mission of the Base
- 20 - None

7f. Please provide the date of your most recent Joint Commission on Accreditation of Healthcare Organizations (JCAHO) survey and indicate the status of your certification. Also record your Life Safety Management score from that survey.

DATE OF SURVEY: **17 JUL 92**

FULL ACCREDITATION: **Yes - With Commendation**

LIFE SAFETY MANAGEMENT SCORE: **2** (Record as 1,2,3,4,or 5)

LOCATION:

8. Geographic Location. How does your geographic location affect your mission? Specifically, address the following:

a. What is the importance of your location relative to the clients supported?

The Medical Center is located at 6901 Wisconsin Ave in Bethesda, Maryland across the street from the National Institutes of Health. The campus houses 10 major research and administrative commands, including the Uniformed Services University of Health Sciences. Centrally located in the National Capitol Area, it is easily accessible from the beltway (I-495), Wisconsin Ave, Connecticut Ave and Rock Creek Park. Due to the Medical Center's close proximity to the Nation's Capitol and the quality of services provided, it is designated as the "President Hospital."

b. What are the nearest air, rail, sea and ground transportation nodes?

Air: Baltimore-Washington International Airport, Dulles Int'l Airport and Andrews AFB.
Sea: Baltimore Harbor
Rail: Union Station, Washington, D.C.
Ground: Metrorail, Bethesda, MD.

c. Please provide the distance in miles that your facility is located from any military or civilian airfield that can accommodate a C-9 aircraft.

Distance (in miles):

Dulles Int'l Airport:	approx. 20 miles.
Balt.-Wash. Int'l Airport:	approx. 25 miles
Andrews AFB:	approx. 35 miles.

d. What is the importance of your location given your mobilization requirements?

NNMC is located 44 miles from the USNS COMFORT, docked in Baltimore, MD.

e. On the average, how long does it take your current clients/customers to reach your facility?

Patients come from the local area, extended areas, as well as overseas locations. Patients residing in the National Capitol Area can normally access NNMC in approximately 15-45 minutes depending on time of day and traffic conditions.

9. Manpower and recruiting issues. Are there unique aspects of your facility's location that help or hinder in the hiring of qualified civilian personnel?

The National Naval Medical Center (NNMC) is centrally located near major highways and offers a wide variety of employment opportunities. In addition, NNMC offers a well maintained working environment with the most advanced technology and equipment available.

FEATURES AND CAPABILITIES

10. Capabilities. What would be the impact on the Navy and Marine Corps if the capabilities of your facility were to be lost? Answer this question in terms of the unique capabilities of your staff, equipment and facility.

The NNMC is the largest teaching hospital in the Department of the Navy (DoN), strategically located in the Washington DC metropolitan area. It is recognized as the "Flagship of Navy Medicine" with significant Graduate Medical Education (GME) responsibilities. Numerous affiliations exist with prestigious medical schools, National Institutes of Health, civilian medical centers and other MTFs within the metropolitan area. These affiliations provide unparalleled and invaluable training opportunities for students, as well as sharing the expertise of staffs of all facilities, significantly improving the quality of health care for all beneficiaries.

The NNMC maintains a liaison with shore commands and units of the operating forces. Patients are referred to NNMC from worldwide locations for medical, dental, and surgical care. A total of 15,500 dispositions were reported by NNMC in 1993. Of that number 5,106 (33%) were patients specifically assigned to NNMC catchment area and 10,444 (67%) were for patients outside of NNMC's assigned catchment area.

The NNMC has 36 Graduate Medical Education programs certified by the Residency Review Council with approximately 136 residents and fellows enrolled in training.

The NNMC is renowned in many fields. One example is the Blood Bank, which is one of 54 reference laboratories world-wide and represents the single force for American Association of Blood Banks accreditation within DoN. In addition, NNMC specialty areas are frequently consulted for their expertise by individual physicians and institutions.

The biomedical research accomplished at NNMC and funding received through affiliations, such as the National Cancer Institute and the Jackson Foundation, provide beneficiaries with the latest research and state-of-the-art treatment for life threatening diseases and illnesses. Most significantly, NNMC operates the East coast DoN program for screening active duty members and beneficiaries for the Human Immunodeficiency Virus Type-1 (HIV) and is the site for Diagnostic Laboratory Services for the DoN Human Immunodeficiency Virus Type-1 Testing Program (the only such program in the Navy).

The NNMC also has a major operational readiness and contingency role in Navy Medicine. In addition to providing the core staff for mobilizing the USNS COMFORT, NNMC provides support for MMART teams,

surgical teams, SPRINTS teams and several ships and FMF units.

10a. If your facility were to close without any change in beneficiary population would the remaining local health care infrastructure be able to absorb the additional workload? Please provide supporting information to your answer.

There are 23,122 active duty and 63,408 dependents and retired members assigned to the NNMC catchment area. All active duty and at least 40,752 of the active duty dependents, retirees and their dependents use NNMC Bethesda for their care.

In 1993, NNMC reported 15,500 total dispositions. Of the total, 10,444 dispositions were from outside NNMC's catchment area.

Walter Reed Army Medical Center (WAMC), Dewitt Army Community Hospital (ACH), Kimbrough ACH and USAF Malcolm Grow Medical Center are the only other MTFs within the National Capitol Area. Based on a capabilities study, conducted by the TRISERVICE Office, these MTFs do not have the necessary excess capacity to absorb NNMC's total active duty, retired and dependent workload.

If unable to access care in one of the MTFs, active duty dependents, retirees and their dependents can obtain care from civilian providers (80 hospitals and 12,136 primary and specialty care givers) in the Washington Metropolitan area, but at a considerable cost to DoD and Medicare.

Historically, NNMC has also been the site of choice for medical care received by members of Congress and a special unit has been specifically designed to provide medical care for the President and his family. Closure of NNMC would require costly construction of a similar unit at another location.

10b. If your facility were to close and the active duty and their families were to leave the area would the local community health care system be able to care for the residual eligible population? Please provide supporting information to your answer.

There are approximately 86,530 beneficiaries in NNMC's catchment area (Active Duty: 23,122; Family of Active Duty: 22,301: Retired/Retired Family Members/Other: 41,107). If NNMC's active duty personnel (2,289) and their families (3,434) were transferred out of the area, there would be a residual population of 80,807 beneficiaries plus the 10,444 patients referred to the NCA from outside its catchment area.

Walter Reed Army Medical Center (WAMC), Dewitt ACH, Kimbrough ACH and USAF Malcolm Grow Medical Center are the only MTF within the National Capitol Area. Based on a capabilities study, conducted by the TRISERVICE Office, these MTFs do not have the necessary excess capacity to absorb NNMC's total active duty workload.

If unable to access care in one of the other MTFs, active duty dependents, retirees and their dependents in the area can obtain care from civilian providers (80 hospitals and 12,136 primary and specialty care givers) in the Washington Metropolitan area, but at a considerable cost to DoD and Medicare.

Historically, NNMC has also been the site of choice for medical care received by members of Congress and a special unit has been specifically designed to provide medical care for the President and his family. Closure of NNMC would require costly construction of a similar unit at another location.

10c. If your inpatient care capability were to close, would the local community be able to absorb your current inpatient workload? Please develop all of your conclusions with supporting data and show it in the space below:

Walter Reed Army Medical Center (WAMC) and USAF Malcolm Grow Medical Center are the only other major tertiary care MTFs in the National Capitol Area (NCA). Dewitt ACH and Kimbrough ACH are smaller community hospitals. As such, insufficient excess capacity exist to absorb NNMC's inpatient active duty, retired, and dependent workload. Active duty dependents, retirees and their dependents who are unable to access care in one of the other MTFs could obtain care from civilian providers (80 hospitals and 12,136 primary and specialty care givers) in the Washington metropolitan area, but at a considerable cost to DoD and Medicare.

11. Mobilization. What are your facility's mobilization requirements?

a. If any of your staff is assigned to support a Hospital Ship, Fleet Hospital, Marine Corps unit, ship, or other operational unit during mobilization complete the following table:

UNIT NAME	**UNIT NUMBER** IF APPLICABLE	**NUMBER OF STAFF ASSIGNED**
NNMC	00168	849
NNMC DEP MEDS	47135	45
Arlington Annex	30773	11
Washington Navy Yard	32563	22
Washington Navy Yard	32565	1
Washington Navy Yard	356688	6
Naval Security Station	32566	3
Naval Research Lab	32567	0
Dahlgreen	32639	10
NAF	32747	2
Staff Education and Training Dept.	32959	2
Indian Head	33329	10
USNS Mercy (T-AH 19)	46245	0
USNS Comfort (T-AH 20)	46246	693
USS Guam (LPH-9)	07178	2
USS Guadalcanal (LPH-7)	07352	6
USS Inchon (LPH-12)	20009	5
USS Saipan (LHA -2)	20632	1
USS Wasp (LHD-1)	21560	4
2D Marine Division, Camp Lej.	08321	25
Det A, 1st Marine Air Wing	41975	1

Note: Table continued on next page.

UNIT NAME	UNIT NUMBER IF APPLICABLE	NUMBER OF STAFF ASSIGNED
MAG-29, MCAS Jacksonville	52841	0
2D Marine Air Wing	57080	7
NEPMU-7., Naples	62997	0
ASWBPL I, MacGuire AFB	65388	8
HQ FMFLANT, Norfolk, VA.	67026	2
2D FSSG	68408	26
ASWBPL II, Lackland AFB	81737	6
1st FSSG, Advanced Element	MPS1F	1
4TH, MEB Command Element	MPS2C	11
2D MARDIV, Advanced Element	MPS2D	10
2D FSSG Advanced Element	MPS2F	4
2D MAW Advanced Element	MPS2W	2
FLTHOSP #2 (250-CBTZ)	68682	5
FLTHOSP #3 (500-CBTZ)	68683	53
FLTHOSP #4 (500-CBTZ)	68684	0
FLTHOSP #5 (500-CBTZ)	68685	18
FLTHOSP #8 (500-CBTZ)	45392	2
FLTHOSP #20 (500-CBTZ)	46977	59
NAVMEDCLINIC PEARL HARBOR	68098	1
US NAVHOSP YOKOSUKA	68292	1
US NAVHOSP NAPLES	66096	34
US NAVHOSP GUANTANAMO BAY	61564	19
US NAVDENCEN NAPLES	68442	3
US NAVHOSP OKINAWA	68470	3
US NAVHOSP KEFLICK	68875	11
MMART 4	MMART 4	23
MMART 4 (SPRINT)	MMART 4	7

NOTE: DUPLICATE THIS TABLE AS NECESSARY TO RECORD ALL UNITS.

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b. What additional workload could you perform if you did not have this requirement and its associated training? Please show all assumptions and calculations used in arriving at your conclusions.

This facility is required to man the USNS COMFORT and various other FMF, operational and Fleet Hospital platforms.

It is estimated that 1/3 of the staff will be mobilized during wartime, if this does occur it will cause a 1/3 decrease in personnel providing care. Personnel remaining onboard will be required to work 12-16 hours per day to accomplish the workload until backfill reserves arrive.

Without the above tasking, NNMC will continue to maintain the same workload under a normal operating environment. If needed, NNMC can expand its current capacity through extending working hours and/or adding patient care personnel.

c. Please provide the total number of your expanded beds[1] that are currently fully "stubbed" (i.e. the number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours). Use of portable gas or electrical utilities is not considered in this definition.

Number of expanded beds: 779 R cofu BUMED-823 9/29/94

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

b. What additional workload could you perform if you did not have this requirement and its associated training? Please show all assumptions and calculations used in arriving at your conclusions.

This facility is required to man the USNS COMFORT and various other FMF, operational and Fleet Hospital platforms.

It is estimated that 1/3 of the staff will be mobilized during wartime, if this does occur it will cause a 1/3 decrease in personnel providing care. Personnel remaining onboard will be required to work 12-16 hours per day to accomplish the workload until backfill reserves arrive.

If we did not have this tasking we could continue handling our present patient load and prepare to receive mass casualties.

c. Please provide the total number of your expanded beds[1] that are currently fully "stubbed" (i.e. the number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours). Use of portable gas or electrical utilities is not considered in this definition.

Number of "stubbed" expanded beds[1]: 779

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

12. Non-availability Statements. Please complete the following table for Non-availability statements (NAS):

NAS TYPE	FISCAL YEAR		
	1992	1993	1994 (Jan - Mar)
INPATIENT	634	432	106
OUTPATIENT	357	340	98

Note: NNMC NAS numbers include Branch Clinics. Unable to report separately.

13. Supplemental Care. Please complete the following table for supplemental care:

CATEGORY OF PATIENT	SUPPLEMENTAL CARE[2]					
	FY 1992		FY 1993		FY 1994	
	NO.[1]	COST[2]	NO.	COST	NO.	COST
AD	770	$1,084.8	726	$749.1	408	$460.6
AD FAMILY	64	$ 43.5	54	$ 26.9	21	$ 10.4
OTHER	120	$ 189.8	65	$205.6	45	$101.9
TOTAL	954	$1,318.1	845	$981.6	474	$572.9

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[1] The total number of consults, procedures and admissions covered with supplemental care dollars.

[2] The total cost in thousands of dollars.

Note: NNMC Supplemental Care numbers include Branch Clinics. Unable to report separately.

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12. Non-availability Statements. Please complete the following table for Non-availability statements (NAS):

NAS TYPE	FISCAL YEAR		
	1992	1993	1994 (Jan - Mar)
INPATIENT	634	432	106
OUTPATIENT	357	340	98

Note: NNMC NAS numbers include Branch Clinics. Unable to report separately.

13. Supplemental Care. Please complete the following table for supplemental care:

CATEGORY OF PATIENT	SUPPLEMENTAL CARE[2]					
	FY 1992		FY 1993		FY 1994	
	NO.[1]	COST[2]	NO.	COST	NO.	COST
AD	770	$967,015	726	$749,058	408	$460,564
AD FAMILY	64	$ 38,590	54	$ 26,902	21	$ 10,417
OTHER	120	$169,062	65	$205,670	45	$101,918
TOTAL	954	$117,467	845	$981,631	474	$572,900

[1] The total number of consults, procedures and admissions covered with supplemental care dollars.

[2] The total cost in thousands of dollars.

Note: NNMC Supplemental Care numbers include Branch Clinics. Unable to report separately.

14. Costs. Complete the following table regarding your outpatient costs. Use the same definitions and assumptions that you use for reporting to Medical Expense and Performance Reporting System (MEPRS).

CATEGORY	FY92 ($)	FY93 ($)	FY94 ($)
TOTAL COSTS	75,129,109	104,313,266	12,204,408
TOTAL OUTPATIENT VISITS	538,530	599,190	159,488
AVERAGE COST PER VISIT	140	174	77

14a. Costs. Complete the following tables regarding your inpatients costs. Use the same definitions and assumptions that you use for reporting Medical Expense and Performance Reporting System (MEPRS). Table A, B, C, and D are used to arrive at a cost per Relative Weighted Product (RWP). Table E develops costs for inflation and add-ons to produce the final FY 1994 cost per RWP. FY 1994 should be completed through the First Quarter FY 1994. Costs should be total costs for the category unless otherwise indicated.

Table A:

CATEGORY	FY 1992	FY 1993	FY 1994
A. TOTAL MEPRS-A EXPENSE (ALL ACCOUNTS)	100,396,398	99,660,790	19,592,996

Table B:

CATEGORY	FY 1992	FY 1993	FY 1994
B. GRADUATE MEDICAL EDUCATION SUPPORT (EBE)	973,967	1,645,036	470,882
C. EDUCATION AND TRAINING PROGRAM SUPPORT (EBF)	1,414,083	1,700,552	509,011
D. TOTAL EXPENSES IN EBE AND EBF (B+C)	2,388,050	3,345,588	979,894
E. TOTAL E EXPENSES (ALL ACCOUNTS)	100,153,012	82,637,873	13,437,483
F. % SELECTED E EXPENSES (D÷E)	.023844	.040485	.007292

SEE PAGE 48R
FOR COMPLETED TABLE

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Table C:

CATEGORY	FY 1992	FY 1993	FY 1994
G. TOTAL E EXPENSES INCLUDED IN MEPRS A	17,121,742	17,121,742	3,227,665
H. E EXPENSES TO REMOVE FROM MEPRS A (F×G)	40,839		
I. AREA REFERENCE LABORATORIES (FAA)	0	0	0
J. CLINICAL INVESTIGATION PROGRAM (FAH)	542,029	495,779	103,629
K. TOTAL SELECTED F (I+J)	542,029	495,779	103,629
L. CONTINUING HEALTH EDUCATION (FAL)	1,510,089	1,875,312	303,685
M. DECEDENT AFFAIRS (FDD)	65,418	109,459	15,260
N. INITIAL OUTFITTING (FDE)	0	0	0
O. URGENT MINOR CONSTRUCTION (FDF)	0	0	0
P. TOTAL (L+M+N+O)	1,575,507	1,984,771	318,945
Q. E EXPENSES INCLUDED IN ROW P	4,516,083*	4,516,083	1,129,302
R. E EXPENSES TO REMOVE FROM ROW P (F×Q)	107,681	32,932	8,235
S. OTHER F'S LESS E (P-R)	1,467,826	1,951,839	310,710

* FY92 Unavailable FY93 figures used.

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FOR COMPLETED TABLE 49

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Table D:

CATEGORY	FY 1992	FY 1993	FY 1994
T. INPATIENT WORK UNIT (IWU)	23,285.39	21,706.61	5373.85
U. TOTAL WORK UNITS (MWU)*2	39,147.90	38,091.20	9626.37
V. PERCENT INPATIENT (IWU÷MNU)			
W. FINAL OTHER F EXPENSES (S×V)			
X. FINAL F EXPENSES (K+W)			
Y. TOTAL CATEGORY III EXPENSES (A-H+X)			
Z. NUMBER OF BIOMETRICS DISPOSITIONS			
AA. TOTAL MEPRS DISPOSITIONS	17,804	17,286	4056
BB. ADJUSTED DISPOSITIONS (Z÷AA)			
CC. ADJUSTED MEPRS EXPENSES (Y×BB)			
DD. TOTAL RELATIVE WEIGHTED PRODUCT (RWP)			
EE. COST PER RWP (CC÷DD)			
FF. TOTAL CATEGORY II RWPs*3			
GG. TOTAL CATEGORY II COST (EE×FF)			

SEE COMPLETED TABLE ON PAGE 48R

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HH. TOTAL ESTIMATED CATEGORY III EXPENSES (CC-GG)			
II. TOTAL CATEGORY III RWPs (DD-FF)			
JJ. COST PER CATEGORY III RWP (HH÷II)			

***2 Total work units (MWU) is the total of Inpatient Work Units plus Ambulatory Work Units (IWU+AWU).**

***3Category II RWP's are RWP's due to Diagnoses Not Normally Hospitalized (DXNNH), Potential Ambulatory Surgery (PAS), and Active Duty Excessive Length of Stay (ADELS).**

SEE COMPLETED TABLE ON PAGE 48

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SEE COMPLETED TABLE ON PAGE 48R

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TABLE E: BURDENING FOR ADD-ONS AND INFLATION

CATEGORY	FY 1992	FY 1993	FY 1994
KK. TOTAL OBDs (OCCUPIED BED DAYS)	98,517	82,370	19,492
LL. CATEGORY II (AS DEFINED IN FF) OBDs			
MM. CATEGORY III OBDs (KK-LL)			
NN. AVERAGE DAYS/RWP (MM÷II)			
OO. ADD ON PER RWP (NN×77)			
PP. TOTAL COST PER RWP (JJ+OO)			
QQ. CIVILIAN PAY COST (PP×.15)			
RR. MILITARY PAY COST (PP×.56)			
SS. OTHER COSTS (PP×.29)			
TT. CIVILIAN PAY RAISES (QQ×1.037×1.0297)			
UU. MILITARY PAY RAISES (RR×1.037×1.0165)			
VV. UNFUNDED CIVILIAN RETIREMENT (TT×1.147)			
WW. CIVILIAN ASSET USE CHARGE (VV×1.04)			
XX. MILITARY ASSET USE CHARGE (UU×1.04)			

YY. OTHER ASSET USE CHARGES (SS×1.04)			
ZZ. OTHER COSTS DEFLATOR FACTOR (YY×1.083)			
ADJUSTED CATEGORY III COSTS/RWP (WW+XX+ZZ)			

SEE COMPLETED TABLE ON PAGE 48R

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TABLE A: BETHESDA

CATEGORY	FY 92	FY 93	FY 94
A. TOTAL MEPRS-A	100837638	101779072	

FY 94 INFORMATION NOT AVAILABLE

TABLE B:

CATEGORY	FY 92	FY 93	FY 94
B. GRADUATE MED ED (EBE)	974072	1762506	
C. EDUCATION AND TRAINING (EBF)	1412873	1801320	
D. TOTAL EXP EBE AND EBF	2386945	3563826	0
E. TOTAL E EXPENSES	99971845	100759466	
F. % SELECTED E EXPENSES (D/E)	0.023876	0.035370	ERR

TABLE C:

CATEGORY	FY 92	FY 93	FY 94
G. TOTAL E IN MEPRS-A	24583196	19961112	
H. E EXPENSES TO REMOVE FROM A (FxG)	586952.624	706017.338	ERR
I. AREA REF LABS (FAA)	0	0	
J. CLINICAL INVEST (FAH)	542507	519939	
K. TOTAL SELECTED F (I+J)	542507	519939	0
L. CONTINUING HEALTH ED (FAL)	1511011	1990367	
M. DECEDENT AFFAIRS (FDD)	65680	98810	
N. INITIAL OUTFITTING (FDE)	0	0	
O. URGENT MINOR CONST (FDF)	0	0	
P. TOTAL (L+M+N+O)	1576691	2089177	0
E EXPENSE (FAL)	132142	262538	
E EXPENSE (FDD)	37455	21059	
E EXPENSE (FDE)	0	0	
E EXPENSE (FDF)	0	0	
Q. E XEPENSES INCLUDED IN ROW P	169597	283597	0
R. E EXPENSES TO REMOVE FROM P. (FxQ)	4049.3272	10030.7237	ERR
S. OTHER F'S LESS E (P-R)	1572641.67	2079146.28	ERR

TABLE D:

CATEGORY	FY 92	FY 93	FY 94
T. IWU	17730.83	22915.87	
U MWU	33647.99	38602.85	
V PERCENT INPATIENT	0.52695064	0.59363156	ERR
W. FINAL OTHER F EXP (SxV)	828704.542	1234246.84	ERR
X FINAL F EXP (K+W)	1371211.54	1754185.84	ERR
Y TOTAL CATEGORY III EXP (A-H+X)	101621897	102827241	ERR
Z NUMBER BIOMETRICS DISPOS	17364	15550	
AA. TOTAL MEPRS DISP	17804	16721	
BB. ADJ DISPOS (Z/AA)	0.97528645	0.9299683	ERR
CC ADJ MERPS EXP (YxBB)	99110459.3	95626074.4	ERR
DD. TOTAL RWP	18655.72	17210	
EE COST PER RWP (CC/DD)	5312.60436	5556.42501	ERR
CATEGORY II RWPS			
(DXNNH)	13.5947	10.2129	
(PAS)	4066.204	3697.5545	
(ADELS)	363.5391	221.2945	
FF. TOTAL CAT II RWPS	4443.3378	3929.0619	0
GG. TOTAL CAT II COST (EExFF)	23605695.8	21831537.8	ERR
HH. TOTAL EXT CAT III EXP (CC-GG)	75504763.6	73794536.6	ERR
II. TOTAL CAT III RWPS (DD-FF)	14212.3822	13280.9381	0
JJ. COST PER CAT III RWP (HH/II)	5312.60436	5556.42501	ERR

TABLE E

CATEGORY	FY 92	FY 93	FY 94
KK. TOTAL OBDS	85676	70780	
CAT II OBDS			
(DXNNH)	63	23	
(PAS)	15139	12224	
(ADELS)	3782	2318	
LL TOTAL CAT II OBD	18984	14565	0
MM CAT III OBDS (KK-LL)	66692	56215	0
NN. AVG DAYS/RWP (MM/II)	4.6925279	4.23275629	ERR
OO. ADD ON PER RWP (NNx77)	361.324648	325.922383	ERR
PP. TOTAL COST PER RWP (JJ+OO)	5673.929	5882.34739	ERR
QQ. CIVILIAN PAY COST (PPx.15)	851.089351	882.352109	ERR
RR. MILITARY PAY COST (PPx.56)	3177.40024	3294.11454	ERR
SS. OTHER COSTS (PPx.29)	1645.43941	1705.88074	ERR
TT. CIVILIAN PAY RAISES (QQx1.037x1.0297))	908.792272	942.174611	ERR
UU. MILITARY PAY RAISES (RRx1.037x1.0165)	3349.33096	3472.36072	ERR
VV. UNFUNDED CIV RET (TTx1.47)	1335.92464	1384.99668	ERR
WW. CIVILAIN ASSET USE CHARGE (VVx1.04)	1389.36163	1440.39655	ERR
XX. MILITARY ASSET USE CHARGE (UU*1.04)	3483.3042	3611.25515	ERR
YY. OTHER ASSET USE CHARGES (SS*1.04)	1711.25699	1774.11597	ERR
ZZ. OTHER COSTS DEFLATOR FACT (YY*1.083)	1853.29132	1921.3676	ERR
ADJ CAT III COST/RWP	6725.95714	6973.0193	ERR

15. Quality of Life.

a. Military Housing

(1) Family Housing:

(a) Do you have mandatory assignment to on-base housing? (circle) yes (no)

(b) For military family housing in your locale provide the following information:

Type of Quarters	Number of Bedrooms	R Total number of units	R Number Adequate	Number Substandard	Number Inadequate
Officer	4+	3	3		
Officer	3	5	5		
Officer	1 or 2	0			
Enlisted	4+	0			
Enlisted	3	0			
Enlisted	1 or 2	0			
Mobile Homes		0			
Mobile Home lots		0			

NOTE: These asset have already been counted by PWC Wash. BRAC data calls.

(c) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to

What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

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15. Quality of Life.

a. Military Housing

(1) Family Housing:

(a) Do you have mandatory assignment to on-base housing? yes/no: **NO**

(b) For military family housing in your locale provide the following information:

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+	160	160		
Officer	3	154	154		
Officer	1 or 2	75	75		
Enlisted	4+	400	400		
Enlisted	3	594	594		
Enlisted	1 or 2	451	451		
Mobile Homes		0	0		
Mobile Home lots		0	0		

(c) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

No listed "inadequate" facilities.

(d) Complete the following table for the military housing waiting list.

Pay Grade	Number of Bedrooms	Number on List[1]	Average Wait
O-6/7/8/9	1		
	2		
	3		
	4+	6	4 months
O-4/5	1		
	2		
	3	26	4 months
	4+	3	4 months
O-1/2/3/CWO	1		
	2	23	walk-in
	3	8	4 months
	4+	3	4 months
E7-E9	1		
	2	1	6 months
	3	31	3 months
	4+	10	4 months
E1-E6	1		
	2	248	6 months
	3	133	3 months
	4+	33	4 months

Note: As of 31 MAR 1994.

[1]As of 31 March 1994.

(e) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details.

	Top Five Factors Driving the Demand for Base Housing
1	Cost
2	Location
3	Secure (safe haven)
4	Convenience to base services
5	Military community environment

R (f) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?

100%

R (g) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	99%
Substandard	
Inadequate	

R (h) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% (or vacancy over 2%), is there a reason?

Yes, NNMC housing consolidated into PWC Wash. plant account.

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(e) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details.

	Top Five Factors Driving the Demand for Base Housing
1	COST
2	LOCATION
3	SECURE (SAFE HAVEN)
4	CONVENIENCE TO BASE SERVICES (COMMISSARY, EXCHANGE, ETC.)
5	MILITARY COMMUNITY ENVIRONMENT

(f) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?

(g) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	97%
Substandard	
Inadequate	

(h) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% or vacancy over 2%, is there a reason?

A housing area will be demolished in the summer of 1994, as the "adequate" units become vacant, the units are not being reassigned. Therefore, the occupancy rate will decrease.

(2) BEQ:

(a) Provide the utilization rate for BEQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	88%
Substandard	
Inadequate	

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

Yes. Utilization is now at 94% as of March 94. Living space was reorganized to accommodate the influx of E5 - E6 personnel. A new barracks was recently opened, building 61 which holds more personnel then the previous bachelor enlisted quarters, building 50. The number of students attending schools has also increased and therefore stabilizing the required utilization criteria.

Yes. Utilization may not always be at 95% due to the housing of students where classes and class size may be unpredictable. Also, due to the recent influx of E5 - E6 personnel, permission was granted for off-base housing because the rooms lacked the required square footage as per bachelor quarters regulations.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

AOB = (# Geographic Bachelors x average number of days in barracks)/365

AOB = 28

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	0	0	
Spouse Employment (non-military)	0	0	
Other	28	100%	Reason unknown
TOTAL	28	100	

(e) How many geographic bachelors do not live on base?
This information is unknown.

(3) BOQ:

(a) Provide the utilization rate for BOQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	82%

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

Yes. The utilization percentage is now at 89%. There is no real explanation for this increase other than more officers are utilizing the barracks due to either financial reasons or geographical bachelor status.

Yes. The Bethesda BOQ is classified as inadequate. Hence, officers have the choice of accepting the quarters assigned to them or find off base housing.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

AOB = (# Geographic Bachelors x average number of days in barracks)/365

AOB = 9

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	0	0	
Spouse Employment (non-military)	0	0	
Other	18	100%	Reason Unknown
TOTAL	18	100	

(e) How many geographic bachelors do not live on base? **This information is unknown.**

b. For on-base MWR facilities[2] available, complete the following table for each separate location. For off-base government owned or leased recreation facilities indicate distance from base. If there are any facilities not listed, include them at the bottom of the table.

The following locations are all on base, NNMC, Bethesda,MD.

*** Data Not Available at this time.**

LOCATION: **Building 23**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Enlisted Club	SF	10,000	N
Officer's Club	SF	40,000	N
Gymnasium	SF	*	N/A
Pool (indoor)	Lanes	5	N
Fitness Center	SF	*	N/A

LOCATION: **Building 10**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Amphitheater	Seats	*	N/A

LOCATION: **Next to Parking Lot H**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Tennis Ct.	Each	3	N

Tables continued on the following two pages.

[2]**Spaces designed for a particular use. A single building might contain several facilities, each of which should be listed separately.**

LOCATION: **Next to Building 60 (BEQ)**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Tennis Ct.	Each	2	N

LOCATION: **Building 2**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Library - Medical	SF	*	N/A
Library - Medical	Books	75,000	N/A
Library - General	SF	*	N/A
Library - General	Books	*	N/A

*** Data not available at this time.**

LOCATION: **Building 56**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Bowling	Lanes	20	Y

LOCATION: **Next to Building 56**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Softball Fld	Each	1	N/A

LOCATION: **N/A**
DISTANCE: **N/A**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Auto Hobby	Indoor Bays	N/A	
	Outdoor Bays	N/A	
Arts/Crafts	SF	N/A	
Wood Hobby	SF	N/A	
Theater	Seats	N/A	
ITT	SF	1	
Museum/Memorial	SF	N/A	
Pool (outdoor)	Lanes	N/A	
Beach	LF	N/A	
Swimming Ponds	Each	N/A	
Volleyball Ct. (outdoor)	Each	1	N/A
Basketball Ct. (outdoor)	Each	N/A	
Racquetball Ct.	Each	N/A	
Golf Course	Holes	N/A	
Driving Range	Tee Boxes	N/A	
Marina	Berths	N/A	
Stables	Stalls	N/A	
Football Fld	Each	N/A	
Soccer Fld	Each	N/A	
Youth Center	SF	N/A	

c. Is your library part of a regional interlibrary loan program?

Yes, the library is part of the regional interlibrary loan program.

d. Base Family Support Facilities and Programs

(1). Complete the following table on the availability of child care in a child care center on your base.

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos	2	X				8 Months
6-12 Mos	14	X			49*	18 Months
12-24 Mos	13	X			52	18 Months
24-36 Mos	27	X			32	18 Months
3-5 Yrs	32	X			26	8 Months

***Total for first two Categories.**

(2). In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

N/A: No listed "inadequate" facilities.

(3). If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

Day care facilities are available in the community, however, the CDC does not recommend any particular agency. Since our rate structure is based on family income our active duty staff prefer to place their children in our CDC. Also, the telephone number to the Montgomery county Child Care Connection is available, they supply a list of certified home care providers for home child care.

(4). How many "certified home care providers" are registered at your base?

None. Personnel are Navy Base Certified and have college degrees and/or Child Development Diplomas.

(5). Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).

Walter Reed Army Center.

(6). Complete the following table for services available on your base. If you have any services not listed, include them at the bottom.

Service	Unit of Measure	Qty
Exchange	SF	1
Gas Station	SF	1
Auto Repair	SF	1
Auto Parts Store	SF	N/A
Commissary	SF	N/A
Mini-Mart	SF	1
Package Store	SF	1
Fast Food Restaurants	Each	1
Bank/Credit Union	Each	1
Family Service Center	SF	N/A
Laundromat	SF	N/A
Dry Cleaners	Each	1
ARC	PN	N/A
Chapel	PN	1
FSC Classrm/Auditorium	PN	

e. Proximity of closest major metropolitan areas (provide at least three):

City	Distance (Miles)
Washington, D.C.	5
Baltimore	35
Rockville	2

f. Standard Rate VHA Data for Cost of Living:

Paygrade	With Dependents	Without Dependents
E1	314.33	175.87
E2	314.33	197.67
E3	304.92	224.68
E4	333.54	232.79
E5	358.43	250.25
E6	401.64	273.41
E7	445.49	309.46
E8	455.86	344.62
E9	444.44	337.38
W1	508.26	386.01
W2	539.96	423.51
W3	539.31	438.40
W4	503.58	446.50
O1E	431.76	320.26
O2E	471.21	375.69
O3E	487.77	412.65
O1	428.21	315.54
O2	411.12	321.34
O3	461.82	388.82
O4	495.17	430.60
O5	472.86	391.05
O6	464.70	384.64
O7	396.88	322.46

g. Off-base housing rental and purchase

(1) Fill in the following table for average rental costs in the area for the period 1 April 1993 through 31 March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	600	450	65
Apartment (1-2 Bedroom)	700	500	85
Apartment (3+ Bedroom)	850	700	100
Single Family Home (3 Bedroom)	1250	800	170
Single Family Home (4+ Bedroom)	1425	1250	180
Town House (2 Bedroom)	1000	850	150
Town House (3+ Bedroom)	1125	875	160
Condominium (2 Bedroom)	900	700	90
Condominium (3+ Bedroom)	1100	900	130

(2) What was the rental occupancy rate in the community as of 31 March 1994?

Type Rental	Percent Occupancy Rate
Efficiency	95
Apartment (1-2 Bedroom)	89
Apartment (3+ Bedroom)	97
Single Family Home (3 Bedroom)	95
Single Family Home (4+ Bedroom)	95
Town House (2 Bedroom)	95
Town House (3+ Bedroom)	95
Condominium (2 Bedroom)	80
Condominium (3+ Bedroom)	85

(3) What are the median costs for homes in the area?

Type of Home	Median Cost
Single Family Home (3 Bedroom)	165,000
Single Family Home (4+ Bedroom)	232,500
Town House (2 Bedroom)	139,700
Town House (3+ Bedroom)	145,750
Condominium (2 Bedroom)	139,750
Condominium (3+ Bedroom)	145,750

(4) For calendar year 1993, from the local MLS listings provide the number of 2, 3, and 4 bedroom homes available for purchase. Use only homes for which monthly payments would be within 90 to 110 percent of the E5 BAQ and VHA for your area.

Month	Type of Home		
	Detached Med./Range	Attached Med./Range	Condominiums Med./Range
January 1993	3,130 $210,000	1,356 $132,000	1,018 **$89,990**
February 1993	3,313 $213,000	1423 $125,000	1104 **$83,000**
March 1993	3,514 $210,000	1,512 $131,750	1,149 **$94,500**
April 1993	3,772 $215,500	1,577 $136,500	1,142 **$88,950**
May 1993	3,929 $225,000	1,619 $128,000	1,176 **$92,750**
June 1993	3,850 $220,000	1,598 $133,000	1,162 **$84,900**
July 1993	3,581 $217,250	1,541 $130,800	1,054 **$82,950**
August 1993	3,418 $208,000	1,448 $132,750	1,044 **$90,000**
Sept. 1993	3,345 $208,000	1,424 $132,000	1,055 **$83,500**
October 1993	3,349 $208,500	1,382 $129,900	1,038 **$84,750**
November 1993	3,032 $220,000	1,306 $129,700	1,007 **$92,500**

Table: Continued on next page.

An E-5 in this location will be able to afford a home in the range of "$93,000" to "117,000" Max., based on 90 to 110% of BAQ and VHA rates for this location. (Does not include taxes and utilities).

Further table information is provided on next page.

Month	Type of Home		
	Detached Med./Range	Attached Med./Range	Condominiums Med./Range
December 1993	2,461 $225,000	1,075 $132,250	795 **$82,700**
January 1994	2,633 $210,000	1,138 $129,000	903 **$91,350**
February 1994	2,757 $199,500	1,214 $130,500	965 **$84,500**
March 1994	2,944 $219,500	1,350 $134,200	1,029 **$93,250**
April 1994	3,271 $225,000	1,412 $129,900	1,084 **$90,000**

An E-5 in this location will be able to afford a home in the range of "$93,000" to "117,000" Max., based on 90 to 110% of BAQ and VHA rates for this location. (Does not include taxes and utilities).

Note 1: The table contains the MEDIAN price (See Definition) and the number of homes available in that catorgory.

The table does not reflect the number of homes affordable for an E-5 in the given range. It simply provides an idea of the affordability of the housing market in this location.

Note 2: Data source is Montgomery County Association of Realtors, Inc. Data is inclusive of all, and only Montgomery County.

Note 3: Data from the Montgomery County Association of Realtors no longer provides statistics on # of Bedrooms. Therefore, the information provided is based on single family homes, town homes and duplexes.

Definitions: DETACHED: Single family homes.
ATTACHED: Town homes and duplexes.
MEDIAN: When prices are arranged from the highest to lowest, the value in the middle.

Calculations:

E-5 with Dependents: $415.50 (BAQ) + $358.43 (VHA) = $773.93
Assume a VA loan, no down payment at an interest rate of 8%.
$773.93 x 90% = 696.54, This gives and affordablity of $93,000.
$773.93 x 110% = 851.32, This gives and affordablity of $117,000 Max.

(5) Describe the principle housing cost drivers in your local area.

1. **LOCATION - Centrally located to major metropolitan areas (Washington, Baltimore, Rockville), airports, sea ports, rail, and ground transportation and a wide variety of public attractions.**
2. **Closeness to Public Transportation, especially Metro Line.**
3. **Closeness to schools.**
4. **A major service business area.**

h. For the top five sea intensive ratings in the principle warfare community your base supports, provide the following:

Rating	Number Sea Billets in the Local Area	Number of Shore billets in the Local Area
HM	585	522
MS	54	15
SH	24	5
PN	6	0
YN	5	1

i. Complete the following table for the average one-way commute for the five largest concentrations of military and civilian personnel living off-base.

Location	% Employees	Distance (mi)	Time(min)
Bethesda, MD	N/A	00 to 04	05 to 15
Rockville	N/A	02 to 09	10 to 20
Silver Spring	N/A	03 to 15	10 to 35
Gaithersburg	N/A	11 to 15	25 to 45
Germantown	N/A	15 to 20	35 to 55

j. Complete the tables below to indicate the civilian educational opportunities available to service members stationed at the air station (to include any outlying fields) and their dependents:

(1) List the local educational institutions which offer programs available to dependent children. Indicate the school type (e.g. DODDS, private, public, parochial, etc.), grade level (e.g. pre-school, primary, secondary, etc.), what students with special needs the institution is equipped to handle, cost of enrollment, and for high schools only, the average SAT score of the class that graduated in 1993, and the number of students in that class who enrolled in college in the fall of 1994.

Institution	Type	Grade Level(s)	Special Education Available	Annual Enrollment Cost per Student	1993 Avg SAT/ ACT Score	% HS Grad to Higher Educ	Source of Info
Ashburton	Public	Elemen-tary	Yes	None	N/A	N/A	Board of Ed
Bannockburn	"	"	Yes	None	N/A	N/A	"
Bethesda	"	"	Yes	None	N/A	N/A	"
Bradley Hills	"	"	Yes	None	N/A	N/A	"
Burning Tree	"	"	No	None	N/A	N/A	"
Carderrock Springs	"	"	No	None	N/A	N/A	"
Seven Locks	"	"	No	None	N/A	N/A	"
Westbrook	"	"	Yes	None	N/A	N/A	"
Wood Acres	"	"	No	None	N/A	N/A	"
Wyngate	"	"	Yes	None	N/A	N/A	"
Thomas W. Pyle	"	Middle School	Yes	None	N/A	N/A	"
Westland	"	"	Yes	None	N/A	N/A	"
Bethesda Chevy Chase	"	HS	Yes	None	492V 546M	74%	"
Walter Johnson	"	HS	Yes	None	476V 530M	87%	"

Note: Continued on following two pages.

PROGRAMS FOR PUPILS WITH SPECIAL NEEDS: 1993 - 1994

The following is a list of public educational institutions, listed on page 69, that offer programs for pupils with special needs.

Institution: **Ashburton**
Program: Special Classes: **Learning Disabilities**
Special Ed: **Preschool Education Program**

Institution: **Bannockburn**
Program: Special Classes: **PreAcademic Diagnostic**
Special Ed: **School/Comm. Based**

Institution: **Bethesda**
Program: Special Classes: **Learning Disabilities**
Special Ed: **School/Comm. Based**

Institution: **Bradley Hills**
Program: Special Classes: **Learning Disabilities**

Institution: **Westbrook**
Program: Special Classes: **Seriously Emotionally Disturbed**

Institution: **Wyngate**
Program: Special Classes: **Speech/Language**

Institution: **Thomas W. Pyle**
Program: Special Classes: **Mild Learning Handicaps**
Special Ed: **Mark Twain Satelite**
School/Comm. Based

Institution: **Westland**
Program: Special Classes: **Mild Learning Handicaps**
Special Ed: **School/Comm. Based**

Institution: **Bethesda Chevy Chase**
Program: Special Classes: **Mild Learning Handicaps**

Institution: **Walter Johnson**
Program: Special Ed: **School/Comm. Based**
Secondary Learning Centers

Note: The following are available in all Montgomery County Schools as needed.

Speech/Language
Vision
Auditory
Physical & Occupational Therapy

Institution	Type	Grade Level(s)	Special Education Available	Annual Enrollment Cost per Student	1993 Avg SAT/ ACT Score	% HS Grad to Higher Educ	Source of Info
Lynnbrook Group Home	Sp'l Ed		Yes	*	*	*	Sch'l listing
Tahoma	"		Yes	*	*	*	"
Whittler Alternative	"		Yes	*	*	*	"
Holton Arms	Private	3-12	No	7 to 12 $12,200	602V 641M	100%	Sch'l
Landon	"	3-12	No	HS- $11,700	599V 655M	100%	Sch'l
Mater Dei	"	1-8	No	$5,500	N/A	N/A	Sch'l
Norwood	"	K-6	No	K to 3 $8,600 4 to 6 $9,000	N/A	N/A	Sch'l
Primary Day	"	pre-K to 2	No	pre-K $4,600 1 to 2 $6,800	N/A	N/A	Sch'l
Stone Ridge Sacred Heart	"	K-12	No	*	*	*	Sch'l Listing
St. Andrew's Episcopal	"	6-12	No	HS- $11,300	Mid 50% 480V to 570V 490M to 610M		Sch'l

Note: All listed "local" educational institutions are located in the city of Bethesda, MD. Other locally surrounding towns are not listed.

*** Not known at this time.**

(2) List the educational institutions within 30 miles which offer programs off-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
American University	Day	No	Yes	Yes	Yes	Yes
	Night	No	Yes	Yes	Yes	Yes
Catholic University	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
George Washington University	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Georgetown University	Day	No	No	No	Yes	Yes
	Night	No	No	No	Yes	Yes
Howard University	Day	No	No	Yes	Yes	Yes
	Night	No	No	No	No	No
Strayer College	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Trinity College	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Montgomery College	Day	No	Yes	Yes	Yes	Yes
	Night	No	Yes	Yes	Yes	Yes
Prince Georges CC	Day	No	No	No	Yes	NO
	Night	No	No	No	Yes	No
Southern Illinois University	Day	No	No	Yes	Yes	No
	Night	No	No	No	No	No

Table continued on next page.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Tesst Elec & Computer Inst	Day	Yes	Yes	Yes	No	No
	Night	Yes	Yes	Yes	No	No
Troy State University	Day	No	No	No	No	No
	Night	No	NO	No	Yes	Yes
Maryland University	Day	No	Yes	Yes	Yes	Yes
	Night	No	No	No	No	No
Averett College	Day	No	No	No	No	No
	Night	No	No	No	Yes	Yes
George Mason University	Day	No	No	Yes	Yes	Yes
	Night	No	No	Yes	Yes	Yes
Marymount University	Day	Yes	No	No	Yes	Yes
	Night	Yes	No	No	Yes	Yes
National Louis University	Day	No	No	No	No	No
	Night	No	No	Yes	Yes	Yes
Northern Virginia Comm	Day	No	No	No	Yes	Yes
	Night	No	No	No	Yes	Yes
University of D.C.	Day	Yes	No	No	Yes	Yes
	Night	Yes	NO	No	Yes	Yes

(3) List the educational institutions which offer programs on-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Southern Illinois University	Day	No	No	No	No	No
	Night	No	No	Yes	Yes	No
	Corres-pondence	No	No	No	No	No
Troy State University	Day	No	No	No	No	No
	Night	No	No	No	Yes	Yes
	Corres-pondence	No	No	No	No	No
	Day					
	Night					
	Corres-pondence					

k. Spousal Employment Opportunities

Provide the following data on spousal employment opportunities.

Skill Level	Number of Military Spouses Serviced by Family Service Center Spouse Employment Assistance			Local Community Unemployment Rate
	1991	1992	1993	
Professional	N/A	N/A	N/A	
Manufacturing	N/A	N/A	N/A	
Clerical	N/A	N/A	N/A	
Service	N/A	N/A	N/A	
Other	N/A	N/A	N/A	

Note: NNMC has no Family Service Center.

1. Do your active duty personnel have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

Active duty personnel generally have priority over other beneficiaries to receive their care at NNMC. Although, there might still be a long waiting periond for an appointment for certain services.

2. Do your military dependents have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

Military dependents receive their care at NNMC and private providers who accept CHAMPUS. At NNMC is not uncommon to have long waiting periods for appointments for certain types of services.

n. Complete the table below to indicate the crime rate for your air station for the last three fiscal years. The source for case category definitions to be used in responding to this question are found in NCIS - Manual dated 23 February 1989, at Appendix A, entitled "Case Category Definitions." Note: the crimes reported in this table should include 1) all reported criminal activity which occurred on base regardless of whether the subject or the victim of that activity was assigned to or worked at the base; and 2) all reported criminal activity off base.

ASSUMPTION: THE FOLLOWING NUMBERS REFLECT THE PERSON REPORTING CRIME (MIGHT OR MIGHT NOT BE VICTIM)

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)	1	2	1
Base Personnel - military	1	1	0
Base Personnel - civilian	0	1	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	1
2. Blackmarket (6C)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
3. Counterfeiting (6G)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0

Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
4. Postal (6L)	1	0	1
Base Personnel - military	1	0	1
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
6. Burglary (6N)	1	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	1	0	0
7. Larceny - Ordnance (6R)	0	0	0

Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
8. Larceny - Government (6S)	30	32	51
Base Personnel - military	20	19	31
Base Personnel - civilian	10	13	20
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)	152	186	148
Base Personnel - military	100	112	92
Base Personnel - civilian	22	40	30
Off Base Personnel - military	14	20	10
Off Base Personnel - civilian	16	14	14
10. Wrongful Destruction (6U)	48	45	44
Base Personnel - military	23	27	26
Base Personnel - civilian	25	18	18
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
11. Larceny - Vehicle (6V)	3	0	7
Base Personnel - military	3	0	7
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
12. Bomb Threat (7B)	3	1	3
Base Personnel - military	0	0	0
Base Personnel - civilian	3	1	3

Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
14. Assault (7G)	25	10	14
Base Personnel - military	20	6	8
Base Personnel - civilian	5	4	6
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
15. Death (7H)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
16. Kidnapping (7K)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0

Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)	4	7	1
Base Personnel - military	1	3	0
Base Personnel - civilian	2	4	1
Off Base Personnel - military	1	0	0
Off Base Personnel - civilian	0	0	0
19. Perjury (7P)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
20. Robbery (7R)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
21. Traffic Accident (7T)	21	23	24
Base Personnel - military	5	9	6
Base Personnel - civilian	9	2	7
Off Base Personnel - military	4	5	4

Off Base Personnel - civilian	3	7	7

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
23. Indecent Assault (8D)	1	1	2
Base Personnel - military	1	1	2
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
24. Rape (8F)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
25. Sodomy (8G)	0	0	0
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0

Off Base Personnel - civilian	0	0	0

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

D. M. LICHTMAN
NAME (Please type or print)

Signature

Commanding Officer
Title

31 MAY 94
Date

National Naval Medical Center, Bethesda
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) x D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title 6-2-94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE JR. NAME (Please type or print) J B Greene Jr Signature

ACTING Title 6/9/94 Date

Enclosure
Pg 13+17

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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ACTIVITY COMMANDER

R. I. RIDENOUR
NAME (Please type or print)

Signature

Commander
Title

18 AUG 94
Date

National Naval Medical Center
Bethesda
Activity

Revision pg 18 + 19

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

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NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

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MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) _____ Signature _____

CHIEF BUMED/SURGEON GENERAL

Title _____ Date 8-29-94

BUREAU OF MEDICINE & SURGERY

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print) _____ Signature _____

Title _____ Date 9/6/94

BRAC-95 CERTIFICATION

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

DON D. WILSON
NAME (Please type or print)

Signature

ACTING COMMANDER
Title

Date 940929

NATIONAL NAVAL MEDICAL CENTER
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title X 10/3/94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) J B Greene Jr. Signature

ACTING

Title 11 OCT 1994 Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. I. RIDENOUR, RADM, MC, USN	R I Ridenour
NAME (Please type or print)	Signature
COMMANDER	22 September 1994
Title	Date
NATIONAL NAVAL MEDICAL CENTER	
Activity	

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title X 9-29-94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) J B Greene Jr. Signature

ACTING

Title 13 OCT 1994 Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. I. RIDENOUR
NAME (Please type or print)

RIRidenour
Signature

COMMANDER
Title

1 Nov 94
Date

NATIONAL NAVAL MEDICAL CENTER, BETHESDA
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title X Nov 2, 1994 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print) W A Earner Signature

Title 11/3/94 Date

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. I. RIDENOUR
NAME (Please type or print)

RIRidenour
Signature

COMMANDER
Title

7 Nov 94
Date

NNMC BETHESDA
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

HAROLD M. KOENIG, RADM, MC, USN
NAME (Please type or print)

Signature

ACTING CHIEF BUMED
Title

11/8/94
Date

BUREAU OF MEDICINE AND SURGERY
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER
NAME (Please type or print)

Signature

Title

11/15/94
Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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ACTIVITY COMMANDER

R. I. RIDENOUR
NAME (Please type or print)

RRidenour
Signature

COMMANDER
Title

3 NOV 94
Date

NATIONAL NAVAL MEDICAL CENTER
BETHESDA
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

HAROLD M. KOENIG, RADM, MC, USN
NAME (Please type or print)

Signature

ACTING CHIEF BUMED
Title

11/5/94
Date

BUREAU OF MEDICINE AND SURGERY
Activity

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DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER

NAME (Please type or print) _____ Signature _____

Title _____ Date 11/15/94

Document Separator

CAPACITY ANALYSIS:
DATA CALL WORK SHEET FOR
MEDICAL FACILITY: Naval Hospital
Boone Rd
Bremerton, WA 98312

370

UIC: 68095

Category.....Personnel Support
Sub-category....Medical
Types.....Clinics, Hospitals, and Medical Centers

*******If any responses are classified, attach separate classified annex*******

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MISSION REQUIREMENTS

1. Population. Please identify your beneficiary population using the same definitions as used by RAPS. Use the following table to record your results.

TYPE	ACTUAL FY 1993			PROJECTED FY ~~2001~~ 1999		
	CATCHMENT[1]	ASSIGNED[2]	REGION[3]	CATCHMENT[1]	ASSIGNED[2]	REGION[3]
AD	~~9516~~ 15794	~~0~~ 15869	50348	~~13240~~ 14192	~~0~~ 18690	64600
FAMILY OF AD	~~23019~~ 23903	~~974~~ 22685	94072	~~26681~~ 21486	~~1250~~ 26378	106637
SUBTOTAL	~~32535~~ 31617	~~974~~ 38554	144420	~~39921~~ 35,678	~~1250~~ 45068	171237
RETIRED AND FAMILY MEMBERS UNDER 65	~~15746~~ 17873	~~1123~~ 13686	148613	~~15335~~ 17,455	~~1172~~ 13355	147352
RETIRED AND FAMILY MEMBERS OVER 65[4]	~~3107~~ 4151	~~323~~ 3153	44280	~~3878~~ 5273	~~320~~ 4005	43904
OTHER	~~1228~~ 3100	~~86~~ 2409	13377	~~1553~~ 3343	~~107~~ 2605	16513
TOTAL	~~52616~~ 64,821	~~2006~~ 57,802	350690	~~60687~~ 61749	~~2849~~ 65,033	379006
			N/A			N/A

NOTE: THE FOLLOWING APPLIES TO ALL FACILITIES.

[1] THE BASIS FOR YOUR REPORTED POPULATION IS THE CATCHMENT AREA DEFINED AS SETS OF ZIP CODES EMANATING FROM THE CENTER OF THE ZIP CODE IN WHICH THE MTF IS LOCATED WITH A RADIUS OF 40 MILES.

[2] THIS IS THE POPULATION SPECIFICALLY ASSIGNED TO YOUR FACILITY IN CONTRAST TO THE POPULATION IN THE CATCHMENT AREA. THIS IS IMPORTANT IN FACILITIES WITH OVERLAPPING CATCHMENT AREAS.

[3] IF YOU ARE A DESIGNATED NAVAL MEDICAL CENTER, PLEASE REPORT YOUR LEAD AGENT POPULATION (SEE TRICARE POLICY GUIDELINES).

[4] THIS SECTION MUST BE COMPLETED.

BUMED-822
MSA 7 Jun 99

1

RAPS POPULATION PROJECTION REPORT MAY 15, 1994
FY99 BASED UPON FY93 BASELINE 16:28:27
V 6.01 03/30/94 MIXED REDEFINED & RETAINED CATCHMENTS BRAC III.03 03/15/94
0 NH BREMERTON
(SEATTLE/TACOMA SERVICE AREA)

0 POPULATION BY AGE/SEX

AGE/SEX	1 ACTIVE DUTY	2 DEPS OF ACT DTY	3 MED ELG NG/RES	4 DEPS OF NG/RES	5 RETIRED	6 DEPS OF RETIRED	7 SURVIVR	8 TOTAL		
00-04/M	--	3182	--	26	--	83	30	3321	>65	15,235
05-14/M	--	4180	--	69	--	899	50	5198	<65	3,842
15-17/M	--	604	--	16	--	563	17	1200		
18-24/M	4741	375	30	8	9	740	41	5944		
25-34/M	5433	91	49	3	48	10	36	5670		
35-44/M	2229	59	49	2	947	14	17	3317		
45-64/M	260	31	6	0	4038	15	1	4351		
65+ /M	--	10	--	1	2325	15	0	2351		
00-04/F	--	3027	--	24	--	85	19	3155		
05-14/F	--	3996	--	53	--	829	48	4926		
15-17/F	--	614	--	13	--	533	16	1176		
18-24/F	189	3094	11	18	1	726	48	4087		
25-34/F	223	4655	11	48	3	184	37	5161		
35-44/F	114	2222	9	37	40	1264	50	3736		
45-64/F	9	416	0	7	56	3659	244	4391		
65+ /F	--	41	--	0	42	1459	818	2360		
0 TOTAL	13198	26597	165	325	7509	11078	1472	60344		
				324	5142	9,604				
				1	2,367	1,474				

7,9 +

Inc/Dec	0.002	.13 0.002	+ 0.05 —	+ 0.07 —	.03 0.01	.005 0.003	0.17 0.03	0.003
2000	13,219	26,639	165	325	7,552	11,113	1,512	60,525
2001	13,240	26,681	165	325	7,595	11,148	1,553	60,707
			165	324	165 5,201	9,665		

R

68095

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	109
Set Up Beds[1]:	28
Expanded Bed Capacity[2]:	139

R 9/7/94 VR BUMED 824 9/28/94

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

4 R(9/7/94) VR BUMED 824 9/28/94

2. Bed Capacity. Please complete the following table related to your inpatient beds. If you have no inpatient beds please so indicate.

Operating Beds[1]:	~~96~~ 109
Set Up Beds[1]:	~~137~~ 28
Expanded Bed Capacity[2]:	~~209~~ 169

BUMED-822 mss, 7 Jun 94

[1] Use the definitions in BUMEDINST 6320.69 and 6321.3.
[2] The number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours. Use of portable gas or electrical utilities is not considered in this definition.

The following questions are designed to determine the level of services provided at your facility during FY 1993, your current maximum capability (i.e. your maximum capacity given the same set of parameters that you are currently functioning within), and the requirements of the community you support.

3. Workload. Complete the following table for FY 1993:

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	55068	129971	60542	245581
ADMISSIONS	1594	2739	1458	5791
LABORATORY TESTS (WEIGHTED)[1]	891100	2104429	982597	3978126
RADIOLOGY PROCEDURES (WEIGHTED)[1]	60080	141886	66249	268215
PHARMACY UNITS (WEIGHTED)[1]	109522	258647	120766	488935
OTHER (SPECIFY)	N/A	N/A	N/A	N/A

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

3a. Workload. Complete the following table for your maximum capacity. Assume the same facility, staff, equipment, and supplies you currently have. Do not change your scope of practice. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	55068	129971	60542	245581
ADMISSIONS	1594	2739	1458	5791
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RADIOLOGY PROCEDURES (WEIGHTED)[1]	60080	141886	66249	268215
PHARMACY UNITS (WEIGHTED)[1]	109522	258647	120766	488935
OTHER (SPECIFY)	N/A	N/A	N/A	N/A

Previous table reflects our maximum capacity. Our major constraint to increasing visits to this facility is space as reflected in previous BRAC submissions.

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

3b. Workload. Complete the following table for the current workload demand of your supported population. Assume you are to provide all the care in your facility for your catchment area. **Show all calculations and assumptions in the space below.**

	ACTIVE DUTY	FAMILY OF ACTIVE DUTY	RETIRED AND FAMILY	TOTAL OF EACH ROW
OUTPATIENT VISITS	55068	192115	89786	336969
ADMISSIONS	1594	3908	2088	7590
LABORATORY TESTS (WEIGHTED)[1]	891100	2777846	1306854	4975800
RADIOLOGY PROCEDURES (WEIGHTED)[1]	60080	187289	88111	335480
PHARMACY UNITS (WEIGHTED)[1]	109522	341414	160619	611555
OTHER (SPECIFY)	N/A			

* 1993 CHAMPUS admissions and visits added to family of active duty and retired visits on a percentage basis of total visits and admissions shown on table 3 for this category. BUMED-82 MS 7 Jan
* Active duty category not changed by CHAMPUS information.
* Tests, procedures, and pharmacy units increased by percentage of population increase between table 3 and 3b.
* 1993 CHAMPUS data attached.

[1] If unable to provide the level of detail requested, provide the level of detail you are able, and indicate why you are unable to provide the information requested.

FY 93
USN HOSP BREMERTON

	Total Benefit Cost	Admin Cost	FY 93 TOTAL	INPATIENT ADMISSION	OUTPATIENT VISITS
OCT 92	$807,794	$32,244	$840,038	104	5,131
NOV 92	$903,861	$37,357	$941,218	190	6,393
DEC 92	$809,674	$30,995	$840,669	161	5,619
JAN 93	$720,547	$28,900	$747,547	158	5,560
FEB 93	$902,363	$33,070	$935,433	299	7,472
MAR 93	$790,422	$31,706	$822,220	141	6,792
APR 93	$1,070,870	$42,848	$1,122,718	154	8,687
MAY 93	$764,346	$28,400	$792,746	123	7,307
JUN 93	$872,203	$32,310	$904,513	119	7,088
JUL 93	$640,677	$22,863	$663,540	120	6,826
AUG 93	$528,508	$30,101	$558,609	131	6,043
SEP 93	$563,486	$19,064	$583,450	99	6,402
TOTAL	$9,883,861	$368,850	$10,052,711	1,799	81,388

FY 93
USN HOSP OAK HARBOR

	Total Benefit Cost	Admin Cost	FY 91 TOTAL	INPATIENT ADMISSION	OUTPATIENT VISITS
OCT 92	$528,626	$21,109	$549,735	65	3,860
NOV 92	$566,043	$23,395	$589,438	84	4,601
DEC 92	$716,270	$28,864	$744,134	95	5,152
JAN 93	$510,244	$16,972	$527,216	72	3,160
FEB 93	$569,431	$20,858	$590,289	99	3,668
MAR 93	$590,563	$23,758	$614,321	76	4,520
APR 93	$754,933	$29,955	$784,888	69	4,605
MAY 93	$520,137	$19,325	$539,462	63	4,137
JUN 93	$562,995	$20,855	$583,850	53	4,473
JUL 93	$508,732	$18,155	$526,887	50	3,087
AUG 93	$630,212	$22,897	$653,109	60	4,119
SEP 93	$443,236	$15,704	$458,940	54	3,367
TOTAL	$6,900,432	$261,657	$7,162,289	874	49,459

FY 93
USAF HOSPITAL, FAIRCHILD

	Total Benefit Cost	Admin Cost	FY 92 TOTAL	INPATIENT ADMISSION	OUTPATIENT VISITS
OCT 92	$543,742	$21,739	$565,481	68	5,008
NOV 92	$568,117	$27,587	$595,704	93	6,091
DEC 92	$490,783	$20,128	$510,911	67	3,464
JAN 93	$807,833	$33,401	$841,234	70	4,021
FEB 93	$496,897	$18,181	$515,078	117	4,096
MAR 93	$535,323	$21,539	$556,862	76	4,552
APR 93	$561,069	$22,147	$583,216	95	5,523
MAY 93	$515,248	$19,029	$534,277	85	4,372
JUN 93	$559,807	$21,928	$581,735	69	4,657
JUL 93	$570,205	$20,767	$590,972	85	4,042
AUG 93	$549,203	$19,885	$569,168	143	4,374
SEP 93	$419,957	$14,998	$434,955	398	4,499
TOTAL	$6,618,284	$261,329	$6,879,593	1,365	54,497

FY 93
MAMC, FT LEWIS

	Total Benefit Cost	Admin Cost	FY 93 TOTAL	INPATIENT ADMISSION	OUTPATIENT VISITS
OCT 92	$1,130,649	$44,648	$1,175,297	76	14,830
NOV 92	$1,341,761	$52,657	$1,394,418	121	17,213
DEC 92	$903,897	$25,562	$929,459	104	11,037
JAN 93	$944,019	$38,300	$982,319	99	12,596
FEB 93	$944,587	$38,314	$980,881	127	10,540
MAR 93	$1,012,813	$40,033	$1,052,846	128	14,891
APR 93	$1,174,123	$49,033	$1,223,156	130	14,553
MAY 93	$1,130,758	$44,108	$1,174,866	148	12,311
JUN 93	$1,087,365	$42,045	$1,130,210	103	11,867
JUL 93	$862,598	$33,759	$896,355	109	11,013
AUG 93	$880,150	$32,085	$912,235	93	12,045
SEP 93	$1,146,053	$43,869	$1,189,922	89	11,037
TOTAL	$12,258,753	$403,294	$12,742,047	1,324	158,839

4. Staffing. Please complete the following table related to your provider staffing (only include those providers whose primary responsibility is patient care). Please include military, civilian, and contract providers. Do not include partnerships.

PROVIDER TYPE	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
PRIMARY CARE[1]	~~29.3~~ 25	~~29.3~~ 25	* 25	* 25	* 25	* 25	* 25	* 25
SPECIALTY CARE[2]	~~23~~ 25	~~23~~ 25	* 25	* 25	* 25	* 25	* 25	* 25
PHYSICIAN EXTENDERS[3]	~~20.7~~ 3	~~17.7~~ 3	* 3	* 3	* 3	* 3	* 3	* 3
INDEPENDENT DUTY CORPSMEN	~~12~~ 6	~~12~~ 6	* 6	* 6	* 6	* 6	* 6	* 6
TOTAL	~~81.3~~ 59	~~79.7~~ 59	* 59	* 59	* 59	* 59	* 59	* 59

[1] This includes General Medical Officers, Flight Surgeons, Diving Medical Officers, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.
[2] This is all other physician providers not included in the primary care category.
[3] This includes Physician Assistants and Nurse Practitioners.

Note: Does not include Family Practice Residency billets.
* Unable to provide or project based on information currently available. Current manning documents do not reflect any increases.

Additional Requirements validated by the Efficiency review: Primary Care - 7
Specialty - 8
Phys Ext - 0
IDC - 0

LOCATION

5. Community Providers. Complete the following table for the civilian providers within your 40 mile catchment area. The catchment area is defined as sets of zip codes emanating from the center of the ZIP code in which the MTF is located with a radius of 40 miles. If you are required to use another boundary please define the geographical region and the reason for its use.

PROVIDER TYPE	CURRENT
PRIMARY CARE[1]	184
SPECIALTY CARE[2]	284
PHYSICIAN EXTENDER[3]	82
TOTAL	550

[1] This includes General Practioners, Family Practice, Internal Medicine, General Pediatrics, Pediatric Subspecialties, and Obstetrics and Gynecology.

[2] This is all other physician providers not included in the primary care category.

[3] This includes Physician Assistants and Nurse Practitioners.

6. Regional Population. Please provide the U. S. Census population for your 40 mile catchment area. If you are required to use another boundary please define the geographical region and the reason for its use. Also list the source of this information. This value should include your beneficiary population.

Region Population: 231,755*

* Our catchment area is divided by geographical barriers and include - The Puget Sound to the east, Tacoma Narrows to the south, and the Hood Canal to the west. Population figures listed above do not include those zip codes seperated from Naval Hospital bremertyon by those barriers.

7. Regional Community Hospitals. Please list in the table below all the community hospitals (as defined in the American Hospital Association publication Hospital Statistics) in your region (include military, civilian, and any federal facilities including Veterans Affairs):

FACILITY NAME	OWNER	DISTANCE[1]	DRIVING TIME	RELATIONSHIP[2]
Harrison Memorial Hospital	Kitsap County Hospital Foundation	6 miles	15 mins	None
Mason General Hospital	Public Hospital Dist #1, Mason County, WA	45 miles	90 mins	None

[1] Distance in driving miles from your facility
[2] List any partnerships, MOUs, contracts, etc with this facility

7a. Regional Community Hospitals. For each facility listed in the preceding table complete the following table:

FACILITY	BEDS[1]	JCAHO APPROVED	OCCUPANCY[1]	UNIQUE FEATURES[2]
Harrison Memorial Hospital	298	Yes	58.9%	None*
Mason General Hospital	68	Yes	30.8%	None

[1] Use definitions as noted in the American Hospital Association publication Hospital Statistics.

[2] Such as regional trauma center, burn center, Graduate Medical Education Center, etc.

* Harrison is utilized for specialty care such as OB, Cardiac, and ICU services, however, routinely these services are at maximum occuapancy.

c. Training Facilities:

(1) By facility Category Code Number (CCN), provide the usage requirements for each course of instruction required for all formal schools on your installation. A formal school is a programmed course of instruction for military and/or civilian personnel that has been formally approved by an authorized authority (ie: Service Schools Command, Weapons Training Battalion, Human Resources Office). Do not include requirements for maintaining unit readiness, GMT, sexual harassment, etc. Include all applicable 171-*xx*, 179-*xx* CCN's.

Type of Training Facility/CCN	School	Type of Training	FY 1993 Requirements			FY 2001 Requirements		
			A	B	C	A	B	C
NOT APPLICABLE								

A = STUDENTS PER YEAR
B = NUMBER OF HOURS EACH STUDENT SPENDS IN THIS TRAINING FACILITY FOR THE TYPE OF TRAINING RECEIVED
C = A x B

(2) By Category Code Number (CCN), complete the following table for all training facilities aboard the installation. Include all 171-*xx* and 179-*xx* CCN's.

For example: in the category 171-10, a type of training facility is academic instruction classroom. If you have 10 classrooms with a capacity of 25 students per room, the design capacity would be 250. If these classrooms are available 8 hours a day for 300 days a year, the capacity in student hours per year would be 600,000.

Type Training Facility/CCN	Total Number	Design Capacity (PN)[1]	Capacity (Student HRS/YR)
NOT APPLICABLE			

(3) Describe how the Student HRS/YR value in the preceding table was derived.

[1] Design Capacity (PN) is the total number of seats available for students in spaces used for academic instruction; applied instruction; and seats or positions for operational trainer spaces and training facilities other than buildings, i.e., ranges. Design Capacity (PN) must reflect current use of the facilities.

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. A. MAYO
NAME (Please type or print)

R A Mayo
Signature

Commanding Officer
Title

26 May 94
Date

Naval Hospital Bremerton
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title 6-8-94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J.B. Greene, Jr. NAME (Please type or print) J.B. Greene Jr Signature

Acting Title 10 JUN 1994 Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

B. A. MENCIK
NAME (Please type or print)

B. A. Mencik
Signature

Commanding Officer
Title

9/7/94
Date

Naval Hospital Bremerton Wa
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) — Signature

CHIEF BUMED/SURGEON GENERAL

Title — Date 9-29-94

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) — Signature

ACTING

Title — Date 13 OCT 1994

310

MILITARY VALUE ANALYSIS:
DATA CALL WORKSHEET FOR:
MEDICAL FACILITY: Naval Hospital, Bremerton, WA 98312-1898
ACTIVITY UIC: 68095

Category.....Personnel Support
Sub-category.....Medical
Types.....Clinics, Hospitals, Medical Centers

April 4, 1994

**********If any responses are classified, attach separate classified annex**********

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MISSION REQUIREMENTS

1. **Mission Statement.** State the mission of your medical facility in sufficient detail so that it can be distinguished from other medical facilities.

Naval Hospital Bremerton is the principle Naval Medical treatment facility in the Pacific Northwest. Geographically isolated on the Kitsap Peninsula, our mission, is to meet the Healthcare Service needs of the fleet and all beneficiary in our areas of responsibility and to provide graduate medical education for Family Practice Interns and Residents.

In addition, we provide Medical, Fiscal, Material Management, Biomedical Repair Services, Manpower Management support to Branch Clinics located throughout the Puget Sound, Alaska, and Idaho, as well as Naval Hospital Oak Harbor, and the Coast Guard, and Industrial Hygiene and Preventive Medicine Services to the previously mentioned and to include Montana, Orgeon, and North Dekota.

2. **Customer Base.** In the table below, identify your active duty customers. Include both Naval and non-Naval active duty components. Begin with the largest activity and work down to the smallest. Include the customer Unit Identification Code (UIC).

Puget Sound Naval Shipyard, Bremerton, WA

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)*
USS NIMITZ	03368	BREMERTON, WA	3054
USS SACRAMENTO	05832	BREMERTON, WA	600
USS CAMDEN	05833	BREMERTON, WA	600
USS CALIFORNIA	20541	BREMERTON, WA	600
USS ROANOKE	20248	BREMERTON, WA	600
USS TRUXTUN	52712	BREMERTON, WA	570
PSNS, NAV STA	00251	BREMERTON, WA	716
NAVAL DENTAL CENTER	68443	BREMERTON, WA	39
PSA/PSD	43173	BREMERTON, WA	62
FLEET INDUSTRIAL SUPPLY CENTER	00406	BREMERTON, WA	25
SIMA	68856	BREMERTON, WA	80
NAV RESALE	66292	BREMERTON, WA	18
NAVRESMAINT	68707	BREMERTON, WA	87
PMO PAC	00441	BREMERTON, WA	15
NTCC	68443	BREMERTON, WA	16
FLT IMAGING	45002	BREMERTON, WA	3
NLSO	35969	BREMERTON, WA	63

* Approximate

Submarine Base Bangor, Silverdale, WA

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)*
SUBGROUP 9	53885	SILVERDALE, WA	114
SUBRON 17	53886	SILVERDALE, WA	42
TRIDENT TRNG FAC	68437	SILVERDALE, WA	502
TRIDENT REFIT FAC	68438	SILVERDALE, WA	748
SWPAC	63402	SILVERDALE, WA	119
SUBASE	68436	SILVERDALE, WA	164
DEN CEN	45021	SILVERDALE, WA	21
PSD	43150	SILVERDALE, WA	65
NAVCOMSTA	68660	SILVERDALE, WA	132
CBU 418	68571	SILVERDALE, WA	60
EOD	42969	SILVERDALE, WA	7
USS H.M. JACKSON	21040	SILVERDALE, WA	350**
USS ALABAMA	21042	SILVERDALE, WA	350**
USS NEVADA	21043	SILVERDALE, WA	350**
USS GEORGIA	21039	SILVERDALE, WA	350**
USS FLORIDA	21038	SILVERDALE, WA	350**
USS MICHIGAN	21037	SILVERDALE, WA	350**
USS OHIO	21036	SILVERDALE, WA	350**
USS ARCHERFISH	21041	SILVERDALE, WA	350**
MC SEC FORCE	67403	SILVERDALE, WA	410+

* Approximate
** 175 x 2 (Blue/Gold)
\+ Reflects T/O increase of 33 in FY94

Other Supported Activities

UNIT NAME	UIC	UNIT LOCATION	UNIT SIZE (NUMBER OF PERSONNEL)*
NUWC KEYPORT	00253	KEYPORT, WA	400
NAVAL ORDNANCE CENTER, PAC DIV DET	46144	PORT HADLOCK, WA	45
USS WICHITA	05849	SEATTLE, WA	
USS PLEDGE	08150	SEATTLE, WA	62
USS CONQUEST	08146	SEATTLE, WA	62

* Approximate

3. **Workload.** Identify your FY 1994 workload (this should include both completed and projected workload through the end of the Fiscal Year) as indicated in the table below by beneficiary type. Use the same categorization and definitions as that used in the MEPRS Manual (DoD 6010.13-M).

BENEFICIARY TYPE	ADMISSIONS	OUTPATIENT VISITS	AVERAGE LENGTH OF STAY	AVERAGE DAILY PATIENT LOAD
ACTIVE DUTY N/MC	1492	47368	4.1	16.8
ACTIVE DUTY NON N/MC	50	1272	10.3	1.4
TOTAL ACTIVE DUTY	1542	48640		18.2
FAMILY OF AD	2793	130900	2.2	16.8
RETIRED AND FAMILY MEMBERS UNDER 65	741	34992	3.7	8.5 **(R 9/29/94)**
RETIRED AND FAMILY MEMBERS OVER 65	672	29808	3.0	5.4 **(R 9/24/94)**
OTHER	26	1362	2.8	.2
TOTAL	5774	245702		49.1

What is your occupancy rate for FY 1994 to date? 45.0

68095

3. **Workload.** Identify your FY 1994 workload (this should include both completed and projected workload through the end of the Fiscal Year) as indicated in the table below by beneficiary type. Use the same categorization and definitions as that used in the MEPRS Manual (DoD 6010.13-M).

BENEFICIARY TYPE	ADMISSIONS	OUTPATIENT VISITS	AVERAGE LENGTH OF STAY	AVERAGE DAILY PATIENT LOAD
ACTIVE DUTY N/MC	1492	47368	4.1	16.8
ACTIVE DUTY NON N/MC	50	1272	10.3	1.4
TOTAL ACTIVE DUTY	1542	48640		18.2
FAMILY OF AD	2793	130900	2.2	16.8
RETIRED AND FAMILY MEMBERS UNDER 65	1413	64800	3.6	13.9
RETIRED AND FAMILY MEMBERS OVER 65	0	0	N/A	N/A
OTHER	26	1362	2.8	.2
TOTAL	5774	245702		49.1

What is your occupancy rate for FY 1994 to date? 45.0

BUMED-822
MRS, 14 Jun 94

4. **Projected Workload.** Complete the following tables for your projected workload. Please show and develop any assumptions and calculations used to complete the table. Be sure to note any impact prior closure and realignment decisions have had on your facility. Please be sure to include any impact your participation in the managed care initiative (TRICARE), previous BRAC actions, and force structure reductions will have on your workload.

	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
OUTPAT. VISITS	253073	260665	268485	276539	284835	293380	302181
ADMISS.	5947	6125	6309	6498	6693	6894	7101

Please show all assumptions and calculations in the space below:

We utilized a stright 3% increase for each fiscal year, however, due to our space constraints, we will be unable to increase our visits above FY93 levels unless modifications are made to our existing facility.

5. **Medical Support.** Indicate in the table below all the medical support you provide that is not direct patient care, and identify the time spent providing such support (i.e. food service inspections, medical standby for physical fitness tests, flight operations, field training,rifle range, MWR support for sporting events, etc.).

NON-PATIENT CARE SUPPORT	TIME SPENT/ QTR+	STAFF NEEDED/ EVENT+
Operational TAD Support*	459 Man Days	1
USMC Field Training	10 days	1
Rifle Range Support	10 days	1
PRT Ambulance	1 day	2
Physical Fitness	90 Hrs++	1

+ On the average
++ As reported through MEPERS
* Presently have 16 members of this command participating in Operation Provide Promise.

6. **Graduate Medical Education.** In the table provided, identify all the training programs (to include transitional internships and fellowships) at your facility and the numbers graduated per year. Also identify major non-physician training programs (such as OR nurse, nurse anesthetist, etc.). Be sure to take into account any planned program changes, and prior base closure and realignment decisions.

PROGRAM	NUMBER TRAINED BY FISCAL YEAR							
	FY 1994	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Puget Sound Family Medicine Residency	15	17	18	20	22	24	24	24

6a. **Graduate Medical Education.** Complete the following table for each Graduate Medical Education program that requires accreditation by the Accreditation Council for Graduate Medical Education (ACGME):

PROGRAM	STATUS[1]	CERT.[2]	COMMENTS[3]
Puget Sound Family Medicine Residency	N	100	Provisional accreditation; expect answer in Jun 94

[1] Use F for fully accredited, P for probation, and N for not accredited.
[2] List the percentage of program graduates that achieve board certification.
[3] Complete this section for all programs that you entered a P or N in the Status column. Indicate why the program is not fully accredited and when it is likely to become fully accredited.

FACILITIES

7. **Facilities Description.** Complete the following table for all buildings for which you maintain an inventory record. Use only one row for each building. Provide the 5 digit category code number (CCN) where possible. Do not include any buildings that would receive their own data calls (such as a Branch Medical Clinic):

FACILITY TYPE (CCN)	BUILDING NAME/USE[1]	SQUARE FEET	AGE (IN YEARS)	CONDITION CODE[2]
510-10	Hospital	252,700	14	A
219-10	Public Works Shop	1,800	3	A
721-12	BEQ	9,000	2	A
721-11	BEQ	22,356	14	A
740-78	Recreation Pavilion	1,548	11	A
740-43	Recreation Building	2,552	5	A
740-84	Handball Court	934	5	A
510-77	Medical Repair/Child Care	5,524	55	I
441-10	Med Warehouse/Admin	5,524	57	A

[1] Use refers to patient care, administration, laboratory, warehouse, power plant, etc.

[2] This should be based on NAVFACINST 11011.44E Shore Facilities Planning Manual and the condition recorded should be recorded as Adequate, Substandard, or Inadequate. Chapter 5 of NAVFACINST 11011.44E provides guidance on this scoring system.

7a. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

1. Facility Type/Code:
2. What makes it inadequate?
3. What use is being made of the facility?
4. What is the cost to upgrade the facility to substandard?
5. What other use could be made of the facility and at what cost?
6. Current improvement plans and programmed funding:
7. Has this facility condition resulted in "C3" or "C4" designation on your BASEREP?

7b. **Capital Improvement Expenditures.** List the project number, description, funding year, and value of the **capital improvements at your facility completed (beneficial occupancy) during 1988 to 1994.** Indicate if the capital improvement is a result for BRAC realignments or closures.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
C2-85	Recreation Bldg & Handball Court	89	182,379
C2-82	Public Works Shop	91	183,832
P-016	BEQ	92	1162000

7c. **Planned Capital Improvements.** List the project number, funding year, and value of the **non-BRAC related capital improvements planned** for years 1995 through 1997.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
P-018	Family Practice Residency Relocatable Buildings	94	525000
C4-94	Recreation Building Expansion	95	65000
C1-94	Construct Warehouse	95	130000
P-008	Hospital Addition	96	22000000
C3-90	Indoor Playing Court Addition	97	107000
P-011	Recreation Building	99	2148000
P-012	Indoor Swimming Pool	99	1666000

7d. **Planned Capital Improvements.** List the project number, description, funding year, and value of the **BRAC related capital improvements planned** for 1995 through 1999.

PROJECT	DESCRIPTION	FUND YEAR	VALUE
P-019T	BRAC - Hospital Addition	96	9300000

7e. Please complete the following Facility Condition Assessment Document (FCAD) DD Form 2407: Instructions follow the form.

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)				DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME Naval Hospital Bremerton					
2. UIC N68095	3. CATEGORY CODE 510-10		4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 252,700		B. NORMAL BEDS 137		C.DTRS
6. LOCATION	A. CITY 0180			B.STATE 53	
7. FACILITY ASSESSMENT					
FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	100				
(4)DENTAL	100				
(5) EMERGENCY SVCS.	100				
(6) FOOD SERVICES	100				
(7)LABORATORIES	100				
(8) LOGISTICS	100				
(9) INPATIENT NURSING UNITS	100				
(10) LABOR-DEL-NURSERY	100				
(11) OUTPATIENT CLINICS	100				
(12) PHARMACY	100				
(13) RADIOLOGY	100				
(14) SURGICAL SUITE	100				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				

(D) ELECTRICAL SVCS.	100				
(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME Public Works Shop, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 219-10	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 1800	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Bachelor Enlisted Quarters, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 721-12	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 9000	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Bachelor Enlisted Quarters, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 721-11	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 22,356	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Recreation Pavilion, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 740-78	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 1548	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)	DD-H(A)1707	DMIS ID NO 0126

1. FACILITY NAME: Recreation Building, Naval Hospital Bremerton

2. UIC N68095	3. CATEGORY CODE 740-43	4. NO. OF BUILDINGS 01	
5. SIZE	A. GSF 2552	B. NORMAL BEDS N/A	C.DTRS
6. LOCATION	A. CITY 0180	B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)				DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Handball Court, Naval Hospital Bremerton					
2. UIC N68095	3. CATEGORY CODE 740-84		4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 934		B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180			B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	N/A				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Medical Repair/Child Waiting Room, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 510-77	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 5524	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A				
(7)LABORATORIES	N/A				
(8) LOGISTICS	100				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

DOD MEDICAL/DENTAL FACILITIES CONDITION ASSESSMENT DOCUMENT (FCAD)			DD-H(A)1707	DMIS ID NO 0126
1. FACILITY NAME: Medical Warehouse/Administration, Naval Hospital Bremerton				
2. UIC N68095	3. CATEGORY CODE 441-10	4. NO. OF BUILDINGS 01		
5. SIZE	A. GSF 5524	B. NORMAL BEDS N/A		C.DTRS
6. LOCATION	A. CITY 0180		B.STATE 53	

7. FACILITY ASSESSMENT

FUNCTION/SYSTEM	% ADEQUATE	% SUBSTANDARD	% INADEQUATE	DEFICIENCY CODES	WEIGHT FACTOR
(1) ACCESS & PARKING	100				
(2) ADMINISTRATION	100				
(3)CENTRAL STERILE SVCS.	N/A				
(4)DENTAL	N/A				
(5) EMERGENCY SVCS.	N/A				
(6) FOOD SERVICES	N/A*				
(7)LABORATORIES	N/A				
(8) LOGISTICS	100*				
(9) INPATIENT NURSING UNITS	N/A				
(10) LABOR-DEL-NURSERY	N/A				
(11) OUTPATIENT CLINICS	N/A				
(12) PHARMACY	N/A				
(13) RADIOLOGY	N/A				
(14) SURGICAL SUITE	N/A				
(15) BUILDING					
(A) STRUCTURAL/SEISMIC	100				
(B) HVAC	100				
(C) PLUMBING	100				
(D) ELECTRICAL SVCS.	100				

(E) ELECTRICAL DISTRIBUTION	100				
(F) EMERGENCY POWER	100				

This building also contains refrigerated/freezer space for food services; while considered adequate, it proves to be inconvenient because of its separation from the main building.

FORM INSTRUCTIONS

1. This form is not intended to be used as detailed engineering evaluation of the condition of the facilities. It is primarily designed to assist in assessing the adequacy and condition of Medical/Dental Facilities. Complete only one form for all of your facilities.

2. The Functions/Systems should be evaluated on a consolidated basis for the entire facility.

3. Not more than 4 deficiencies should be identified in the Deficiency Codes column for each item listed under the Function/System column.

4. Fill in N/A (not applicable) where certain Function/System is not present in the facility. For example, Inpatient Nursing Units and Labor-Delivery-Nursery are not applicable to Clinics.

5. Numbers under % Adequate, % Substandard, % Inadequate must total 100 for each function/System.

6. After completion, the form must be signed by the Commander/Commanding Officer/Officer-in-Charge of the facility.

7. Use DoD Standard Data Element Codes for State when entering codes in item

DEFINITIONS

CATEGORY CODE - Facility Category Code is a numeric code used to identify a particular use of Military Department's real property for Hospital and other Medical Facilities usage (i.e., building, structure or utility). The first three digits of the code are a DoD standard (DoDI 4165.3); the fourth, fifth and sixth (if applicable) digits are added to provide more definitive categorization of the Military Department's facilities.

CONSTRUCTION TYPE - Type is either Permanent, Semi-permanent, or Temporary construction at the time building was built.

% ADEQUATE - Percent Adequate is the capacity of a facility or portion thereof, in percentage form, that is in adequate condition and associated with a designated function (USE). Adequate is defined as being capable of supporting the designated function without a need for capital improvements.

% SUBSTANDARD - Percent Substandard is the capacity of a facility or portion thereof, in percentage form, that is in substandard condition and associated with a designated function (USE). Substandard is defined as having deficiencies which prohibit of severely restrict, or will prohibit or severely restrict within the next five years due to expected deterioration , the use of a facility for its designated function. Substandard is further defined as having deficiencies which can be economically corrected by capital improvements and/or repairs.

% INADEQUATE - Percent Inadequate is the capacity of a facility of portion thereof, in percentage form, that is in inadequate condition and associated with a designated function (USE). Inadequate is defined as having deficiencies due to physical deterioration, functional inadequacy or hazardous location or situation which prohibit or severely restrict, or will prohibit or severely restrict within the next five years, the use of a facility for its designated function. Inadequate is further defined as having deficiencies which cannot be economically corrected to meet the requirements of the

designated function.

DEFICIENCY CODE - Code is a three character code indicating the type of deficiency existing in a facility or portion thereof that is in a substandard or inadequate condition and associated with a designated function (USE). The first character of the code indicates one of the six types of deficiencies. The next two characters specify the facility component(s) or related items which are deficient.

(1) Deficient Status of Condition Types - first character
- A - Physical Condition
- B - Functional or Space Criteria
- C - Design Criteria
- D - Location or Siting Criteria
- E - Nonexistence
- F - Total Obsolescence or Deterioration

(2) Facility Components or Related Items - last two characters
- 01 - Heating, Ventilating and Air Conditioning (HVAC)
- 02 - Plumbing Fixtures
- 03 - Fire Protection/Life Safety Code
- 04 - Medical Gases
- 05 - Lighting Fixtures
- 06 - Power Capacity
- 07 - Emergency Generators
- 08 - Communications
- 09 - Building or Structure (total)
- 10 - Seismic Design
- 11 - Roof/Ceiling
- 12 - Building Interior/Configuration
- 13 - Sound Proofing/Excessive Noise
- 14 - Compliance of Installation with Master Plan
- 15 - OSHA Deficiency
- 16 - JCAH Deficiency
- 17 - Functionality
- 18 - Site Location
- 19 - Mission of the Base
- 20 - None

7f. Please provide the date of your most recent Joint Commission on Accreditation of Healthcare Organizations (JCAHO) survey and indicate the status of your certification. Also record your Life Safety Management score from that survey.

DATE OF SURVEY: Oct 28, 1991
FULL ACCREDITATION: Yes
LIFE SAFETY MANAGEMENT SCORE: __4__ (Record as 1,2,3,4,or 5)

Overall score for the hospital: 84

Safety Management: 3
Life Safety Management: 2
Equipment Management: 1
Utility Management: 1

Next survey scheduled for Fall 94.

LOCATION:

8. **Geographic Location.** How does your geographic location affect your mission? Specifically, address the following:

a. What is the importance of your location relative to the clients supported?

Naval Hospital Bremerton is geographically isolated on the Kitsap Peninsula and is centrally located between our two major customers, the Puget Sound Naval Shipyard and Submarine Base Bangor. We are the only U.S. Military Treatment Facility within the Kitsap Peninsula Region excluding Branch Clinics supported by us. Under ideal conditions, the closest major MTF to Naval Hospital Bremerton is Madigan Army Hospital, FT Lewis, WA, which is approximately 50 minutes, 42 miles, by car. The closest civilian facility, Harrison Memorial Hospital, is usually at or near capacity in the areas we would routinely transfer (i.e. cardiology, ICU, difficult deliveries), is approximately 15 minutes, 8 miles, by car. The Seattle/Bremerton Ferry is appoximately 5 miles fron this facility.

While the overall distances to Seattle or Tacoma are short; travel constraints, weather, traffic, or natural barriers either make actual travel times overly excessive or expensive to this facility and/or our patients.

b. What are the nearest air, rail, sea and ground transportation nodes?

* Seattle Tacoma International Airport - approximately 50 miles from the hospital - major airline service.
* Bremerton National Airport - limited commercial activity.
* McCord Air Force Base - south of Tacoma - provides MAC passenger and MEDEVAC services.
* AMTRAC rail services available in Seattle and Tacoma.
* Ferry service to Seattle is approximately 7 miles from this facility in Bremerton and is operated by Washington State.
* Public buses run between virtually all areas of Bremerton with connecting routes to the hospital.
* PSNS operates a shuttle service between the shipyard and the hospital during normal working hours.

c. Please provide the distance in miles that your facility is located from any military or civilian airfield that can accommodate a C-9 aircraft.

Distance (in miles): 15
Bremerton National Airport

d. What is the importance of your location given your mobilization requirements?

Not applicable because we do not mobilize to any local activities such as amphibious task force shipping, however, movement of personnel to staging areas is easily supported by both commercial and military airfields.

e. On the average, how long does it take your current clients/customers to reach your facility?

From 15 minutes to 4 hours, however, better than 50% of our population base can reach our activity within 30 minutes. However, the average commute to the hospital from the "bedroom" communities and majority of housing is less than 30 minutes, and the average hunt for parking is approximately 15 minutes.

9. Manpower and recruiting issues. Are there unique aspects of your facility's location that help or hinder in the hiring of qualified civilian personnel?

No, the greater Puget Sound has been experiencing a extended period of growth. In 1990, Bremerton was named the number one place to live by **MONEY** Magazine (August 1990). With the lower cost of living, as compared to other regions of the United States, affordable housing, rural atmosphere, and availability of cross sound ferries between Seattle and Bremerton make Kitsap County an attractive living area, however, there are difficulties in obtaining high grade waivers for civilian medical positions.

FEATURES AND CAPABILITIES

10. **Capabilities.** What would be the impact on the Navy and Marine Corps if the capabilities of your facility were to be lost? Answer this question in terms of the unique capabilities of your staff, equipment and facility.

- Loss of Occupational Health and Industrial Hygiene services provided to ships and submarines homeported in the Puget Sound Region, Alaska, Montana, Oregon, and Idaho.
- Loss of Family Practice Residency Graduate Medical Education Program.
- Loss of inpatient (level III) Alcohol Rehabilitation services to the Army, Air Force, and Navy.
- Loss of Optical Support (Lens Lab) throughout the Northwest to the Army, Air Force, and Navy.

As the principle Naval inpatient facility in the Pacific Northwest, Navy and Marine Corps personnel and their dependents stationed/homeported at PSNS, NSB, and NUWC would be required to travel 40+ miles to Madigan Army Medical Center. A significant geographical boundary exists in that access to Seattle and Tacoma, via State Highway 16, requires crossing the Tacoma narrows bridge. The bridge is subject to closure/impaired trafficability due to high winds, ice, or motor vehicle accidents.

10a. If your facility were to close without any change in beneficiary population would the remaining local health care infrastructure be able to absorb the additional workload? Please provide supporting information to your answer.

No Harrison Memorial Hospital is a community hospital that operates continuously at or near capacity in the specialty care areas such as cardiology. Plans are being developed by Harrison to expand their outpatient operations, but they are not expected to begin construction until 1997. The influx of our beneficiaries into the local medical community would have a severe impact on how primary care service is provided.

10b. If your facility were to close and the active duty and their families were to leave the area would the local community health care system be able to care for the residual eligible population? Please provide supporting information to your answer.

Yes, as stated previously, they have the capacity to handle the local population, and have proposed expanding their primary care service centers to support local population growth. Plans for growth and expansion are predomintely based upon information supplied to them by the Kitsap Planning Agency.

10c. If your inpatient care capability were to close, would the local community be able to absorb your current inpatient workload? Please develop all of your conclusions with supporting data and show it in the space below:

They would be able to absorb our inpatient workload to some degree based upon the reported occuapancy rate of 58.9%, but would difficulties within the specialty care areas as experienced in the past.

11. Mobilization. What are your facility's mobilization requirements?

a. If any of your staff is assigned to support a Hospital Ship, Fleet Hospital, Marine Corps unit, ship, or other operational unit during mobilization complete the following table:

UNIT NAME	UNIT NUMBER (IF APPLICABLE)	NUMBER OF STAFF ASSIGNED
USS TRIPOLI (LPH-10)	07198	02
USS ESSEX (LHD-2)	21533	01
3D MARINE AIR WING	31053	04
3D MARINE AIR WING DETACHMENT, YUMA	31055	01
USNS MERCY (TAH-19)	46245	123
7TH MARINE EXPEDITIONARY BRIGADE	55356	02
1ST MARINE AIR WING	57079	01
3D MARINE AIR WING	57081	14
U.S. NAVDENCEN GUAM	62328	06
3D MARINE DIVISION	67360	01
3D FORCE SERVICE SUPPORT GROUP	67436	09
1ST FORCE SERVICE SUPPORT GROUP	67446	18
1ST MARINE DIVISION	67448	43
1ST MARINE DIVISION ADVANCE ELEMENT	MPS1D	02
1ST FORCE SERVICE SUPPORT GROUP ADVANCE ELEMENT	MPS1F	38
1ST MARINE AIR WING ADVANCE ELEMENT	MPS3W	01

R

3D MARINE AIR WING ADVANCE ELEMENT	MPS3W	01
3D MARINE DIVISION ADVANCE ELEMENT	MPS3D	07
3RD MARINE AIR WING ADVANCE ELEMENT	MPS1W	01
U.S. NAVAL HOSPITAL GUAM	68096	16
NAVAL MEDICAL CLINIC PEARL HARBOR	68098	15
U.S. NAVAL HOSPITAL YOKOSUKA	68292	20
U.S. NAVAL HOSPITAL OKINAWA	68470	54
FLEET HOSPITAL #1	68681	20
FLEET HOSPITAL #2	68682	25
FLEET HOSPITAL #6	68686	38

NOTE: DUPLICATE THIS TABLE AS NECESSARY TO RECORD ALL UNITS.

b. What additional workload could you perform if you did not have this requirement and its associated training? Please show all assumptions and calculations used in arriving at your conclusions.

Training and assignments does not significantly decrease our ability to preform current duties anymore than leave, TAD, or professional GME.

c. Please provide the total number of your expanded beds[1] that are currently fully "stubbed" (i.e. the number of beds that can be used in wards or rooms designed for patient beds. Beds are spaced on 6 foot centers and include embedded electrical and gas utility support for each bed. Beds must be set up and ready within 72 hours). Use of portable gas or electrical utilities is not considered in this definition.

Number of "stubbed" expanded beds[1]: 139 R

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

3D MARINE AIR WING ADVANCE ELEMENT	MPS3W	01
3D MARINE DIVISION ADVANCE ELEMENT	MPS3D	07
3RD MARINE AIR WING ADVANCE ELEMENT	MPS1W	01
U.S. NAVAL HOSPITAL GUAM	68096	16
NAVAL MEDICAL CLINIC PEARL HARBOR	68098	15
U.S. NAVAL HOSPITAL YOKOSUKA	68292	20
U.S. NAVAL HOSPITAL OKINAWA	68470	54
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Number of "stubbed" expanded beds[1]: 209

[1] Use the bed definitions as they appear in BUMEDINST 6320.69 and 6321.3.

12. **Non-availability Statements.** Please complete the following table for Non-availability statements (NAS):

NAS TYPE	FISCAL YEAR		
	1992	1993	1994
INPATIENT	726	760	353
OUTPATIENT	818	898	384

13. **Supplemental Care.** Please complete the following table for supplemental care:

CATEGORY OF PATIENT	SUPPLEMENTAL CARE[2]					
	FY 1992		FY 1993		FY 1994	
	NO.[1]	COST[2]	NO.	COST	NO.	COST
AD	339	227.4	304	323	117	129.49
AD FAMILY	153	102.7	78	82.8	22	24.34
OTHER	143	95.9	68	72.4	11	12.17
TOTAL	635	426.0	450	478.2	150	166.0

[1] The total number of consults, procedures and admissions covered with supplemental care dollars.

[2] The total cost in thousands of dollars.

14. **Costs.** Complete the following table regarding your outpatient costs. Use the same definitions and assumptions that you use for reporting to Medical Expense and Performance Reporting System (MEPRS).

CATEGORY	FY 1992	FY 1993	FY 1994
TOTAL COSTS	22813673	23410325	22000000
TOTAL OUTPATIENT VISITS	226363	243114	225000
AVERAGE COST PER VISIT	100.78	96.29	97.78

+ Projection based on historical information.

14a. **Costs.** Complete the following tables regarding your inpatients costs. Use the same definitions and assumptions that you use for reporting Medical Expense and Performance Reporting System (MEPRS). Table A, B, C, and D are used to arrive at a cost per Relative Weighted Product (RWP). FY 1994 should be completed through the First Quarter FY 1994.

Table A:

CATEGORY	FY 1992	FY 1993	FY 1994*
A. TOTAL MEPRS-A EXPENSE (All Accounts)	16,173,842	18,275,330	4,197,261

Table B:

CATEGORY	FY 1992	FY 1993	FY 1994*
B. GRADUATE MEDICAL EDUCATION SUPPORT (EBE)	0	91,877	360
C. EDUCATION AND TRAINING PROGRAM SUPPORT (EBF)	1,050,516	3,797,549	185,940
D. TOTAL EXPENSES IN EBE AND EBF (B+C)	1,050,516	3,889,426	186,300
E. TOTAL E EXPENSE (ALL ACCOUNTS)	17,514,998	26,209,435	3,595,982
F. % SELECTED E EXPENSES (D/E)[1]	.059978	.148398	.051808

* 1st Quarter

[1] Record as a decimal

Table C:

CATEGORY	FY 1992	FY 1993	FY 1994*
G. TOTAL E EXPENSES INCLUDED IN MEPERS A	3,925,125	3,735,027	940,345
H. E EXPENSES TO REMOVE FROM MEPERS A (FxG)	235,421	554,270	48,717
I. AREA REFERENCE LABORATORIES (FAA)	0	0	0
J. CLINICAL INVESTIGATION PROGRAM (FAH)	0	0	0
K. TOTAL SELECTED F (I+J)	0	0	0
L. CONTINUING HEALTH EDUCATION (FAL)	348,099	416,177	97,078
M. DECEDENT AFFAIRS (FDD)	14,868	2,164	234
N. INITIAL OUTFITTING (FDE)	0	0	0
O. URGENT MINOR CONSTRUCTION (FDF)	0	0	0
P. TOTAL (L+M+N+O)	362,967	418,341	97,312
Q. E EXPENSES INCLUDED IN ROW P	16,977	13,590	3,311
R. E EXPENSES TO REMOVE FROM ROW P (FxQ)	1,018	2,016	172
S. OTHER F'S LESS E (P-R)	361,949	416,325	97,140

Table D:

CATEGORY	FY 1992	FY 1993	FY 1994*
T. INPATIENT WORK UNIT (IWU)	5163	5470	1263
U. TOTAL WORK UNITS (MWU)[2]	15154	14320	3443
V. PERCENT INPATIENT (IWU/AWU)	.34	.38	.37
W. FINAL OTHER F EXPENSES (SxV)	123063	158204	35942
X. FINAL F EXPENSES (K+W)	123063	158204	35942
Y. TOTAL CATEGORY III EXPENSES (A-H+X)	15,815,358	17,562,856	4,112,602
Z. NUMBER OF BIOMETRICS DISPOSITIONS	5861	5806	1433
AA. TOTAL MEPERS DISPOSITIONS	5861	5806	1433
BB. ADJUSTED DISPOSITIONS (Z/AA)	1	1	1
CC. ADJUSTED MEPERS EXPENSES (YxBB)	15,815,358	17,562,856	4,112,602
DD. TOTAL RELATIVE WEIGHTED PRODUCT (RWP)	4460.18	4098.19	2344.12
EE. COST PER RWP (CC/DD)	3545.90	4285.51	1754.43

FF. TOTAL CATEGORY II RWPs[3]	8.5299	6.6475	1.3067
GG. TOTAL CATEGORY II COST (EExFF)	30246.17	28487.93	2292.51
HH. TOTAL ESTIMATED CATEGORY III EXPENSES (CC-GG)	15,785,112	17,534,368	4,110,339
II. TOTAL CATEGORY III RWPs (DD-FF)	4451.65	4091.54	2342.81
JJ. COST PER CATEGORY III RWP (HH/II)	3545.90	4285.52	1754.45

[2] Total work units (MWU) is the total of Inpatient Work Units plus Ambulatory Work Units (IWU+AWU)
[3] Category II RWP's are RWP's due to Diagnsis Not Normally Hospitalized (DXNNH), Potential Ambulatory Surgery (PAS), and Active Duty Excessive Length of Stay (ADELS)

Table E: BURDENING FOR ADD-ONS AND INFLATION

CATEGORY	FY 1992	FY 1993	FY 1994*
KK. TOTAL OBDs (OCCUPIED BED DAYS)	23240	20239	4282
LL. CATEGORY II (AS DEFINED IN FF) OBDs	35	35	6
MM. CATEGORY III OBDs (KK/LL)	23205	20205	4276
NN. AVERAGE DAYS/RWP (MM/II)	5.2	4.9	1.8
OO. ADD ON PER RWP (NNx77)	400.4	377.3	138.6
PP. TOTAL COST PER RWP (JJ+OO)	3946.30	4662.82	1893.05
QQ. CIVILIAN PAY COST (PPx15)	591.95	699.42	283.96
RR. MILITARY PAY COST (PPx.56)	2209.93	2611.18	1060.11
SS. OTHER COSTS (PPx.29)	1142.43	1352.22	548.98
TT. CIVILAIN PAY RAISES (RRx1.037x1.0297)	632.08	746.84	303.21
UU. MILITARY PAY RAISES (RRx1.037x1.0165)	2329.51	2752.47	1117.47
VV. UNFUNDED CIVILIAN RETIREMENT (TTx1.147)	725.00	856.63	347.78
WW. CIVILIAN ASSET USE CHARGE (UUx1.04)	754.00	890.90	361.69
XX. MILITARY ASSET USE CHARGE (UUx1.04)	2422.69	2862.57	1162.17
YY. OTHER ASSET USE CHARGE (SSx1.04)	1188.13	1406.30	570.94
ZZ. OTHER COST DEFLATOR FACTOR (YYx1.083)	1286.74	1523.02	618.33
ADJUSTED CATEGORY III COSTS/RWP (WW+XX+ZZ)	4463.43	5276.49	2142.19

15. **Quality of Life.**

a. **Military Housing controlled by Puget Sound Naval Shipyard, Bremerton, WA**

NOTE: INFORMATION NOT PROVIDED AT THIS TIME; WILL PROVIDE UNDER SEPERATE COVER AS IT BECOMES AVAILABLE.

(1) **Family Housing:**

(a) Do you have mandatory assignment to on-base housing? (circle) yes no

(b) For military family housing in your locale provide the following information:

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+				
Officer	3				
Officer	1 or 2				
Enlisted	4+				
Enlisted	3				
Enlisted	1 or 2				
Mobile Homes					
Mobile Home lots					

(c) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

NOTE: INFORMATION NOT PROVIDED AT THIS TIME; WILL PROVIDE UNDER SEPERATE COVER AS IT BECOMES AVAILABLE.

(d) Complete the following table for the military housing waiting list.

Pay Grade	Number of Bedrooms	Number on List[1]	Average Wait
O-6/7/8/9	1		
	2		
	3		
	4+		
O-4/5	1		
	2		
	3		
	4+		
O-1/2/3/CWO	1		
	2		
	3		
	4+		
E7-E9	1		
	2		
	3		
	4+		
E1-E6	1		
	2		
	3		
	4+		

[1]As of 4 May 1994.

NOTE: INFORMATION NOT PROVIDED AT THIS TIME; WILL PROVIDE UNDER SEPERATE COVER AS IT BECOMES AVAILABLE.

(e) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details.

	Top Five Factors Driving the Demand for Base Housing
1	
2	
3	
4	
5	

(f) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?

(g) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	
Substandard	
Inadequate	

(h) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% (or vacancy over 2%), is there a reason?

a. **Military Housing controlled by Submarine Base Bangor, Silverdale, WA**

(1) **Family Housing:**

(a) Do you have mandatory assignment to on-base housing? (circle) yes no

(b) For military family housing in your locale provide the following information*:

Type of Quarters	Number of Bedrooms	Total number of units	Number Adequate	Number Substandard	Number Inadequate
Officer	4+	36	36	0	0
Officer	3	44	44	0	0
Officer	1 or 2	36	36	0	0
Enlisted	4+	73	73	0	0
Enlisted	3	260	260	0	0
Enlisted	1 or 2	416	416	0	0
Mobile Homes		0	0	0	0
Mobile Home lots		0	0	0	0

(c) In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means". For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

* Includes all housing managed by Subase Bangor, on the Subase, Kingston, Bainbridge Island, Keyport, and Port Hadlock; does not include units managed by PSNS Bremerton. Information provided by Housing Office, Subase Bangor.

(d) Complete the following table for the military housing waiting list+.

Pay Grade	Number of Bedrooms	Number on List[2]	Average Wait
O-6/7/8/9	1	0	
	2	0	
	3	0	
	4+	1	1-12 mos
O-4/5	1	0	
	2	0	
	3	8	3 mos
	4+	4	3 mos
O-1/2/3/CWO	1	0	
	2	35	3-6 mos
	3	9	6 mos
	4+	1	6 mos
E7-E9*	1	*	*
	2	*	*
	3	*	*
	4+	*	*
E1-E6*	1	0	
	2	917	24 mos
	3	245	16 mos
	4+	74	18-24 mos

* Enlisted personnel are on a combined list.
\+ Numbers reflect Subase Bangor waiting lists. Information provided by Hosuing Office, Subase Bangor

[2]As of 4 May 1994.

(e) What do you consider to be the top five factors driving the demand for base housing? Does it vary by grade category? If so provide details.

	Top Five Factors Driving the Demand for Base Housing
1	Shortage of community housing which is affordable to junior enlisted personnel.
2	Desire to be close to work site.
3	High quality of housing and neighborhoods.
4	Support of other Navy Families.
5	Security for the family.

(f) What percent of your family housing units have all the amenities required by "The Facility Planning & Design Guide" (Military Handbook 1190 & Military Handbook 1035-Family Housing)?

100% of units

(g) Provide the utilization rate for family housing for FY 1993.

Type of Quarters	Utilization Rate
Adequate	99.58%
Substandard	N/A
Inadequate	N/A

(h) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 98% (or vacancy over 2%), is there a reason?

No.

* Information provided by Housing Office, Subase Bangor.

(2) BEQ:

(a) Provide the utilization rate for BEQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	88.92%
Substandard	N/A
Inadequate	N/A

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

The construction/opening of 36 new BEQ spaces has kept utilization rate at 88/89% thru this fiscal year.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$\textbf{AOB} = \frac{\textbf{(\# Geographic Bachelors x average number of days in barracks)}}{\textbf{365}}$$

$$\textbf{AOB} = \frac{(2 \times 180)}{365} = .99$$

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	2	100%	On board FY94
Spouse Employment (non-military)	0	0	
Other	0	0	
TOTAL	2	100	

Note: Total GB's for FY93 was 6.

(e) How many geographic bachelors do not live on base?

Information not available.

(3) BOQ LOCATED AT PUGET SOUND NAVAL SHIPYARD, BREMERTON, WA*:

(a) Provide the utilization rate for BOQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	82%
Substandard	N/A
Inadequate	N/A

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

Utilization varies due to ship's deployments.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$\textbf{AOB} = \frac{\textbf{(\# Geographic Bachelors x average number of days in barracks)}}{\textbf{365}}$$

$$= \frac{1 \times 365}{365} = 1$$

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	0	0	
Spouse Employment (non-military)	0	0	
Other	1	100	
TOTAL	1	100	

(e) How many geographic bachelors do not live on base?

Information unavailable

* Information provided by PSNS BOQ

(3) BOQ located at SUBMARINE BASE BANGOR, SILVERDALE, WA*:

(a) Provide the utilization rate for BOQs for FY 1993.

Type of Quarters	Utilization Rate
Adequate	95
Substandard	N/A
Inadequate	N/A

(b) As of 31 March 1994, have you experienced much of a change since FY 1993? If so, why? If occupancy is under 95% (or vacancy over 5%), is there a reason?

No.

(c) Calculate the Average on Board (AOB) for geographic bachelors as follows:

$$\textbf{AOB} = \frac{\textbf{(\# Geographic Bachelors x average number of days in barracks)}}{\textbf{365}}$$

$$= \frac{7 \times 180}{365} = 3.45$$

(d) Indicate in the following chart the percentage of geographic bachelors (GB) by category of reasons for family separation. Provide comments as necessary.

Reason for Separation from Family	Number of GB	Percent of GB	Comments
Family Commitments (children in school, financial, etc.)	3	43%	
Spouse Employment (non-military)	2	28.5%	
Other	2	28.5%	Divorced
TOTAL	7	100	

(e) How many geographic bachelors do not live on base?

Data unavailable.

* Information provided by Subase Bangor

b. For on-base MWR facilities[3] available, complete the following table for each separate location. For off-base government owned or leased recreation facilities indicate distance from base. If there are any facilities not listed, include them at the bottom of the table.

Naval Hospital, Bremerton,	
Submarine Base, Bangor,	10 Miles
Puget Sound Naval Shipyard, Bremerton	5 Miles
LOCATION **NUWC Division, Keyport, WA**	**DISTANCE** **14 Miles**

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Auto Hobby	Indoor Bays	3 NUWC 8 NSB 13 PSNS	Y N Y
	Outdoor Bays	3 NSB	N
Arts/Crafts	SF	1,200 NSB	N
Wood Hobby	SF	820 NUWC	Y
Bowling	Lanes	16 NSB 18 PSNS	Y Y
Enlisted Club	SF	4,916 NSB	Y
Officer's Club	SF	2,216 NSB	Y
Library+	SF	7,296 NUWC 10,045 NSB	N/A N/A
Library	Books	9,600 NUWC 20,000+ NSB	N/A N/A
Theater	Seats	495 NSB	Y
ITT	SF	900 NSB	Y
Museum/Memorial	SF	52,524 NUWC	N/A
Pool (indoor)	Lanes	10 NSB	N
Pool (outdoor)	Lanes	N/A	N/A
Beach	LF	1,000 NSB	N/A
Swimming Ponds	Each	0	N/A
Tennis CT	Each	3 NUWC 8 NSB 7 PSNS 2 NHB*	N/A N/A N/A N/A

[3]Spaces designed for a particular use. A single building might contain several facilities, each of which should be listed separately.

Facility	Unit of Measure	Total	Profitable (Y,N,N/A)
Volleyball CT (outdoor)	Each	2 NUWC 1 PSNS 1 NHB*	N/A N/A N/A
Basketball CT (outdoor)	Each	1 NUWC 1 NSB[1] 1 PSNS 1 NHB*	N/A N/A N/A N/A
Racquetball CT	Each	1 NUWC 7 NSB 2 PSNS 1 NHB	Y N Y N/A
Golf Course	Holes	0	N/A
Driving Range	Tee Boxes	0	N/A
Gymnasium	SF	8,174 NUWC 10,400 NSB[2]	Y N
Fitness Center	SF	800 NUWC 4,400 NSB 800 PSNS 1377 NHB	Y N Y N/A
Marina	Berths	N/A	N/A
Stables	Stalls	N/A	N/A
Softball Fld	Each	1 NUWC 5 NSB 3 PSNS 1 NHB	Y N Y N/A
Football Fld	Each	1 NUWC 1 NSB 1 PSNS	N N N
Soccer Fld	Each	1 NUWC 1 NSB 1 PSNS	N N N
Youth Center	SF	4,220 NUWC 3,500 NSB	N/A N[3]

+ Naval Hospital Bremerton has a medical library only

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[1] Outdoor court is covered with vinyl dome structure

[2] Includes (2) different facilities

[3] Does not include before and after school care facility

* Volleyball CT, Basketball CT, and Tennis CT are combined

c. Is your library part of a regional interlibrary loan program?

Not applicable to Naval Hospital Bremerton.

d. Base Family Support Facilities and Programs

(1). Complete the following table on the availability of child care in a child care center on your base.*

Facility located at Puget Sound Naval Shipyard

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos	4	8008+			77	365
6-12 Mos	4				0-12 Months	365
12-24 Mos	10				73	365
24-36 Mos	28				42	365
3-5 Yrs	88				97	365

* Navy Marine Corps Relief Society operates a drop-off facility for up to ten children, supporting parents who have appointments, at Naval Hospital Bremerton.
+ Consists of 2 facilities managed by Family Services Center, PSNS, Bremerton. Information provided relfectws total space allocated for child care.

(2). In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

(3). If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

- Family child care
- Civilian child care centers
- State certified home care

(4). How many "certified home care providers" are registered at your base?

28
19 providers in process

(5). Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).

See information provided on facility located at Submarine Base Bangor.

Facility located at Naval Submarine Base Bangor

Age Category	Capacity (Children)	SF			Number on Wait List	Average Wait (Days)
		Adequate	Substandard	Inadequate		
0-6 Mos	15	900	0	0	47	6mos - 1yr
6-12 Mos	15	525	0	0	47	6mos - 1yr
12-24 Mos	20	700	0	0	21	6mos - 1yr
24-36 Mos	28	980	0	0	23	6mos - 1yr
3-5 Yrs	22	770	0	0	47	3 - 4 mos

* Navy Marine Corps Relief Society operates a drop-off facility for up to ten children, supporting parents who have appointments, at Naval Hospital Bremerton.

Note: Subase Bangor restricts its child care to personnel actually assigned to Subase Bangor; all others are required to request a waiver.

(2). In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

Facility type/code:
What makes it inadequate?
What use is being made of the facility?
What is the cost to upgrade the facility to substandard?
What other use could be made of the facility and at what cost?
Current improvement plans and programmed funding:
Has this facility condition resulted in C3 or C4 designation on your BASEREP?

(3). If you have a waiting list, describe what programs or facilities other than those sponsored by your command are available to accommodate those on the list.

Family Child Care
Civilian Child Care Centers
State and or Navy Certified Home Care
Navy & Civilian pre-school

(4). How many "certified home care providers" are registered at your base?

25

(5). Are there other military child care facilities within 30 minutes of the base? State owner and capacity (i.e., 60 children, 0-5 yrs).

Yes, See above previous information for Puget Sound Naval Shipyard

(6). Complete the following table for services available on your base. If you have any services not listed, include them at the bottom.

Service	Unit of Measure	Qty
Exchange	SF	962
Gas Station	SF	0
Auto Repair	SF	0
Auto Parts Store	SF	0
Commissary	SF	0
Mini-Mart	SF	0
Package Store	SF	0
Fast Food Restaurants	Each	0
Bank/Credit Union	Each	0
Family Service Center	SF	0
Laundromat	SF	0
Dry Cleaners	Each	0
ARC	PN	0
Chapel	PN	41
FSC Classrm/Auditorium	PN	0

e. **Proximity of closest major metropolitan areas (provide at least three):**

City	Distance (Miles)
Seattle	16 Nautical/66 road
Tacoma	40
Silverdale	5

f. **Standard Rate VHA Data for Cost of Living:**

Paygrade	With Dependents	Without Dependents
E1	130.59	73.07
E2	130.59	82.12
E3	127.83	94.19
E4	149.24	104.16
E5	174.96	122.16
E6	211.71	144.11
E7	244.20	169.94
E8	235.65	178.15
E9	231.91	176.04
W1	228.91	173.85
W2	260.84	204.59
W3	234.91	173.62
W4	233.17	153.75
O1E	234.07	173.85
O2E	192.84	153.75
O3E	216.81	183.42
O1	194.76	143.52
O2	190.49	140.89
O3	211.61	178.16
O4	206.88	179.90
O5	183.46	151.72
O6	246.08	203.69
O7	176.48	143.39

g. Off-base housing rental and purchase as provided by Housing Referral Office, Subase, Bangor.

(1) Fill in the following table for average rental costs in the area for the period 1 April 1993 through 31 March 1994.

Type Rental	Average Monthly Rent		Average Monthly Utilities Cost
	Annual High	Annual Low	
Efficiency	400	275	65±
Apartment (1-2 Bedroom)	650	350	75±
Apartment (3+ Bedroom)	875	575	100±
Single Family Home (3 Bedroom)	1600	575	100+
Single Family Home (4+ Bedroom)	1600	725	100+
Town House (2 Bedroom)	NA	NA	NA
Town House (3+ Bedroom)	NA	NA	NA
Condominium (2 Bedroom)	NA	NA	NA
Condominium (3+ Bedroom)	NA	NA	NA

(2) What was the rental occupancy rate in the community as of 31 March 1994?

Type Rental	Percent Occupancy Rate
Efficiency	92.5
Apartment (1-2 Bedroom)	94.5 - 95
Apartment (3+ Bedroom)	92.7
Single Family Home (3 Bedroom)	92.1
Single Family Home (4+ Bedroom)	91.2 - 70.5
Town House (2 Bedroom)	NA
Town House (3+ Bedroom)	NA
Condominium (2 Bedroom)	NA
Condominium (3+ Bedroom)	NA

(3) What are the median costs for homes in the area?

Type of Home	Median Cost
Single Family Home (3 Bedroom)	127,900
Single Family Home (4+ Bedroom)	137,500
Town House (2 Bedroom)	
Town House (3+ Bedroom)	55,000*
Condominium (2 Bedroom)	
Condominium (3+ Bedroom)	

* Town Houses and condominiums are not considered seperately in Kitsap County.

(4) For calendar year 1993, from the local MLS listings provide the number of 2, 3, and 4 bedroom homes available for purchase. Use only homes for which monthly payments would be within 90 to 110 percent of the E5 BAQ and VHA for your area.

Month	Number of Bedrooms		
	2	3*	4+
January		24	
February		18	
March		24	
April		18	
May		20	
June		29	
July		27	
August		36	
September		26	
October		NA	
November		NA	
December		NA	

* BREAKDOWN BY BEDROOM NOT AVAILABLE. FIGURES ARE FOR ALL SIZES, INCLUDING MASON COUNTY

(5) Describe the principle housing cost drivers in your local area.

h. For the top five sea intensive ratings in the principle warfare community your base supports, provide the following:

Rating	Number Sea Billets in the Local Area	Number of Shore billets in the Local Area*
HM	0	402
DT	0	04
ICC	0	01
MS	0	01
TM	0	01

* Assigned to Naval Hospital and Branch Facilities.

i. Complete the following table for the average one-way commute for the five largest concentrations of military and civilian personnel living off-base.

Location	% Employees	Distance (mi)	Time(min)
Bremerton	25	11.7	15
North & West Bremerton	24	8	13
Silverdale	19	10	15
Port Orachard	14	13	20
Pouslbo	4	13	20

j. Complete the tables below to indicate the civilian educational opportunities available to service members stationed at the air station (to include any outlying fields) and their dependents:

(1) List the local educational institutions which offer programs available to dependent children. Indicate the school type (e.g. DODDS, private, public, parochial, etc.), grade level (e.g. pre-school, primary, secondary, etc.), what students with special needs the institution is equipped to handle, cost of enrollment, and for high schools only, the average SAT score of the class that graduated in 1993, and the number of students in that class who enrolled in college in the fall of 1994.

Institution	Type	Grade Level(s)	Special Education Available	Annual Enrollment Cost per Student	1993 Avg SAT/ ACT Score	% HS Grad to Higher Educ	Source of Info
North Kitsap School District	Pub	K - 12	Full svs program	$4,203*	V-444 M-484	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
Central Kitsap School District	Pub	K - 12	Full Svs Program	$4,214*	V-439 M-471	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
South Kitsap School District	Pub	K - 12	Full Svs Program	$4,165*	V-419 M-461	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
Bremerton School District	Pub	K - 12	Full Svs Program	$4,137*	V-430 M-472	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
North Mason School District	Pub	K - 12	Full Svs Program	$4,132*	V-440 M-470	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
Peninsula School District	Pub	K - 12	Full Svs Program	$4,225*	V-452 M-495	60	WA State Supt of Public Inst WA State School Apportionment & School Dist
Bambridge Island School District	Pub	K - 12	Full Svs Program	$4,185*	V-491 M-542	85	WA State Supt of Public Inst WA State School Apportionment & School Dist

* Per pupil expenditures; no tuition is charged
V = Verbal
M = Math

Additionally, there are approximately 30 pre-schools, 20 church affiliated schools, and under 10 private schools in the Kitsap County area.

(2) List the educational institutions within 30 miles which offer programs off-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Tacoma Community College	Day	YES	YES	NO	YES	NO
	Night	YES	YES	NO	YES	NO
University of Washington, Tacoma	Day	NO	NO	NO	YES	YES
	Night	NO	NO	NO	YES	NO
Bates Technical Institute, Tacoma	Day	NO	NO	YES	YES	NO
	Night	NO	NO	NO	NO	NO
Northwest College of Art, Poulsbo	Day	NO	NO	NO	YES	NO
	Night	NO	NO	NO	YES	NO
City University, Silverdale	Day	NO	NO	NO	NO	NO
	Night	NO	NO	NO	YES	YES
Eton Technical Institute, Port Orchard	Day	NO	YES	NO	YES	NO
	Night	NO	YES	NO	YES	NO
Pacific Lutheran University, Tacoma	Day	NO	NO	YES	YES	YES
	Night	NO	NO	YES	YES	YES
University of Puget Sound, Tacoma	Day	NO	NO	YES	YES	YES
	Night	NO	NO	YES	YES	YES
South Seattle Community College	Day	YES	YES	YES	YES	NO
	Night	YES	YES	YES	YES	NO
Seattle Central Community College	Day	YES	YES	YES	YES	NO
	Night	YES	YES	YES	YES	NO
University of Washington	Day	NO	NO	NO	YES	YES
	Night	NO	NO	NO	YES	NO
Seattle University	Day	NO	NO	NO	YES	YES
	Night	NO	NO	NO	YES	NO
Seattle Pacific University	Day	NO	NO	NO	YES	YES

	Night	NO	NO	NO	YES	NO

Institution	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Olympic College	Day	YES	YES	YES	YES	NO
	Night	YES	YES	YES	YES	NO
Antioch University	Day	NO	NO	NO	YES	YES
	Night	NO	NO	YES	YES	YES

(3) List the educational institutions which offer programs on-base available to service members and their adult dependents. Indicate the extent of their programs by placing a "Yes" or "No" in all boxes as applies.

Institution*	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
Olympic College	Day	NO	NO	YES	NO	NO
	Night	NO	YES	YES (Individual Study)	YES	NO
	Corres-pondence	NO	NO	NO	NO	NO
Southern Illinois University	Day	NO	NO	NO	YES	NO
	Night	NO	NO	NO	NO	NO
	Corres-pondence	NO	NO	NO	NO	NO
Chapman University	Day	NO	NO	NO	NO	NO
	Night	NO	NO	YES	YES	YES
	Corres-pondence	NO	NO	NO	NO	NO
Pennsylvania State University	Day	YES	YES	NO	YES	YES
	Night	NO	NO	NO	NO	NO
	Corres-pondence	NO	NO	NO	NO	NO

* Classes offered on Submarine Base Bangor, Puget Sound Naval Shipyard, NUWC Keyport

Institution*	Type Classes	Program Type(s)				
		Adult High School	Vocational/ Technical	Undergraduate		Graduate
				Courses only	Degree Program	
City College	Day	NO	NO	YES	YES	YES
	Night	NO	NO	YES	YES	YES
	Corres-pondence	NO	NO	NO	NO	NO
University of Massachusetts	Video Based	NO	NO	NO	NO	YES
University of Idaho	Video Based	NO	NO	NO	NO	YES
University of Washington	Video Based	NO	NO	NO	NO	YES

* Classes offered on Submarine Base Bangor, Puget Sound Naval Shipyard, NUWC Keyport

k. Spousal Employment Opportunities

Provide the following data on spousal employment opportunities.

Skill Level	Number of Military Spouses Serviced by Family Service Center Spouse Employment Assistance			Local Community Unemployment Rate
	1991	1992	1993	
Professional	146	132	221	No Data
Manufacturing	1	1	2	"
Clerical	313	281	472	"
Service	173	155	261	"
Other	33	30	50	"

Note: Information provided by Family Services Center, PSNS Bremerton.

l. Do your active duty personnel have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

No, however, some Branch Medical Clinics may be limited in the level of care they are able to provide. Care above the acute/injury treatment level of the clinic is referred to Naval Hospital Bremerton.

m. Do your military dependents have any difficulty with access to medical or dental care, in either the military or civilian health care system? Develop the why of your response.

No, dependents reeive care through Naval Hospital Bremerton or CHAMPUS. Naval Hospital Bremerton is experiencing difficulty in expanding enrollment to Family Practice and other primary care clinics due to our physical space constrints. Some delays to access are experienced due to the previously mentioned.

n. Complete the table below to indicate the crime rate for your air station for the last three fiscal years. The source for case category definitions to be used in responding to this question are found in NCIS - Manual dated 23 February 1989, at Appendix A, entitled "Case Category Definitions." Note: the crimes reported in this table should include 1) all reported criminal activity which occurred on base regardless of whether the subject or the victim of that activity was assigned to or worked at the base; and 2) all reported criminal activity off base.

Crime Definitions	FY 1991	FY 1992	FY 1993
1. Arson (6A)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
2. Blackmarket (6C)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
3. Counterfeiting (6G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
4. Postal (6L)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
5. Customs (6M)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
6. Burglary (6N)			
Base Personnel - military	1	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
7. Larceny - Ordnance (6R)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
8. Larceny - Government (6S)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
9. Larceny - Personal (6T)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
10. Wrongful Destruction (6U)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
11. Larceny - Vehicle (6V)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
12. Bomb Threat (7B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
13. Extortion (7E)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
14. Assault (7G)			
Base Personnel - military	0	1	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
15. Death (7H)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
16. Kidnapping (7K)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
18. Narcotics (7N)			
Base Personnel - military	0	0	2
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
19. Perjury (7P)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
20. Robbery (7R)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
21. Traffic Accident (7T)			
Base Personnel - military	0	2	1
Base Personnel - civilian	0	1	1
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

Crime Definitions	FY 1991	FY 1992	FY 1993
22. Sex Abuse - Child (8B)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
23. Indecent Assault (8D)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
24. Rape (8F)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0
25. Sodomy (8G)			
Base Personnel - military	0	0	0
Base Personnel - civilian	0	0	0
Off Base Personnel - military	0	0	0
Off Base Personnel - civilian	0	0	0

15. Quality of Life

o. Provide data on the Hospital's BOQs and BEQs. Provide this information on all BEQs and BOQs that your personnel use that are located on the base you are located. This information should be provided even if you do not control or manage these facilities. The desired unit of measure for this capacity is people housed. Use CCN to differentiate between pay grades, i.e., E1-E4, E5-E6, E7-E9, CWO-O2, O3 and above.

Facility Type, Bldg. #, & CCN	Total No. of Beds	Total No. of Rooms/ Squadbays	Adequate		Substandard		Inadequate	
			Beds	Sq Ft	Beds	Sq Ft	Beds	Sq Ft
BEQ, BLDG HP05, E1-E3*	126	42	126	264/Room	N/A		N/A	
BEQ, BLDG HP03, E4-E6*	32	24	36	217/Room	N/A		N/A	

* Occupancy: E1-E3 - 3 persons/room, E4 - 2 persons/room, E5-E6 - 1 person/room

b. In accordance with NAVFACINST 11010.44E, an inadequate facility cannot be made adequate for its present use through "economically justifiable means." For all the categories above where inadequate facilities are identified provide the following information:

(1) FACILITY TYPE/CODE:
(2) WHAT MAKES IT INADEQUATE?
(3) WHAT USE IS BEING MADE OF THE FACILITY?
(4) WHAT IS THE COST TO UPGRADE THE FACILITY TO SUBSTANDARD?
(5) WHAT OTHER USE COULD BE MADE OF THE FACILITY AND AT WHAT COST?
(6) CURRENT IMPROVEMENT PLANS AND PROGRAMMED FUNDING:
(7) HAS THIS FACILITY CONDITION RESULTED IN C3 OR C4 DESIGNATION ON YOUR BASEREP?

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

The signing of this certification constitutes a representation that the certifying official has reviewed the information and either (1) personally vouches for its accuracy and completeness or (2) has possession of, and is relying upon, a certification executed by a competent subordinate.

Each individual in your activity generating information for the BRAC-95 process must certify that information. Enclosure (1) is provided for individual certifications and may be duplicated as necessary. You are directed to maintain those certifications at your activity for audit purposes. For purposes of this certification sheet, the commander of the activity will begin the certification process and each reporting senior in the Chain of Command reviewing the information will also sign this certification sheet. This sheet must remain attached to this package and be forwarded up the Chain of Command. Copies must be retained by each level in the Chain of Command for audit purposes.

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

B. A. MENCIK
NAME (Please type or print)

B. A. Mencik
Signature

Commanding Officer
Title

9/10/94
Date

Naval Hospital Bremerton Wa
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

HAROLD M. KOENIG, RADM, MC, USN
NAME (Please type or print)

Signature

ACTING CHIEF BUMED
Title

9-14-94
Date

BUREAU OF MEDICINE AND SURGERY
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

W. A. EARNER
NAME (Please type or print)

Signature

Title

9/21/94
Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

R. A. MAYO
NAME (Please type or print)

Signature

Commanding Officer
Title

26 May 94
Date

Naval Hospital Bremerton
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

RADM R. I. Ridenour
NAME (Please type or print)

Signature

15 JUN 1994

ACTING CHIEF BUMED
Title

Date

BUREAU OF MEDICINE AND SURGERY
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

R. R. SAREERAM
NAME (Please type or print)

Signature

ACTING
Title

29 JUN 1994
Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

B. A. MENCIK
NAME (Please type or print)

B. A. Mencik
Signature

Commanding Officer
Title

9/29/94
Date

Naval Hospital Bremerton
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) X D F Hagen Signature

CHIEF BUMED/SURGEON GENERAL

Title X 10/4/94 Date

BUREAU OF MEDICINE & SURGERY

Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) J B Greene Signature

ACTING

Title 11 OCT 1994 Date

BRAC-95 CERTIFICATION

Reference: SECNAVNOTE 11000 of 08 December 1993

In accordance with policy set forth by the Secretary of the Navy, personnel of the Department of the Navy, uniformed and civilian, who provide information for use in the BRAC-95 process are required to provide a signed certification that states "I certify that the information contained herein is accurate and complete to the best of my knowledge and belief."

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I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

ACTIVITY COMMANDER

B. A. MENCIK
NAME (Please type or print)

B. A. Mencik
Signature

Commanding Officer
Title

9/29/94
Date

Naval Hospital Bremerton
Activity

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

NEXT ECHELON LEVEL (if applicable)

NAME (Please type or print) _____ Signature _____

Title _____ Date _____

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

MAJOR CLAIMANT LEVEL

D. F. HAGEN, VADM, MC, USN

NAME (Please type or print) _____ Signature X D F Hagen

CHIEF BUMED/SURGEON GENERAL

Title _____ Date X 10/4/94

BUREAU OF MEDICINE & SURGERY

Activity _____

I certify that the information contained herein is accurate and complete to the best of my knowledge and belief.

DEPUTY CHIEF OF NAVAL OPERATIONS (LOGISTICS)
DEPUTY CHIEF OF STAFF (INSTALLATIONS & LOGISTICS)

J. B. GREENE, JR.

NAME (Please type or print) _____ Signature J B Greene Jr

ACTING

Title _____ Date 11 OCT 1994