

Convert Inpatient Services to Clinics

Recommendation: Realign Marine Corps Air Station Cherry Point, NC by disestablishing the inpatient mission at Naval Hospital Cherry Point; converting the hospital to a clinic with an ambulatory surgery center.

Realign Fort Eustis, VA, by disestablishing the inpatient mission at the Fort Eustis Medical Facility; converting the hospital to a clinic with an ambulatory surgery center.

Realign the United States Air Force Academy, CO, by relocating the inpatient mission of the 10th Medical Group to Fort Carson Medical Facility, CO; converting the 10th Medical Group into a clinic with ambulatory surgery center.

Realign Andrews Air Force Base, MD, by disestablishing the inpatient mission at the 89th Medical Group; converting the hospital to a clinic with an ambulatory surgery center.

Realign MacDill Air Force Base, FL, by disestablishing the inpatient mission at the 6th Medical Group; converting the hospital to a clinic with an ambulatory surgery center.

Realign Keesler Air Force Base, MS, by disestablishing the inpatient mission at the 81st Medical Group; converting the medical center to a clinic with an ambulatory surgery center.

Realign Scott Air Force Base, IL, by disestablishing the inpatient mission at the 375th Medical Group; converting the hospital to a clinic with an ambulatory surgery center.

Realign Naval Station Great Lakes, IL, by disestablishing the inpatient mission at Naval Hospital Great Lakes; converting the hospital to a clinic with an ambulatory surgery center.

Realign Fort Knox, KY, by disestablishing the inpatient mission at Fort Knox's Medical Facility; converting the hospital to a clinic with an ambulatory surgery center.

Justification: The Department will rely on the civilian medical network for inpatient services at these installations. This recommendation supports strategies of reducing excess capacity and locating military personnel in activities with higher military value with a more diverse workload, providing them with enhanced opportunities to maintain their medical currency to meet COCOM requirements. Additionally, a robust network with available inpatient capacity of Joint Accreditation of Hospital Organizations (JCAHO) and/or Medicare accredited civilian/Veterans Affairs hospitals is located within 40 miles of the referenced facilities.

Payback: The total estimated one-time cost to the Department of Defense to implement this recommendation is \$12.9M. The net of all costs and savings to the Department during the implementation period is a savings of \$250.9M. Annual recurring savings to the Department after implementation are \$60.2M with payback expected immediately. The net present value of the costs and savings to the Department over 20 years is a savings of \$818.1M.

Economic Impact on Communities: Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 69 jobs (38 direct jobs and 31 indirect jobs) over the 2006-2011 period in the New Bern, NC Micropolitan Statistical Area, which is 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 78 jobs (34 direct jobs and 44 indirect jobs) over the 2006-2011 period in the Virginia Beach-Norfolk-Newport News, VA-NC Metropolitan Statistical Area, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 11 jobs (6 direct jobs and 5 indirect jobs) over the 2006-2011 period in the Colorado Springs, CO Metropolitan Statistical Area, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 265 jobs (160 direct jobs and 105 indirect jobs) over the 2006-2011 period in the Washington-Arlington-Alexandria, DC-VA-MD-WV Metropolitan Division, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 35 jobs (19 direct jobs and 16 indirect jobs) over the 2006-2011 period in the Tampa-St. Petersburg-Clearwater, FL Metropolitan Statistical Area, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 352 jobs (212 direct jobs and 140 indirect jobs) over the 2006-2011 period in the Gulfport-Biloxi, MS Metropolitan Statistical Area, which is 0.23 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 143 jobs (77 direct jobs and 66 indirect jobs) over the 2006-2011 period in the St. Louis, MO-IL Metropolitan Statistical Area, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 122 jobs (45 direct jobs and 77 indirect jobs) over the 2006-2011 period in the Lake County-Kenosha County, IL-WI Metropolitan Division, which is less than 0.1 percent of economic area employment.

Assuming no economic recovery, this recommendation could result in a maximum potential reduction of 147 jobs (85 direct jobs and 62 indirect jobs) over the 2006-2011 period in the Elizabethtown, KY Metropolitan Statistical Area, which is 0.22 percent of economic area employment.

The aggregate economic impact of all recommended actions on these economic regions of influence was considered and is at Appendix B of Volume I.

Community Infrastructure: A review of community attributes indicates no issues regarding the ability of the infrastructure of the community to support missions, forces and personnel. Civilian inpatient capacity exists in the area to provide services to the eligible population. There are no known community infrastructure impediments to implementation of all recommendations affecting the installations in this recommendation.

Environmental Impacts: This recommendation could have a minimal impact on water resources at Fort Carson where increased installation population may require upgrade of water infrastructure. This recommendation has no impact on air quality, cultural, archeological, or tribal resources; dredging; land use constraints or sensitive resource areas; marine mammals, resources, or sanctuaries; noise; waste management; or wetlands. This recommendation will require spending approximately \$0.1M for environmental compliance activities. This cost was included in the payback calculation. This recommendation does not otherwise impact the costs of environmental restoration, waste management, and environmental compliance activities. The aggregate environmental impact of all recommended BRAC actions affecting the bases in this recommendation has been reviewed. There are no known environmental impediments to implementation of this recommendation.