DCN: 11348

MINUTES OF THE MARCH 28 MEETING OF THE MEDICAL JOINT CROSS SERVICE GROUP (MJCSG)

Attending: LG Taylor - Chairman, MG Farmer - Deputy Surgeon General, RADM Martin - Navy Deputy Surgeon, RADL Mateczun - J4-MRD, RADL Hufstader - USMC Surgeon General, Mr. Ford - ASD(HA), Mr. Potochney - USD(AT&L), Ms Bayert - OSD/GC, Mr. McAndrew - UDS(AT&L), LTC Phillipe - SAIE-IA.

Decisions:

- The MJCSG would consider all aspects the Military Health System, excluding no functions for Service level analysis
- Change the name of the Medical Market Management Workgroup to Medical Market Requirements Workgroup
- Change the name of the Medical Research and Development Workgroup to the Medical Research, Development, and Acquisition Workgroup
- Change the name of the Medical Infrastructure Workgroup to the Joint Medical Infrastructure Workgroup and include all logistical items including pharmacy and health services contracting

Action Items:

- MJCSG members review the attached draft report through the Infrastructure Steering Group to the SECDEF on Monday, March31, 2003
- Each workgroup chair prepare a roster of the staff needed to support their workgroup's analysis to include specialty and service
- The Chair of the MJCSG will open discussion with other Cross Service groups with overlapping scopes. The sense of the MJCSG was that they need to deliberate all aspects of the Military Health System to maximize efficiencies in the MJCSG recommendations.

Meeting Overview:

- LG Taylor provided opening comments and reviewed the draft report to the SECDEF on the proposed MJCSG analytical framework for BRAC 2005.
- The MJCSG minutes from the March 21, 2003 meeting were reviewed and approved as annotated.
- Discussion on the need to exclude items from analysis by the MJCSG for Service analysis resulted in the consensus that the MJCSG would analyze all functions of the Military Health System.
- Each workgroup chair provided a short presentation of their thoughts on the scope and notional metrics.
- Review of the Medical Market Requirements Workgroup Draft Plan led to the consensus this group would build the analysis to determine each medical markets demand based on included population. The results of this analysis would be central to the final scoring methodology of the MJCSG. By integrating the results of the Medial Market Requirements workgroup with the results of the other workgroups, the MJCSG could match the Military Health System needs with available platforms that support those needs ensuring currency as well as efficiency. The MJCSG noted much use would have to be made of civilian practice standards.

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- Lengthy discussion on the Deployment Force Sizing Workgroup Draft Plan served to better define the scope of the workgroup's analysis. The consensus reached included a full-scale analysis of the way the Military Health System provides medical care during deployments. Included in this scope is the organizational structure of the deployed medical system. It was noted at this time that, under the charter of the MJCSG, considerations of the impacts of BRAC recommendations on the Military Health System's organizational construct was within the scope of the MJCSG's analysis. The MJCSG members noted the analysis of the Deployment Force Sizing workgroup might also include reviewing the operational concept for deployment of medical forces to the various conflict types.
- The MJCSG noted, although the geographical scope of BRAC 2005 included CONUS and US territories, forward-based forces would have to be included in the MJCSG workgroups' analysis.
- Discussion on the names and scope of the Medical Market Requirements; Research, Development, and Acquisition; and the Joint Medical Infrastructure Workgroups proposed the alternative that the Medical Research, Development, and Acquisition Workgroup include logistics to allow for a comprehensive analysis of the supply cycle. After further discussion, the MJCSG consensus was the medical logistics part was part of the Joint Medical Infrastructure Workgroup. The MJCSG noted the Joint Medical Infrastructure Workgroup included Class VIII supplies, contracting, and pharmacy.
- The MJCSG noted the need to include Reserve Components, as appropriate, within their analyses.

GEORGE P. TAYLOR, JR.
Lieutenant General, USAF, MC, CFS
Chair

Attachments:
1. Agenda
2. Draft MJCSG report
3. Education and Training Workgroup Draft Plan
4. Medical Market Requirements Workgroup Draft Plan
5. Medical Research, Development, and Acquisition Workgroup Draft Plan
6. Joint Medical Infrastructure Workgroup Draft Plan

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Medical Joint Cross Service Group Meeting

03/28/2003

Meeting called by:	Chair	Type of meeting:	Routine
Note taker:	Col Hamilton		

Please read:

Agenda

Chair Comments	Chair	5
Standard Items		
Minutes Review	Col Hamilton	3
Group Reports		90
Closing Remarks	Chair	5

Additional Information

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Report on the Medical Joint Cross Service Group Plan for BRAC 2005

Purpose: This report provides the strategic plan that the Medical Joint Cross Service Group (MJCSG) will use to develop its inputs for the BRAC 2005 recommendations**.**

Section I. Scope and Functions: The MJCSG's scope includes nearly all functions within the Military Health System. These functions are broadly divided into the following functions:

a. Education and Training (add definitions)
b. Medical Market Management
c. Deployment Force Sizing
d. Medical R&D
e. Infrastructure

This division appears to provide the best coverage of the various functions within the Military Heath System. This grouping of functions provides an effective framework for evaluating the potential for cross service and joint opportunities for improving the Military Health System's military value while emphasizing its continued transformation.

Section II. Subfunctions and Excluded Functions: Each Category is further divided into subfunctions. In addition, specific functions are excluded as defined below.

a. Education and Training
    1) Subfunctions
        i. Graduate Medical Education
        ii. Entry medical training
        iii.
    2) Excluded functions
b. Medical Market Management
    1) Subfunctions
        i. Private sector care management
        ii. Direct care system design
        iii.
    2) Excluded functions
c. Deployment Force Sizing
    1) Subfunctions
        i. Deployed Medical Capabilities
        ii. Air Evacuation System
        iii. Casualty Management
        iv. Homeland/Home Station Defense
    2) Excluded functions
d. Medical R&D
    1) Subfunctions
        i. Clinical Modernization
        ii. Deployed medical Modernization
        iii. WMD Defense, Prophylaxis, and Treatment
    2) Excluded functions
e. InfrastructureSubfunctions

i. Deployed Medical logistics
ii. Investment Equipment Management
iii. Information systems development and management
iv. Military Construction
v. Facility management

2) Excluded functions

Section III. Analytical Approach: The analytical approach will take advantage of data sets already in use throughout the Military Health System that can be mined for information on the performance of the various medical facilities. Each functional category will develop metrics and accomplish an analysis, using approved techniques, that results on a scoring of facilities. These scores will be weighted and combined using an approved methodology, such as linear regression analysis, to provide a final recommendation for further consideration. The notional metrics include:

1. Education and Training
2. Medical Market Management
3. Deployment Force Sizing
4. Medical R&D
5. Infrastructure

Section IV. Organizational Structure: To accomplish this effort within the time remaining, the MJCSG has chartered five groups, encompassing each of the broad functional categories and headed by a MJCSG member, to deliberate the functional analysis. Each of these five subgroups may develop subgroups to address a subfunction as necessary. Final deliberations and scoring will take place wholly within the MJCSG. The current assignment of responsibilities:

1. Education and Training - VADM Cowan (BuMED)
2. Medical Market Management - Mr. Ford (ADS(HA))
3. Deployment Force Sizing - RADM Mateczun (J4-MRD)
4. Medical R&D - MG farmer (Deputy SG, Army OTSG)
5. Infrastructure - BG Hufstader (USMC)

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BRAC 2005 MEDICAL JOINT CROSS-SERVICE GROUP (JCSG)

Working Group on Medical Education and Training

PURPOSE: Establish a Functional Working Group on Medical Education and Training (MET) under the BRAC 2005 Medical Joint Cross-Service Group

MISSION: To perform a cross-service analysis of Joint Medical Education and Training, with a comprehensive review of DoD requirements. The MET will perform detailed and standardized analyses of all areas under their purview, using certified date to develop recommendations to the JCSG.

Inclusions:

- Advanced Corpsmen and Medic Training
- Medical and Dental Technical Training
- Resuscitation Training Courses
- Leadership, Management and Executive Development
- Graduate Medical and Dental Education
- Advanced Nursing Education
- Management Degree Programs
- Health Professions Scholarship Program
- Uniformed Services University of Health Sciences
- Joint Operational Medicine Training
- Professional Continuing Education Programs

Inclusions selected for potential cross-leveling between services, and possible cost savings from alignment or closure of redundant programs.

Exclusions:

- Basic Corpsman and Medic Training
- Medical Officer Indoctrination School
- Service Specific Operational Medical Training and Education

Exclusions selected because of predominant Service-Specific features of basic entry training into Service Medical Departments, with little opportunity for consolidation or alignment.

ORGANIZATIONAL STRUCTURE: MET Interagency Process Team (IPT) will consist of a Chairman reporting to the Medical JCSG, and uniformed representatives from HA/TMA, JCS, and Medical Departments of the Army, Navy, and Air Force. JCSG oversight will be the responsibility of VADM Michael Cowan, Navy Surgeon General. Members and Chair will be Officers in the rank of O-4 to O-6, with significant experience in management and analysis. They will be nominated by their parent organizations and approved by the Chairman of the Medical JCSG. Ad Hoc membership to include members of other Federal Agencies (DVA, HHS, USCG, DHS) may be utilized when appropriate. Sub-IPT working groups may be created as required.

The MET IPT will meet and work as required to accomplish the mission within allotted timelines using the IPT Milestone Process. Monthly routine progress reports, and additional reports as required, will be submitted to the JCSG through VADM Cowan.

ANALYTICAL APPROACH:

Criteria:

1. Functional Military Value to be primary consideration
2. Return on Investment
3. Economic impact

Notional Metrics:

MILITARY MISSION VALUE:

- Joint Training meets requirements of Mission Essential Task List (METL)
- Certification of graduates by national certifying organizations
- Training program certification by professional oversight bodies
- Meet unique Military mission requirements
- Functional commonalities among Services

RETURN ON INVESTMENT:

- Per capita throughput costs/ throughput analysis
- Business case analysis of civilian alternatives
- Applicability of dispersed, web-based learning modules
- Use “fully burdened” business case analysis
- Leverage other Federal Agencies where useful
- Effect on end-strength
- Cost savings or avoidance by contracting training centers of excellence for didactic portions of training programs

ECONOMIC IMPACT:

- Business Case Analysis (BCA) of alternatives (civ vs mil)
- BCA of interservice and interagency program consolidation
- Economic analysis of communities with realignments or closures

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BRAC 2005 Medical Joint Cross-Service Group (JCSG)
Bureau of Medicine and Surgery
Medical Education & Training Review

25 Mar 2003

Category	Currently Joint	Recommend for Study	Leave Navy Only
Enlisted Technical Training			
Allergy/Immunization	X(tri-service)		
Hospital Corps School - General Duty Corpsman			X
Field Medical Svc Tech			X
Field Dental Svc Tech			X
Biomedical Photo Tech		X	
Maxillofacial Tech		X	
Aerospace Phys Tech		X	
Optician Tech	X (w/ Air Force)	X	
Biomed Tech Adv	X (tri-service)	X	
Biomed Tech Basic	X (tri-service)	X	
Dental Asst Tech Basic	X (w/ AF)	X	
Dental Pros Tech Basic	X (tri-service)	X	
Dental Pros Tech Adv	X (tri-service)	X	
Ortho Tech	X (tri-service)	X	
Histopath Tech	X (tri-service)	X	
Cyto Tech	X (tri-service)	X	
Dental Hyg		X (currently civilian)	
Search & Rescue Med Tech		X (currently OJT)	
CV Tech		X	
Nuc Med Tech	X (tri-service)	X	
Surface Force IDC			X
Prev Med Tech		X	
Hemodialysis Tech		X	
Ocular Tech		X	
ENT Tech	X (w/ Air Force)	X	
Radiographer Basic		X	
Radiographer Adv		X	
Electroneuro Tech	X (tri-service)	X	
PT Tech	X (w/ Army)	X	
OT Tech	X (w/ Army)	X	
Rx Tech		X	
OR Tech		X	
Psych Tech		X	
Med Deep Sea Diving IDC			X
Derm Tech		X	
Medical Lab Tech		X	
Respiratory Tech	X (w/ Army)	X	
Med Admin Tech		X	
Dental Equip Tech		X (currently under study)	

Category	Currently Joint	Recommend for Study	Navy Only
Resuscitation Training Courses			
ACLS		X	
ATLS		X	
PALS		X	
TNCC		X	
Prehospital Trauma Life		X	
EMT		X	
BLS		X	
C-4	X (tri-service)	X	
Leadership, Mgt, Exec Training Courses			
Fiscal & Materials Mngt Training Course (FMMTC)		X	
Patient Administration		X	
SMRCC		X	
POMI		X	
Joint Medical Planning Course	X (tri-service)	X	
Clinical Management		X	
Interagency Executive Medicine	X (tri-service)	X	
TRICARE Financial Mngt Program		X	
Management Develop Course * (under review)		X	
Human Resource Management * (under review)		X	
Designing Education Programs (DEP)		X	
Health Informatics Seminar	(Under ITRO Study)	X	
Naval Post-Graduate School			
Masters Operations Research			
Masters Manpower Mngt.			
Masters Financial Mngt.			
Masters Education & Training			
Masters Information Systems Technology			
AMEDD C&S			
Interservice Physician Assistant Program	X (tri-service)		
U.S. Army Baylor Graduate Program in Health Care Admin	X (tri-service and VA)		
Physical Therapy	X (tri-service)		
Graduate Medical Education			
National Capital Consort	X (tri-service)	X	
NOMI Aerospace Med	X (tri-service)	X	
San Diego		X	
Portsmouth		X	
Jacksonville		X	
Bremerton		X	
Camp Lejeune		X	
Camp Pendleton		X	
Pensacola		X	
Graduate Dental Education			
Orthodontics	X (tri-service)	X	

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Category	Currently Joint	Recommend for Study	Navy Only
OMFS	X (tri-service)	X	
Oral Facial Pain	X (tri-service)	X	
Prosthodontics	X (tri-service)	X	
Periodontics	X (tri-service)	X	
Pediatric Dentistry	X (tri-service)	X	
Comprehensive Dentistry	X (tri-service)	X	
Dental Public Health	X (tri-service)	X	
Oral Medicine	X (tri-service)	X	
Advanced Nursing Programs			
Critical Care		X	
Perioperative		X	
Other DUINS		X	
L&D		X	
Management Degree Programs			
Baylor	X (tri-service)		
Other Management DUINS (MBA, HCA, Clinical Masters, Phd)		X	
Health Professions Scholarship Programs			
Medical / Dental	X (tri-service)	X (joint administration?)	
USUHS			
Medical School	X (Tri-service)		
Nurse Anes. Prgm.	X (Tri-service)		
Clinical Psychology Prgm.	X (Tri-service)		
Pharmacology Prgm.	X (Tri-service)		
Nurse Practitioner	X (Tri-service)		
Perioperative Nursing Prgm.	X (Tri-service)		
Joint Forces Operational Medical Training			
FMF IDC	X (w/ SOCOM)	X	
FMF Recon Tech Basic	X (w/ SOCOM)	X	
Special Ops IDC	X (w/ SOCOM)	X	
Special Ops Tech	X (w/ SOCOM)	X	
Operational Medical Training			
Fleet Hospital Operations & Training Center (FHOTC)		X	
Multiple Short Courses (Wilderness Medicine, Cold Weather Medicine)		X	
Tropical Medicine	X (tri-service)	X	
Naval Undersea Medical Institute			
Radiation Health Indoctrination Program		X	
Undersea Medical Officer Candidate (UMOC) Course			X
Undersea Medical IDC			X
Submarine Force IDC			X

DCN 1348

Category	Currently Joint	Recommend for Study	Leave Navy Only
Radiation Health Officer Course		X	
Surface Warfare Medicine Institute			
Commander, Amph Task Force – Surgeon Course (CATF-S)		X	
Surface Warfare Medical Officer Indoc Course (SWMOIC)			X
Surface Warfare Medical Dept Officer Indoc Course			X
Medical Regulating Course (MEDREG)		X	
Medical Augmentation Program Training (M+1 Training)		X	
Operational Medicine Symposia (OPMED)		X	
Naval Aviation Survival Training Program			
Naval Aerospace Medical Institute			
Flight Surgeon Training		X	
Aviation Medicine Technician		X	
Continuing Medical, Dental, and Nursing Education			
Multiple courses		X	
Category	**Currently Joint**	**Recommend for Study**	**Leave Navy Only**
Enlisted Technical Training			
Allergy/Immunization	X(tri-service)		
Hospital Corps School - General Duty Corpsman			X
Field Medical Svc Tech			X
Field Dental Svc Tech			X
Biomedical Photo Tech		X	
Maxillofacial Tech		X	
Aerospace Phys Tech		X	
Optician Tech	X (w/ Air Force)	X	
Biomed Tech Adv	X (tri-service)	X	
Biomed Tech Basic	X (tri-service)	X	
Dental Asst Tech Basic	X (w/ AF)	X	
Dental Pros Tech Basic	X (tri-service)	X	
Dental Pros Tech Adv	X (tri-service)	X	
Ortho Tech	X (tri-service)	X	
Histopath Tech	X (tri-service)	X	
Cyto Tech	X (tri-service)	X	
Dental Hyg		X (currently civilian)	
Search & Rescue Med Tech		X (currently OJT)	
CV Tech		X	
Nuc Med Tech	X (tri-service)	X	
Surface Force IDC			X
Prev Med Tech		X	
Hemodialysis Tech		X	
Ocular Tech		X	
ENT Tech	X (w/ Air Force)	X	
Radiographer Basic		X	

Radiographer Adv		X	DCN: 11348
Electroneuro Tech	X (tri-service)	X	
PT Tech	X (w/ Army)	X	
OT Tech	X (w/ Army)	X	
Rx Tech		X	
OR Tech		X	
Psych Tech		X	
Med Deep Sea Diving IDC			X
Derm Tech		X	
Medical Lab Tech		X	
Respiratory Tech	X (w/ Army)	X	
Med Admin Tech		X	
Dental Equip Tech		X (currently under study)	
Category	**Currently Joint**	**Recommend for Study**	**Leave Navy Only**
Resuscitation Training Courses			
ACLS		X	
ATLS		X	
PALS		X	
TNCC		X	
Prehospital Trauma Life		X	
EMT		X	
BLS		X	
C-4	X (tri-service)	X	
Leadership, Mgt, Exec Training Courses			
Fiscal & Materials Mngt Training Course (FMMTC)		X	
Patient Administration		X	
SMRCC		X	
POMI		X	
Joint Medical Planning Course	X (tri-service)	X	
Clinical Management		X	
Interagency Executive Medicine	X (tri-service)	X	
TRICARE Financial Mngt Program		X	
Management Develop Course * (under review)		X	
Human Resource Management * (under review)		X	
Designing Education Programs (DEP)		X	
Health Informatics Seminar	(Under ITRO Study)	X	
Naval Post-Graduate School			
Masters Operations Research			
Masters Manpower Mngt.			
Masters Financial Mngt.			
Masters Education & Training			
Masters Information Systems Technology			
AMEDD C&S			
Interservice Physician Assistant Program	X (tri-service)		
U.S. Army Baylor Graduate Program in Health Care Admin	X (tri-service and VA)		

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Physical Therapy	X (tri-service)		
Graduate Medical Education			
National Capital Consort	X (tri-service)	X	
NOMI Aerospace Med	X (tri-service)	X	
San Diego		X	
Portsmouth		X	
Jacksonville		X	
Bremerton		X	
Camp Lejeune		X	
Camp Pendleton		X	
Pensacola		X	
Graduate Dental Education			
Orthodontics	X (tri-service)	X	
Category	**Currently Joint**	**Recommend for Study**	**Leave Navy Only**
OMFS	X (tri-service)	X	
Oral Facial Pain	X (tri-service)	X	
Prosthodontics	X (tri-service)	X	
Periodontics	X (tri-service)	X	
Pediatric Dentistry	X (tri-service)	X	
Comprehensive Dentistry	X (tri-service)	X	
Dental Public Health	X (tri-service)	X	
Oral Medicine	X (tri-service)	X	
Advanced Nursing Programs			
Critical Care		X	
Perioperative		X	
Other DUINS		X	
L&D		X	
Management Degree Programs			
Baylor	X (tri-service)		
Other Management DUINS (MBA, HCA, Clinical Masters, Phd)		X	
Health Professions Scholarship Programs			
Medical / Dental	X (tri-service)	X (joint administration?)	
USUHS			
Medical School	X (Tri-service)		
Nurse Anes. Prgm.	X (Tri-service)		
Clinical Psychology Prgm.	X (Tri-service)		
Pharmacology Prgm.	X (Tri-service)		
Nurse Practitioner	X (Tri-service)		
Perioperative Nursing Prgm.	X (Tri-service)		
Joint Forces Operational Medical Training			
FMF IDC	X (w/	X	

	SOCOM)		DCN: 11348
FMF Recon Tech Basic	X (w/ SOCOM)	X	
Special Ops IDC	X (w/ SOCOM)	X	
Special Ops Tech	X (w/ SOCOM)	X	
Operational Medical Training			
Fleet Hospital Operations & Training Center (FHOTC)		X	
Multiple Short Courses (Wilderness Medicine, Cold Weather Medicine)		X	
Tropical Medicine	X (tri-service)	X	
Naval Undersea Medical Institute			
Radiation Health Indoctrination Program		X	
Undersea Medical Officer Candidate (UMOC) Course			X
Undersea Medical IDC			X
Submarine Force IDC			X
Category	**Currently Joint**	**Recommend for Study**	**Leave Navy Only**
Radiation Health Officer Course		X	
Surface Warfare Medicine Institute			
Commander, Amph Task Force – Surgeon Course (CATF-S)		X	
Surface Warfare Medical Officer Indoc Course (SWMOIC)			X
Surface Warfare Medical Dept Officer Indoc Course			X
Medical Regulating Course (MEDREG)		X	
Medical Augmentation Program Training (M+1 Training)		X	
Operational Medicine Symposia (OPMED)		X	
Naval Aviation Survival Training Program			
Naval Aerospace Medical Institute			
Flight Surgeon Training		X	
Aviation Medicine Technician		X	
Continuing Medical, Dental, and Nursing Education			
Multiple courses		X	

Metric:

#1: Will the joint training meet the requirements of the Mission Essential Task List (METL)?

#2: Comprehensive Cost Analysis-

Total Cost of Existing Program(s) (Fixed + Variable) compared to total cost of joint program – costs to include one-time new construction and/or recurring maintenance and repair. Cost must clearly identify any additional, service specific training/PCS travel required in addition to core training.*

DCN: 11348

CHARTER

Service Specific Medical and Dental Manpower Requirements Team
Medical and Dental Market Requirements Group

1. **Purpose:** The Service Specific Medical and Dental Manpower Requirements Team exits in support of the Medical and Dental Market Requirements Group as part of the BRAC 05 deliberations conducted by the MJCSG.

2. **Scope of Activity:**

   a. Discern through BRAC 05 data calls the personnel assigned in supporting the capabilities of deployable military medical forces in the Army, Navy, and US AF.
   b. Assimilate and analyze collected data and offer conclusions and/or recommendations to the Medical and Dental Market Requirements Group concerning military value and transformational opportunities for the total manpower for the MHS that need to be active duty, DoD civilian or contractors.
   c. Approved DoD Strategic guidance will guide the team's analyses of all data.

3. **Membership:**

Mr. Pradeep G. Gidwani HA/TMA	Team Leader
Col Ray Cunningham, USAF, Medical Corps	Team Member
CDR Scott Jones, USN, Medical Service Corps	Team Member
CDR Rich Franco, USN, Medical Service Corps	Team Member
LTC Guy Benjamin, USAF, Medical Corps	Team Member
Mr. Herbert Coley, USA, Office of the SG	Team Member
MAJ Karrie Fristoe, USA, Medical Service Corps	Team Member
LCDR Tim Weber, USN, Medical Service Corps	Team Member

   Additional members may be added as required.

4. **Meetings:**

   This team will conduct business via face-to-face meetings, email, video, teleconferences, and collaborative web sites such as the Tricare Management Activity.

5. **Deliverables:**

   The deliverables for this team will be driven by the larger analytical requirements of the Deployment Force Sizing Sub-Group and the MJCSG. The following exemplifies the types of deliverables that this team will provide.

- What excess capacities exist in terms of deployable military medical capabilities?
- What capabilities should reside predominantly in one service and minimized in other services?
- What part of the services' deployable force structure is resourced from fixed (non-deployable) agencies?

6. Duration:

This charter is effective as of July 03 and will end upon direction of the MJCSG Chair or the Deployment Force Sizing Sub-Group.

PRADEEP G. GIDWANI
Service Specific Medical and Dental
Manpower Requirements Team Leader

DCN: 11348

BRAC 2005 MEDICAL JOINT CROSS-SERVICING GROUP (JCSG)

Working Group on Health Service Support Readiness Infrastructure

PURPOSE: Establish a Functional Working Group on Health Service Support Readiness Infrastructure (HRI) under the BRAC 2005 Medical Joint Cross-Service Group.

MISSION: To perform a cross-service analysis of Health Service Support Readiness Infrastructure, with a comprehensive review of DoD requirements – specifically looking at maximizing warfighting capability and efficiencies to include those required for Homeland Defense. The Group will perform detailed and standardized analyses of all areas under their purview, using certified data to develop recommendations to the JCSG.

Potential Inclusions:

- Organizational structure
- Bottoms up review of manpower structure
- Deployment Force Sizing – Task Force Organized
- Class VIIIA oversight and management

Inclusions selected for potential cross-leveling between services, and possible cost savings from alignment and closure of redundant areas.

Potential Exclusions

- DEPMEDS

Exclusions selected because of predominant Service-specific features requirements.

ORGANIZATIONAL STRUCTURE: HRI Interagency Process Team (IPT) will consist of a Chairman reporting to the Medical JCSG, and uniformed representatives from HA/TMA/JCS, and Medical Departments of the Army, Navy, and Air Force. JCSG oversight will be responsibility of RDML J. Mateczun, Joint Staff Surgeon. Members and Chair will be Officers in the rank of O-4 to O-6, with significant experience in readiness, management and analysis. They will be nominated by their parent organizations and approved by the Chairman of the Medical JCSG. Sub-IPT working groups may be created as required.

The HRI IPT will meet and work as required to accomplish the mission within allotted timelines using the IPT Milestone Process. Monthly routine progress, and additional reports as required, will be submitted to the JCSG through RDML Mateczun.

ANALYTICAL APPROACH:

Criteria:

DCN: 11348

BRAC 2005 MEDICAL JOINT CROSS-SERVICING GROUP (JCSG)

Working Group on Health Service Support Readiness Infrastructure

1. Military Value
2. Return on Investment
3. Impacts

Notional Metrics:

MILITARY VALUE:

- Meets requirements for US forces to defend the homeland, deter war in four regions, engage on two fronts and defeat one of those enemies
- Meets unique Military mission requirements

RETURN ON INVESTMENT:

- Business case analysis of civilian alternatives
- Effect on end-strength
- Cost savings or avoidance by contracting out to alternative logistics agencies

ECONOMIC IMPACT:

- Business Case Analysis (BCA) of alternatives
- BCA of interservice personnel/program consolidation
- BCA of effects of AC deployment on healthcare delivery at MTF's and Clinics

BRAC 2005 MEDICAL JOINT CROSS-SERVICING GROUP

DCN: 11348

Working Group on HSS Readiness Infrastructure

MISSION: To perform a cross-service analysis of Health Service Support Readiness Infrastructure, with a comprehensive review of DoD requirements – specifically looking at maximizing warfighting capability and efficiencies to include those required for Homeland Defense. The Group will perform detailed and standardized analyses of all areas under their purview, using certified data to develop recommendations to the JCSG.

DELIBERATIVE DOCUMENT – FOR DISCUSSION PURPOSES ONLY
DO NOT RELEASE UNDER FOIA

BRAC 2005 MEDICAL JOINT CROSS-SERVICING GROUP

Working Group on HSS Readiness Infrastructure

POTENTIAL INCLUSIONS:

- Organizational structure
- Bottoms up review of manpower structure
- Deployment Force Sizing – Task Force Organized
- Class VIIIA oversight and management

DELIBERATIVE DOCUMENT – FOR DISCUSSION PURPOSES ONLY
DO NOT RELEASE UNDER FOIA