

**MINUTES OF THE APRIL 8, 2005 MEETING OF THE MJCSG PRINCIPALS**

**LOCATION:** Pentagon, Rm 2C554, 1430-1530

**Attending:** LtGen Taylor – Chair; VAdm Arthur- USN/SG; MGen Webb USA/SG; Dr. Opsut – Representing ASD(HA)/CP&P; Mr. Yaglom – USA SG; Col Hamilton - Secretary; CAPT Hight - USN; Maj Harper – AF/SGSF; Maj Fristoe – HA/TMA; Maj Guerrero – AF/SG; Maj Cook – HA Analyst; Mr. Porth – OSD/BRAC; Mr. Curry - USA OTSG; Mr. Barton – AF Analyst; CDR Bradley - Navy Analyst; Maj Coltman – AF/Recorder

**Decisions:**

- **Approved** use of consolidated 20% instructor and 10% support staff savings methodology to MED-05. **(MJCSG approved with 4-0 vote)**
- **Previous Decision Upheld** to reject identified MJCSG scenarios after re-run of COBRA/Criteria 5 Model eliminating Base X and adjudicating manpower savings because of negligible savings. **(MJCSG voted 4-0 to uphold previous decision)**
- **Hold** on decision/providing response to Army for follower recommendations pending further analysis of data and methodology. **(MJCSG voted 5/0 to hold)**

**Action Items:**

- 0-6 Lead Follow-up:
  - De-conflict and integrate medical functions across all proposed recommendations
  - HCS to track and provide updates to the MJCSG on following scenarios as information becomes available and requests for MJCSG input
    - Re-evaluate/validate data, network capability and refine methodology in determining medical impact analysis and recommendation in response to Army following scenarios
  - Continue to work issues and refine data identified in MED-05 discussion

**Meeting Overview:**

- Voting Members: 4 present/2 absent
- Chair briefed that the amended MED-028 was approved through ISG and will be presented to the IEC on Monday. Consolidation efforts are now underway to package and pull together all the recommendations and identify the lead or candidate owner. Three other JCSGs are closing bases and are working integration and packaging. This process will bring all the pieces together and we will not lose numbers but may become part of another larger scenario. The Chair stated that the MJCSG owns MED-012 to clear Brooks City Base and will need to pull all the functions together as a larger scenario. In addition, with the revised version of MED-002 to clear the campus at Walter Reed efforts are being worked to rearrange and/or adjust functions at Bethesda and Belvoir. Continue to work integration and packaging efforts. **(Action Items; 0-6 Follow-up)**
- The HCS rep briefed the results of the COBRA re-runs on the MJCSG rejected scenarios providing overview and led discussion on the manpower savings with the elimination of Base X (see slides). Also highlighted were the rationale used by the MJCSG to base their military judgment to reject these scenarios. Since there was no substantial change in savings the Chair moved to maintain previous decision to reject these scenarios.
  - **MJCSG voted 4-0 to uphold previous decisions (see slide 3)**

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- Staff then briefed on the Army Follower Recommendation Analysis (see slides) using the MJCSG approved methodology highlighted in the presentation. The Army submitted information on troop movement on six specific bases and this data was applied to the formula. Three of the sites (Riley, Lee, Sill) have the excess capacity or network capability to absorb the additional workload. However, according to the data and the analysis, the remaining three sites would require expansion to meet the additional medical demands of incoming personnel and family members. The Chair questioned the numbers particularly in comparing usage between Forts Bliss and Benning. He also requested HCS to look at other alternatives for Fort Carson considering the excess infrastructure created with the closure of the inpatient mission at the AF Academy. Could this space be converted into clinic space to be used by Fort Carson to meet the demand for expanding their specialty care clinics? The Army rep requested re-validation of the data submitted and requested they re-look at network availability. The Chair further requested review/validation of data and methodology, particularly related to Fort Bliss. **(Action Items; HCS Follow up)**
  - The HCS presented recommendations for expansion as indicated on the slides.
    - **MJCSG voted 5/0 to Hold** on decision/providing response to the Army pending further analysis
- The E&T rep briefed updated COBRA and other issues related to MED-005 Consolidating Basic & Specialty Enlisted & Officer Training. The Secretary informed the group that MED-005 has increased in costs and extended payback years resulting from applying the new version of COBRA, which includes the community support functions. Another issue has been trying to secure available admin space at Fort Sam Houston for conversion to classroom space instead of using MILCON which would significantly increase the one time costs. Initially the SMEs projected a conservative 10% savings for consolidating instructor and support numbers. Applying the E&T JCSG 10% savings for instructor staff and 20% savings for support staff would make it consistent with the E&T approach. Continue to work and validate data and research options for obtaining available existing infrastructure at Fort Sam Houston. **(Action Items; E&T Follow up)**
  - The E&T recommended applying the E&T JCSG consolidated instructor/support staff saving methodology to MED-005 **(MJCSG voted 4-0 to approve)**
- Staff presented how recommendations will be packaged. Medical JCSG stand alones include MED-022, MED-005, and MED-16 because of difference in strategy. Other MJCSG recommendations may be packaged under MILDEPs or other JCSGs depending on who has been identified as by the BRAC office as the lead. All inpatient closures associated with low ADPL and/or MIL VAL will be grouped under MED-0054R with Medical as the lead. The combined cost, savings, and payback were discussed. MED-0030 USUHS is lead with HSA-0114 Movement of HQ SG staff into the vacated space; however, if HSA-0114 gets pulled their strategy will be to move to Belvoir. MED-0002R is lead on clearing the Walter Reed campus and anything moving out of Forest Glenn. MED-0012R is lead in vacating Brooks City Base and will include a H&SA function and several TECH scenarios. COBRA numbers are still being run on these. Continue efforts will to clarify and make adjustments to packaging as guidance and additional information becomes available. **(Action Item; Follow up)**
- The Secretary outlined the schedule for the next meeting to include the MILCON brief, Army follower scenario updates and revised recommendations, and information on final report.

- NEXT MEETING: MJCSG Principals Meeting, 15 Apr 05, 1430-1530, Pentagon, Rm 2C554



GEORGE P. TAYLOR, JR.

Lieutenant General, USAF, MC, CFS  
Chair

Attachments:

1. Agenda
2. Combined Brief



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**Medical Joint Cross Service Group  
Principles Mtg**

**8 Apr 05**

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**Agenda**

- **Opening Comments**
- **Review of Rejected Scenarios**
- **Army Follower Scenarios**
- **Scenario Review**
  - MED-0002
  - MED-0005
  - MED-0016
- **Recommendation Packaging**

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## Scenarios Disapproved

### Update with "Base X" & Criteria 5 Model

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Scenario	Old COBRA and BASE X			COBRA 6.09 and No Base X			Reason for disapproval
	NPV	Annual Savings/Cost	Payback Year	NPV	Annual Savings/Cost	Payback Year	
MED004 LeMoore	(\$8,915)	(7,062)	Never	(\$40,334)	(\$2,637)	Never	Lack of Network capability
MED004 West Point	(\$2,661)	(3,553)	Never	(\$18,658)	(\$994)	Never	Weather/distance to Civilian hospital Sport Med fellowship; Cost
MED004 Beaufort	(\$9,170)		Never	\$23,501	\$1,847	1 year	Lack of Network capability
MED014 Eustis (all)	124,582	9,276	Immediate	\$173,808	\$12,371	Immediate	Vote to hold until Army restoration Total decrease in military of 1,901 as of 6 April 05
MED015 Langley	(\$6,254)	(2,123)	Never	\$7,802	\$948	6 years	Military value for Eustis lower
MED040 Elmendorf	(\$8,715)	(5,159)	Never	(\$42,115)	(\$2,542)	Never	Population increase at Richardson
MED041 Jackson	83,662	6,592	1 year	119,559	8,806	Immediate	Negligible increase in MILVAL; 80% avg daily census of civilian medical facilities
MED043 Polk	(\$7,343)	(1,637)	Never	(\$11,088)	(\$470)	Never	Joint Readiness Training Center
MED044 Riley	(\$9,423)	(3,812)	Never	(\$36,426)	(\$2,111)	Never	Population increasing
MED045 Wainwright	(\$3,827)	(1,293)	Never	(\$17,072)	(\$843)	Never	Lack of Network capability
MED057 Benning	(\$9,060)	(5,679)	Never	(\$52,403)	(\$2,984)	Never	Population increasing
<b>Model Update Change Military Value</b>							
MED047 Pensacola	110,001	8,979	1 year	\$217,792	\$16,065	Immediate	Fence line refined - Model update changed MILVAL
MED042 Leonard Wood	(\$8,598)	(4,978)	Never	(\$44,883)	(\$2,539)	Never	Model update changed MILVAL

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## Army Follower Recommendation Analysis

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## Analysis of Medical Impact

- Calculate ADFM/AD Ratio
- Use ratio to Calculate # ADFM & Total shift
- Calculate additional demand in RVUs & RWP's
  - Additional Pop \* RVUs (or RWP's) per "User"
- Calculate resources needed to support additional demand
  - Inpatient: Beds
  - Outpatient: Providers, Support Staff & Rooms needed to
- Compare needed resources to MTF excess capacity
  - "Excess" Beds/Rooms (Equipped not Staffed/Not In Use)
  - Excess Workload Capacity
- Recommend absorbing workload into gaining facility(ies) or network if excess capacity exists
- If no excess capacity, recommend expansion

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## Data

	Bliss	Benning	Riley	Lee	Carson	Sill
Add. Population	39,016	21,272	18,450	11,471	8,796	4,649
Add. Beds	74	16	10	N/A	6	4
"Excess Beds"	48	2	16	N/A	21	30
Net Beds Rq'd	26 <sup>++</sup>	14 <sup>**</sup>	0	N/A	0	0
Add. PC Rooms	24	44	20	26	12	14
"Excess" PC Rms	34	13	21	0	0	40
Net PC Rms Rq'd	0	31 <sup>++</sup>	0	26 <sup>*</sup>	12 <sup>*</sup>	0
Add. SC Rooms	75	29	17	11	21	8
"Excess" SC Rms	15	3	75	0	0	20
Net SC Rms Rq'd	60 <sup>**</sup>	26 <sup>++</sup>	0	11 <sup>*</sup>	21 <sup>++</sup>	0
Network Adequate						
InPt	NO	YES	N/A	N/A	N/A	N/A
PC OutPt	N/A	NO	N/A	YES	YES	N/A
SC OutPt	YES	NO	N/A	YES	MIN	N/A

<sup>\*</sup> Excess Capacity at MTF can Absorb Workload.      **++ Expansion Recommended**  
<sup>\*\*</sup> Network is Adequate to Absorb Workload

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**MED 005**  
**Basic & Specialty**  
**Enlisted & Officer Medical Training**

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**COBRA**

	<b>24 Jan 05</b>	<b>08 Apr 05</b>
<b>One Time Costs</b>	<b>\$301M</b>	<b>\$360M</b>
<b>MILCON</b>	<b>\$227M</b>	<b>\$266M</b>
<b>NPV (FY2025)</b>	<b>\$112M</b>	<b>\$51M</b>
<b>Recurring Costs</b>	<b>- \$16M</b>	<b>- \$25M</b>
<b>Payback Year</b>	<b>2044 (34 years)</b>	<b>2029 (19 years)</b>
<b>O/E/C Reduction</b>	<b>37/111/40 = 188 (10% All)</b>	<b>61/177/133 = 371 (10% Instructor &amp; 20% Support)</b>
<b>O/E/C Relocations</b>	<b>114/637/110 = 861</b>	<b>144/799/111 = 1054</b>
<b>Student Relocations</b>	<b>4,386</b>	<b>4,965</b>

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## MJCSG Approval

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- Use Education JCSG consolidation savings methodology
  - 10% of instructor staff
  - 20% of support staff

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## Recommendations

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- Bliss
  - Expand Inpatient by 26 Beds (18,624 SF)
  - Absorb additional PC Workload into MTF
  - Send additional SC Workload to Network
- Benning
  - Send additional Inpatient Workload to Network
  - Expand Outpatient by 57 rooms (31 PC & 26 SC)
    - 51,526 SF (32,860 PC & 18,666 SC)
- Carson
  - Absorb additional InPt and PC Workload into MTF
  - Expand SC by 21 rooms (15,372 SF)
- Riley, Lee & Sill
  - Absorb additional Workload into MTF

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## Recommendation Packaging

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■ **Stand alone**

- MED-0022 McChord
- MED-0005 Basic and Spec Trng
- MED-0016 SAT

■ **Packaged to MILDEPS/Other JCSGs**

- DON-0030R New London
  - MED-0024 (Hyperbaric & Undersea Med to FGA)
- USAF-0122 Pope
  - Med-0017
- TECH-0009AR
  - MED-0024
  - MED-0025
  - MED-0028

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## Recommendation Packaging (cont'd)

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■ **MED-0054R**

- MED-0004a
- MED-0004b
- MED-0004c
- MED-0018
- MED-0049
- MED-0050
- MED-0052
- MED-0053

1 Time Cost	\$12M
Net Implementation Savings	\$218M
Annual Recurring Savings	\$51M
Payback Time	Immediate
NPV:	\$51M

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## Recommendation Packaging (cont'd)

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- MED-0030R USUHS
  - HSA-0114 Movement of HQ SG Staff
  
- MED-0002R
  - MED-0029 AFIP
  - ARMY-0253 WRAMC Closure
  - Movements out of FGA
    - MED-0024 RDA CoEs
    - TECH-0032 AFRL
  
- MED-XXXX
  - MED-0012R
  - HSA-141
  - MED-0057
  - MED-0024
  - TECH-0009A
  - TECH-0058

**Still Working...**

- 1 Time Cost
- Net Implementation Savings
- Annual Recurring Savings
- Payback Time
- NPV

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