

MINUTES OF THE APRIL 15, 2005 MEETING OF THE MJCSG PRINCIPALS

LOCATION: Pentagon, Rm 2C554, 1430-1530

Attending: LtGen Taylor – Chair; VAdm Arthur - USN/SG; Mr. Yaglom - representing USA/SG; Dr. Opsut – ASD(HA)/HB&FP; Col Hamilton – Secretary; CAPT Hight - USN; Col Jacob – USAF/SG; Maj Harper – AF/SGSF; Maj Cook – HA Analyst; Maj Guerrero – AF/SG; Maj Chapman – USA; COL Dieke – USA; Mr. Porth – OSD/BRAC; Mr. Curry - USA OTSG; Mr. Barton – AF Analyst; CDR Bradley - Navy Analyst; Maj Coltman – AF/Recorder

Decisions:

- **Approved** follower medical recommendations to Army as described in discussion (**MJCSG concurred with 5-0 vote**)
- **Approved** methodology for implementing rules for personnel savings in RDA scenario moves (**MJCSG approved with 5-0 vote**)
- **Approved** excluding HSO, NOSTRA, and NIMIC from MED-028 (**MJCSG agreed with 5-0 vote**)

Action Items:

- Finalize Final Report and provide input according to proposed timeline; suspense 20 Apr 05
- 0-6 Lead Follow-up:
 - Continue working candidate packaging and resolution
 - Finalize data validation/analysis on MED-028 for IEC brief
 - De-conflict and integrate medical functions across all proposed recommendations
 - HCS to track and provided updates to the MJCSG on following scenarios as information becomes available and requests for MJCSG input

Meeting Overview:

- Voting Members: 5 present/1 absent
- Chair opened the meeting by turning it over to staff to brief Candidate Packaging Resolution (see slides). The focus of consolidating packages is to pull together all the like functions, identify the lead or candidate owner, and combine the savings/cost to further validate benefits of recommended actions. Efforts continue to obtain and validate data for MED-028, which is scheduled to be briefed to the IEC on Monday. The Chair requests continued analysis and validation of the data and working candidate packaging. (**Action Items; 0-6 Follow up**)
- The HCS rep briefed on the Army Follower Recommendation Analysis follow-up after adjusting using M2 data and revising the previous analysis by looking at AD/ADFM utilization rates. Three of the sites (Riley, Lee, Sill) have the excess capacity or network capability to absorb the additional workload. The revised analysis indicates the remaining three sites would still require some expansion but much less than previously anticipated.
 - The HCS suggests MJCSG approve the following medical recommendations to the Army concerning the troop movements into the below sites:
 - Fort Bliss: Absorb some outpatient workload, send the excess to the network
 - Fort Benning: Send additional workload to the network; expand outpatient by 43 rooms (22 PC & 21 SC for a total of 38,692 square feet)

- Fort Carson: Absorb additional inpatient and PC workload, expand C1 to 13947 rooms (12,078 square feet) but consider utilization of USAFA available vacated space (20,091 square feet) due to inpatient closure
- Riley, Lee, and Sill: Absorb additional workload
(MJCSG voted 5/0 to approve recommendation)
- The RDA rep briefed and led discussion on implementing rules for personnel savings in RDA scenario moves (see slides). The rep recommended MJCSG approve the following:
 - Technical and Management Synergy: Apply a 15% savings to all FTEs in moves where a unit stands down a separate C2 infrastructure
 - Technical Synergy: 10% applied savings to all FTEs in units moving to locations where there is a larger critical mass in the sub-function mission area
 - Exception: 0% technical savings where a move is within the same geographic area
(MJCSG voted 5-0 to approve RDA methodology)
- Staff briefed on “BRACON Process & Timeline” (see slides). The rep described the proposed “big picture process” with TMA identified to provide technical oversight. Also discussed was MILCON dollars distribution, timelines, and implementation process which will ultimately flow to the Services and specific installations. Each Service lead has developed approaches to initiate the process within specific timeframes. The rep has proposed their team provide a preliminary economic analysis of the medical recommendation facility requirements to assist and support the Services and installations in this initiative. The MJCSG concurred with suggestion pending further guidance/policy from the BRAC. **(Info)**
- An AF rep briefed the plan for structure, drafting, and timeline for completing the final report (see slides). **(Info)**
- MED-028 Recommendation Clean Up: The E&T rep briefed follow up on MED-028 validating that the MJCSG concurred with excluding HSO, NOSTRA, and NIMIC from this recommendation. **(MJCSG approved with 5-0 vote)**
- The Secretary reviewed the proposed BRAC Commission Schedule (see attachment). Also informed the group there will be no more scheduled meetings unless required for any last minutes candidate changes or clarification issues, there may be a need for electronic approval for any last minutes changes. The focus now is on finalizing the final report, due on the 20 Apr 05 and finishing up any final revisions to the MJCSG candidate packages.
- NEXT MEETING: MJCSG Principals Meeting, TBA as required.



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

Attachments:

1. Agenda
2. Briefings
3. Proposed BRAC Commission Schedule Handout

MJCSG Principals Meeting

04/15/2005
2:30 PM to 3:30 PM
Pentagon, 2C554, Room 6

Meeting called by: Chair Type of meeting: Decisional
Note taker: Maj Coltman

Agenda

Opening Comments	Chair	5
MILCON Brief	CAPT Dieke	20
Resolution of Packaging	Maj Guerrero	10
Army Follow On	Dr. Opsut	10
Recommendation Updates/Final Numbers	Dr. Glenn	10
Final Report Structure/Timeline	Col Jacob	15
Around The Table	All	5
Closing	Chair	5

Additional Information

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



Medical Joint Cross Service Group Principals Mtg

15 Apr 05

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Agenda

- Opening Comments
- BRAC-CON
- Resolution of Packaging
- Army Follower Scenarios
- RDA Recommendation Update
- Final Report Structure/Timeline



CR Packaging

- **MED-0002R**
 - **Army-0243**
 - **MED-0002**
 - **MED-0024**
 - **MED-0029**
 - **TECH-0032**

Payback	9 years
NPV (savings)	\$492.8M
1x Costs	\$982.6M
Net Implementation Costs	\$692.3M
Annual Recurring Savings	\$117.3M

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CR Packaging

- **MED-0016R**
- **MED-0005**
- **MED-0016**

Payback	12 years
NPV (savings)	\$187.1M
1x Costs	\$975.3M
Net Implementation Costs	\$782.7M
Annual Recurring Savings	\$95.6M

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CR Packaging

■ MED-0022

Payback	Immediate
NPV (savings)	\$164.2M
1x Costs	\$1.1M
Net Implementation Costs	\$55.1M
Annual Recurring Savings	\$11.6M

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CR Packaging

- MED-0028R
 - MED-0024
 - MED-0028
 - TECH-0032

Payback	TBD
NPV (savings)	TBD
1x Costs	TBD
Net Implementation Costs	TBD
Annual Recurring Savings	TBD

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CR Packaging

- MED-0030R
- MED-0030
- HSA-115

Payback	4 years
NPV (savings)	\$233.9M
1x Costs	\$89.3M
Net Implementation Costs	\$66.2M
Annual Recurring Savings	\$30.1M

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CR Packaging

- MED-0054R
 - MED-0004a
 - MED-0004b
 - MED-0004c
 - MED-0018
 - MED-0049
 - MED-0050
 - MED-0052
 - MED-0053
 - MED-0054

Payback	Immediate
NPV (savings)	\$807.5M
1x Costs	\$12.9M
Net Implementation Costs	\$248.3M
Annual Recurring Savings	\$59.3M

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CR Packaging

- **MED-0057R**
 - MED-0012
 - MED-0057
 - HSA-0141
 - TECH-0009A
 - TECH-0058

Payback	3 yrs
NPV (savings)	\$731.9M
1x Costs	\$294.8M
Net Implementation Costs	\$82.2M
Annual Recurring Savings	\$83.3M

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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 & RWPs
 - Additional Pop * RVUs (or RWPs) per AD/ADFM “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



Data

as of 31Mar05	Bliss	Benning	Riley	Lee	Carson	Sill
Add. Population	39,016	21,272	18,450	11,471	8,796	4,649
Add. Beds	32 (74)	14 (16)	13 (10)	N/A	5 (6)	4 (4)
“Excess Beds”	48	2	16	N/A	21	30
Net Beds Rq’d	0 (26)	12**(14)	0	N/A	0	0
Add. Prov.	24	17	12	18	5	6
Add. PC Rooms	48 (24)	34 (44)	24 (20)	36(26)	10(12)	12(14)
“Excess” PC Rms	34	12	21	0	0	40
Net PC Rms Rq’d	14**(0)	22 ***(31)	3* (0)	36 *(26)	10*(12)	0
Add. Prov.	33	16	22	9	11	7
Add. SC Rooms	50 (75)	32 (29)	33 (17)	14 (11)	17 (21)	11 (8)
“Excess” SC Rms	15	3	75	0	0	20
Net SC Rms Rq’d	35 ***(60)	21 ***(26)	0	14 *(11)	17 ***(21)	0
Network Adequate						
InPt	N/A	YES	N/A	N/A	N/A	N/A
PC OutPt	YES	NO	N/A	YES	YES	N/A
SC OutPt	YES	NO	N/A	YES	MIN	N/A

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* **Excess Capacity at MTF can Absorb Workload.**
 ** **Network is Adequate to Absorb Workload**

**** Expansion Recommended**
(##) Old Methodology Numbers



Recommendations

- **Bliss**
 - Absorb some Outpatient Workload into MTF
 - Send excess Outpatient to Network
- **Benning**
 - Send additional Inpatient Workload to Network
 - Expand Outpatient by 43 rooms (22 PC & 21 SC)
 - 38,692 SF (23,320 PC & 15,372 SC)
- **Carson**
 - Absorb additional InPt and PC Workload into MTF
 - Expand SC by 17 rooms (12,078 SF)
 - SqFt available due to USAFA Inpatient Closure (20,091 SF)
- **Riley, Lee & Sill**
 - Absorb additional Workload into MTF



Medical-Dental RDA

Rules for Personnel Savings in Moves

- Technical & Management Synergy - 15%: applies to all FTEs in moves where a unit stands down a separate C2 infrastructure (regardless of whether they were a detachment or lab).
 - Example: Army Medical Research Detachment at Brooks C-B consolidating with the Institute of Surgical Research
 - Example: Naval Submarine Medicine Laboratory consolidating with Naval Medical Research Center
- Technical Synergy - 10% applies to all FTEs in units moving to a location where there is a larger critical mass in the sub-function mission area.
 - Example: Walter Reed Army Institute of Research combat casualty care personnel consolidating with Institute of Surgical Research
- Exception – 0% Technical Savings in the case where a move is within the same geographic area. Rationale is based on technical synergy being only modestly increased by a move in the local area since collaboration and sharing is already in place.
 - Example: WRAIR Retrovirology Division moves from leased space to main WRAIR building at Forest Glen annex (a move of ~15 miles).



Final Report Outline and Timeline

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GUIDANCE

■ Wynne Signed Memorandum 11 April

Directs a 12 Volume Report

- 1 OSD Overview Volume
- 1 Joint Staff Volume containing
Classified Force Structure
- 10 Volumes; from the 3 MILDEPS and
7 JCSGs



JCSG Tiger Team

- 15 March arrives-no OSD Report guidance
- JCSG Integration and Standardization
- Tiger Team formation (HSA lead)
- Kickoff meeting of Tiger Team 22 March
 - Standardization of reports
 - Boilerplate language
 - Address JCSG common concerns



JCSG Tiger Team

- 6 meetings to date
- Expansion of Wynne memo
- Boilerplate language for common activities

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Expanded Template

■ Certification/Transmittal Letter (signed by JCSG Chairman

I. Executive Summary

(This section should provide a summary of each section of the report that follows)

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Expanded Template

- II. Organization and Charter
 - Introduction (Boilerplate)
 - a. Group Identity and Organization (into Subgroups)
 - b. Functions Evaluated
 - c. Overarching Strategy



Expanded Template

Analytical Approach and Analysis

- a. Foundational Elements of Analytical Approach
 - i. Certification Process/Control Mechanisms
 - ii. Role of Auditors
 - iii. Capacity



Expanded Template

- iv. Military Value
- v. Military Judgment
- vi. Scenario Development
(Optimization Model)
- vii. Policy Principles and Imperatives
- viii. Selection Criteria
- ix. Integration Process



Expanded Template

b. Capacity Analysis

(This section should summarize each group's capacity analysis methodology and results, including assessments of current capacity, maximum capacity, and current usage (including surge) for each of its assigned functions at a single location. Provide details in Appendix A



Expanded Template

c. Military Value Analysis

(This section should describe each group's approach and results when determining Military Value using final Selection Criteria 1-4 and the Military Value Principles given in Policy Memorandum Two. Provide details in Appendix B.)

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Expanded Template

d. Scenario Development

(This section should describe each group's process for developing scenarios and analyzing alternate configurations to arrive at candidate closure and realignment recommendations.)

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Expanded Template

e. Force Structure Plan

(This section should relate how each group ensured its recommendations were consistent with the 20-year Force Structure Plan prepared by the Chairman of the Joint Chiefs of Staff as required by the BRAC Statute.)

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Expanded Template

f. Surge Requirements

(This section should explain how each group met statutory requirements for the Department to consider surge capabilities required to meet probable threats and projected changes in force structure when developing the Secretary’s recommendations, as detailed in Policy Memo Seven.)

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Expanded Template

IV. Candidate Recommendations

(This should replicate exactly the text of recommendations provided in Volume 1, Chapter 4.)

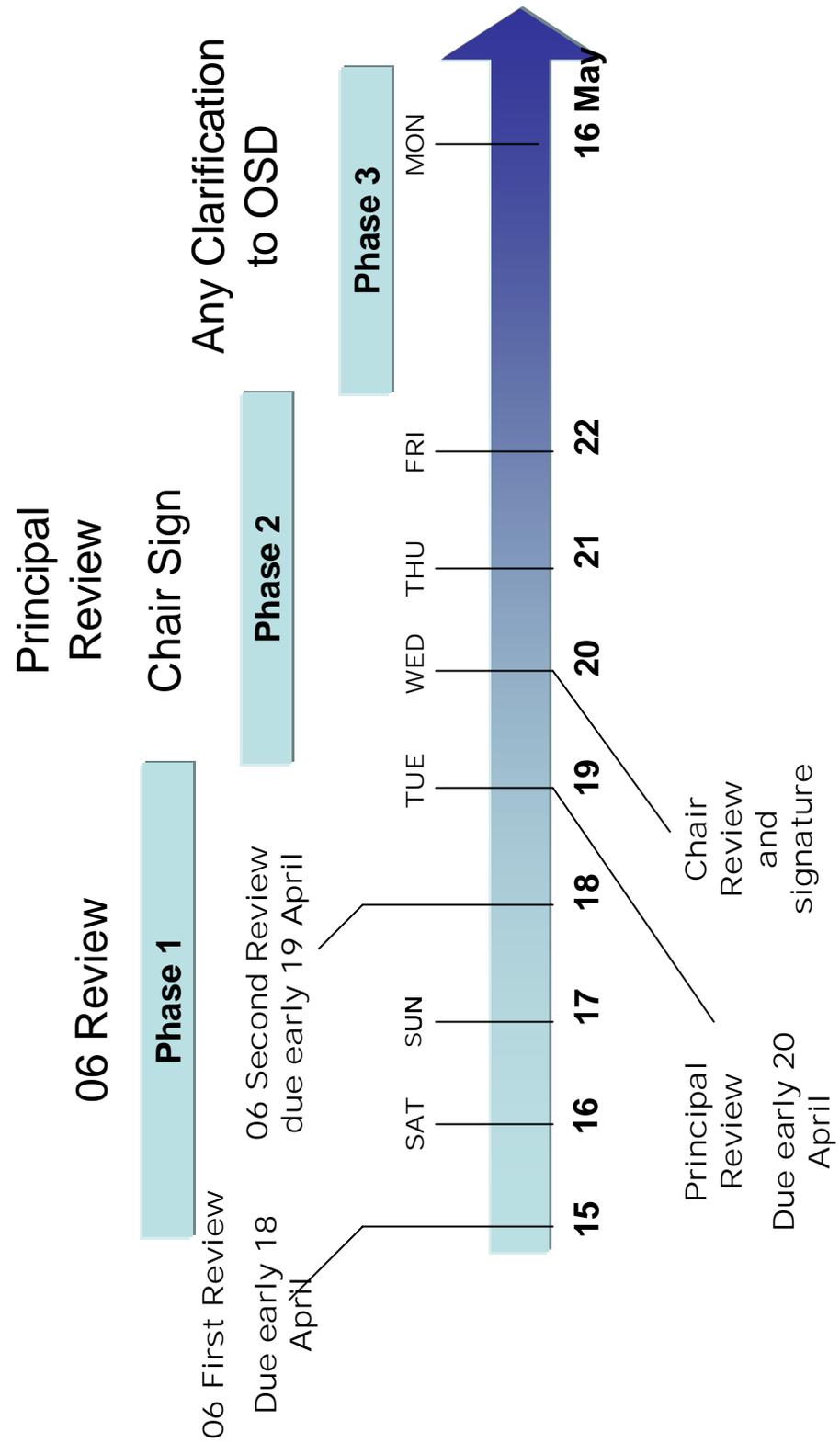


Expanded Template

- V. Appendices
 - a. Final Capacity Report, including results
 - b. Final Military Value Report, including results
(MJCSG will include Framework)
 - c. MJCSG Optimization Model
 - d. Acronyms
 - e. Glossary



Timeline





■ PROCESS FOR EDITING THE MEDICAL JCSG FINAL REPORT

- Report is due 20 April
- Turnaround time is minimal. Please make changes on the document that are pertinent to your group only. If you have concerns regarding other sections, please put these in an e-mail to Col Jacob at Barbara.jacob@wso.whs.mil . Do not change text you are not responsible for.

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- The initial version (without data or appendices) is now posted on the e-room, in a subfolder, titled *First Draft* under *MJCSG Reports Working File*. (About half way down the list of folders in the e-room). Folders have been created for each group and each version. Each group should post their respective updated version to their group folder. Once a version has been completely updated, all previous working folders will be removed.

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- The first 06 edit is due in your group's *Edited First Draft* folder NLT 1200 noon, 18 April.
- All edits will be incorporated, and the updated version will be posted in the *Second Draft* folder by 1700, 18 April. Your second edit is due in your group's *Edited Second Draft* folder by 1100, 19 April.
- These edits will be incorporated by 1500, 19 April and then posted on the e-room for your Principal's review.
- Principal's review/edit to be complete and posted by 1000 20 April, for final review and Chair signature.

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Rules of Engagement:

- Each edit will have headers and footers ON EACH PAGE which include the subgroup's name, date, version #, and editor's name
- The editor will provide a phone # where he/she can be reached during the incorporation time
- Please do not change the track settings that have been pre-set in the e-room

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BRAC 2005 BRACON Process & Timeline

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15 Apr 05



Overview

- Understand big picture (BRAC, Army Modular Force (AMF), Transformation, and Integrated Global Presence and Basing Strategy (IGPBS))
- Define data requirements, methods, flow
- Clarify decision process/owners



Big Picture Process

- \$\$ flow from DOD to Services, \$\$ will flow from Services to Design /Construction agents
- TMA will provide technical oversight
- TMA (PPMD) has a \$1.5M UFR pending for pre-planning for two MSM scenarios
- HA considering standing up an MHS Transformation Office with Flag level leadership to provide oversight, guidance and assistance on all transformation issues
- Services may need processes/resources to work BRAC implementation

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Service Approaches to BRAC Implementation

- **Army – Mr. Whittaker (Army I&E controls \$\$\$)**
 - 30 June - front page 1391s to DA 13 July DA prioritizes projects
 - All projects > \$750K requires a 1391
 - HFPA ready to engage
- **Navy – Mr. Arney (Navy I&E controls \$\$\$)**
 - Commander Navy Installations has developed plan – TBP
 - 30 August - front page 1391s to be submitted
 - BUMED Facilities Division/HSO’s ready to engage
- **Air Force**
 - Preplanning 1391s due by 1 August

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Army BRAC Process

(Installations have lead)

13 May: Public Release & Recommendations to Commission
 15 Jun: Draft documentation due to MEDCOM including Action Plans
 15 Jul: Discretionary move decisions
 15 Jul: Costs / savings Input to ACSIIM
 15 Aug: Costs and savings Input to OSD
 7 Oct: Installation Implementation Plans due to ACSIIM
 15 Dec: Final Plans Due

May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Prioritize projects Tri-Service Coordination Analysis of facility requirements Validate BRAC costs and scope Front page 1391s • Drafts / EA by 15Jun • Final by 30Jun	15 Jun: Draft documentation due to MEDCOM including Action Plans 30 Jun: Draft documentation due to MEDCOM including Action Plans	15 Jul: Discretionary move decisions 15 Jul: Costs / savings Input to ACSIIM	15 Aug: Costs and savings Input to OSD	7 Oct: Installation Implementation Plans due to ACSIIM	15 Dec: Final Plans Due		
Perform detailed analysis on all projects (planning contracts required) Award Design contracts for FY07/08 projects (large projects) FY 07/08 Facility Charettes with COE and TMA Complete 1391s Locked in program and scope for all projects by 7 Oct		FY07 / 08 projects (large ones) to 35% design Award designs for FY09/10 projects 35% Designs or Parametric estimates complete for FY07 projects – authorization to go to final design in Nov		CN: 11394			

Will need close coordination with OTSG / MEDCOM Staff

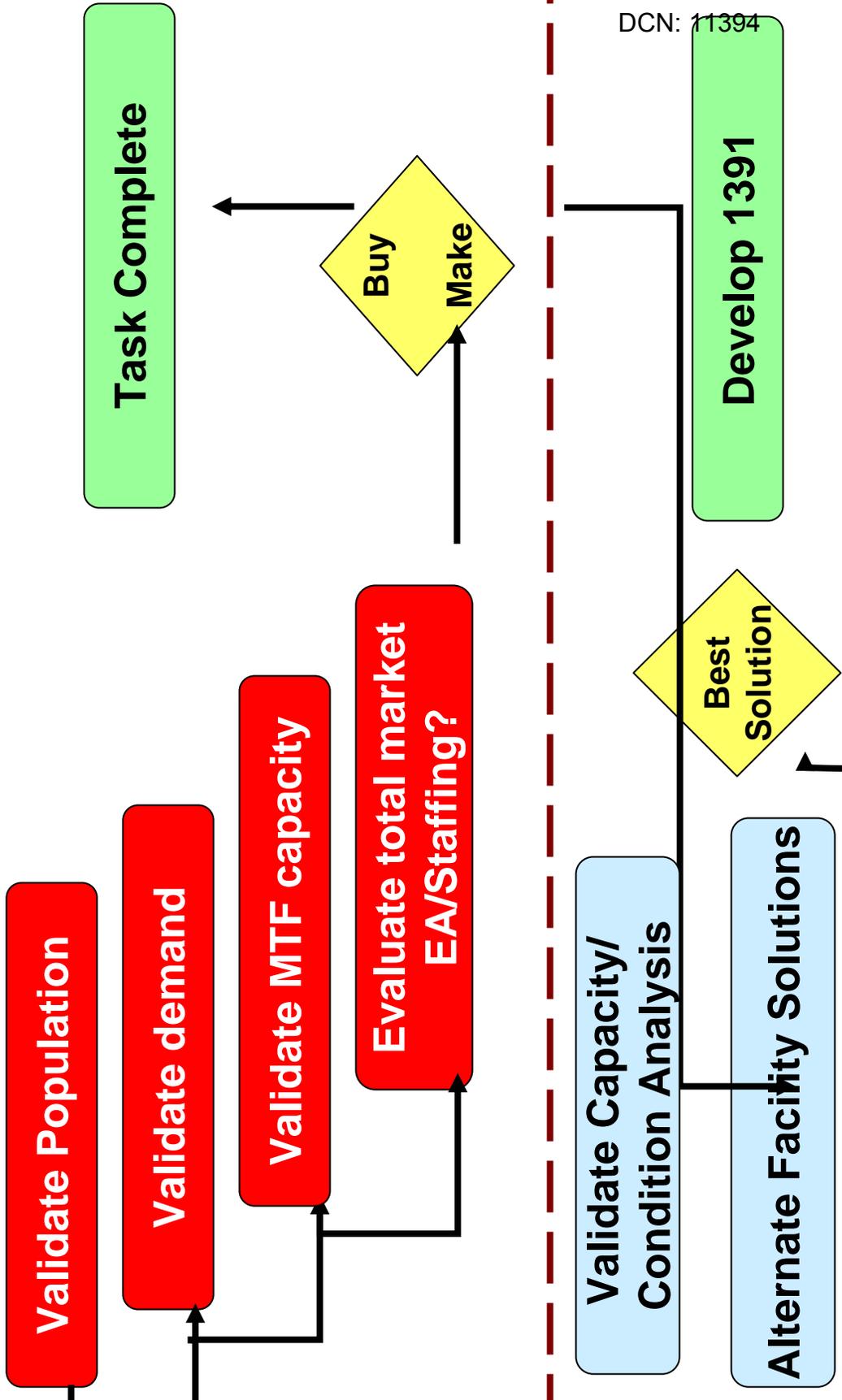


Issues and Unknowns

- What are the Roles and Responsibilities –
Installation Commander, MTF Commander,
HSO/RMC/Regional Offices
- Level of economic analysis required unknown
 - Make vs. Buy
 - Aggregate vs. product service line analysis
 - New Construction, Addition, or Alteration



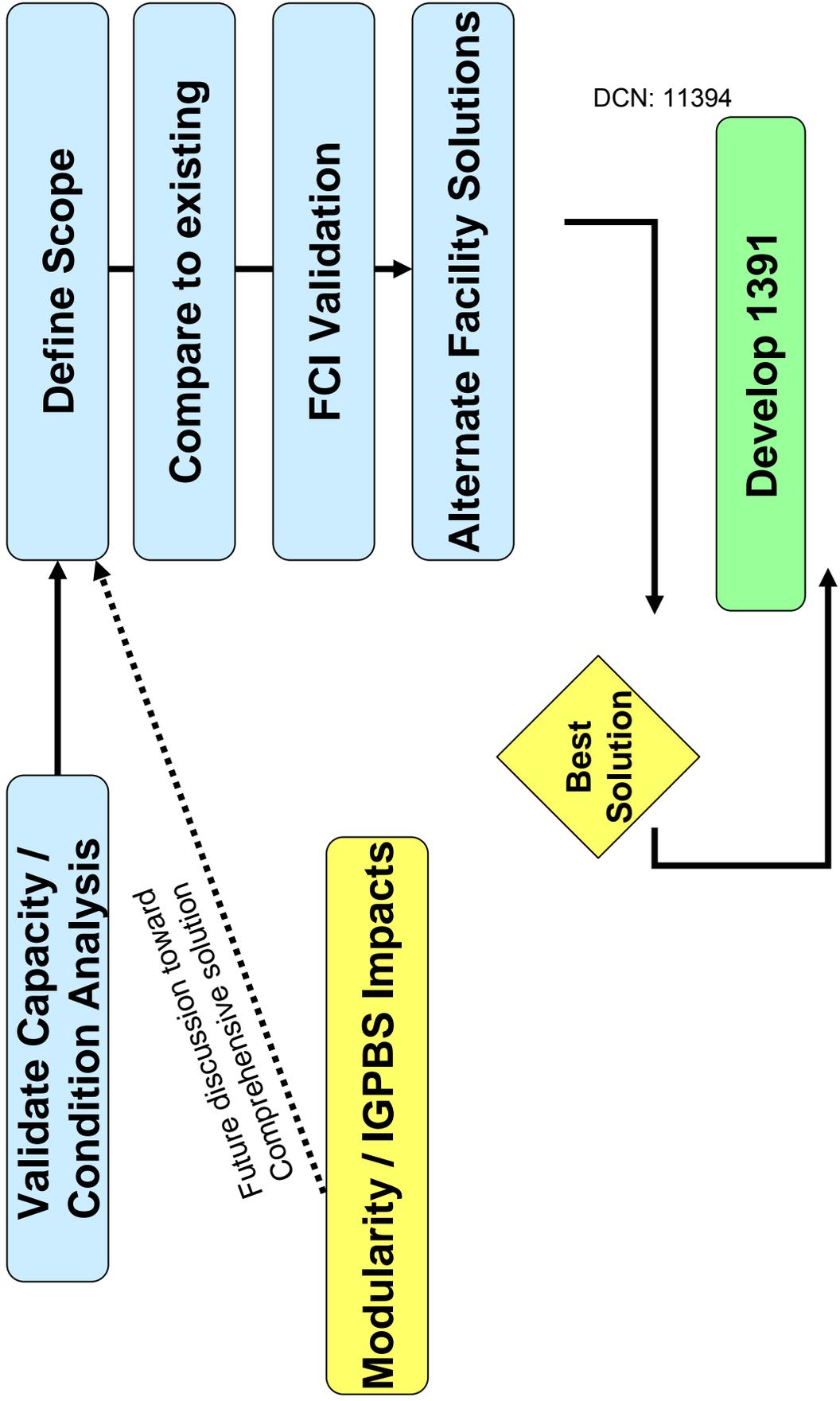
Key Tasks



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Key Tasks



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Standard/Compressed MILCON Timeline

	FY06	FY07	FY08	FY09	FY10	FY11	FY12
Standard Project Schedule (Baseline)	Project Ping Pkg (1 year; complete prior to design auth)	Design (2 years)	Construction (3-4 years)				Occupy
Accelerated Project Schedule	Project Charette & NEPA* docs)	Accelerated Design (concurrent w/ NEPA docs)	Construction (3 years very aggressive for 1M SF hospital space)		Occupy		
Accelerated Project Schedule (Addition/Alteration)	NEPA	Accelerated Design (concurrent w/ NEPA Docs)	Construction / Alteration (4 years; constrained site, concurrent ops and phasing issues)			Occupy	

- Requires OSD(HA)/TMA to waive Project Package requirement and accept charette process
- Requires aggressive actions by COE & NAVFAC
- Risks include delays due to NEPA, redesign, construction delays, occupancy of building, etc
- Draft schedule for planning purposes; has not been coordinated w/ installations, COE, NAVFAC, BUMED, etc



Potential Near Term Activities (Army)

Time	Activities
30 June	1391s to IMA
15 June	1391's to MEDCOM
1 - 10 June	Installation coordination for 1391s
15 - 30	Capacity Analysis, Facility Solutions,
5 - 15 May	Recommendations Gather data/information
11 - 30 Apr	Define tasks, organize team – Develop integrated methodology, brief/obtain approval

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MEDCOM CDR





Proposed BRAC Commission Schedule - DRAFT

May 2, 2005	6:00 p.m. Meeting of Commissioners – Remarks by Chairman Principal 7:00 p.m. No host dinner
May 3, 2005	9:30 a.m. Hearing at US House of Representatives – Swearing-in of Commissioners 1:30 p.m. Hearing at US House of Representatives – Current/Long Term Threat Confronting US National Security
May 4, 2005	9:30 a.m. Hearing at US House of Representatives – Force Structure Plan and SecDef Guidance on the QDR
May 16, 2005	SecDef BRAC Recommendations received 1:30 p.m. Hearing at US Senate – Presentation of Department of Defense BRAC Recommendations and Methodology Panel 1: Secretary of Defense; Panel 2: DoD Officials on Methodology
May 17, 2005	9:30 a.m. Hearing at US Senate – Presentation of Recommendations/Methodology – Army 1:30 p.m. Hearing at US Senate – Presentation of Recommendations/Methodology - Navy
May 18, 2005	9:30 a.m. Hearing at US Senate - Presentation of Recommendations/Methodology – AF 1:30 p.m. Hearing at US Senate – Presentation of Recommendations/Methodology – Defense Agencies DCN: 1394
May 19, 2005	9:30 a.m. Hearing at US Senate - Presentation of Recommendations/Methodology DoD Joint Cross Service Groups