



DCN 5930

2005 Base Realignment and Closure

Commission Site Visit

to the

TRICARE Management Activity

28 July 2005

Purpose

- Provide the 2005 Base Realignment and Closure Commission (BRAC) an understanding of the mission, operating requirements, and infrastructure of the TRICARE Management Activity (TMA)
- Information provided for consideration in evaluating the BRAC proposal to establish a Medical Command Headquarters for the Army, Navy and Air Force Office of the Surgeons General, and TMA (and associated headquarters and support activities)

TMA History

- TMA created in 1998 by the Defense Reform Initiative (DRI)
 - DoDD 5136.12 May, 2001
- Field Activity of USD (P&R) under the control of ASD(HA)
 - Operational arm of health program
- DRI consolidated all health related field activities into one
 - Realigned operational elements of OASD(HA) into TMA
 - Eliminated redundant functions (17% reduction in staff)
- Concurrently, portions of remaining ASD(HA) staff (39 personnel) needed to be temporarily moved as part of Pentagon renovation

TMA History (Continued)

- TMA staff located in Pentagon moved to Skyline complex
 - One of TMA predecessor organizations already located in Skyline since 1985
 - Army SG office located in Skyline
- HA staff that could not remain in Pentagon co-located with TMA for administrative support
- HA staff would be returned to Pentagon when renovation completed
- TRICARE Regional Offices/TRICARE Area Offices established 2004 (programmed in TMA budget beginning 2006)



Defense Reform Initiative (DRI)

PRE

Assistant Secretary of Defense
(Health Affairs)
(91 Billets)

TRICARE
Support
Office
(234 Billets)

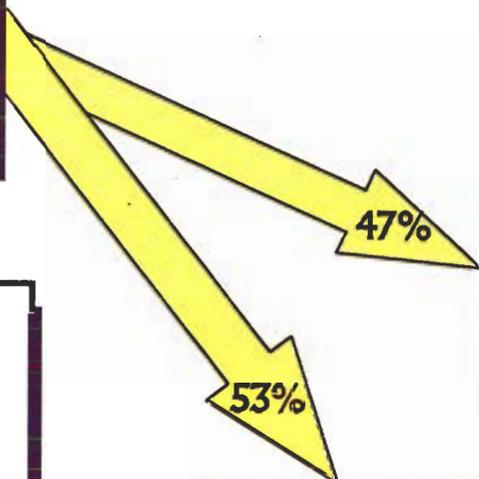
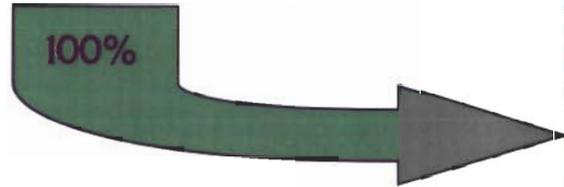
Defense
Medical
Program
Activity
(157 Billets)

NEW

Assistant Secretary of Defense
(Health Affairs)
(43 Billets)

SEP 1999
TRICARE
Management
Activity
(363 Billets)

FEB 1998
TRICARE
Management
Activity
(439 Billets)





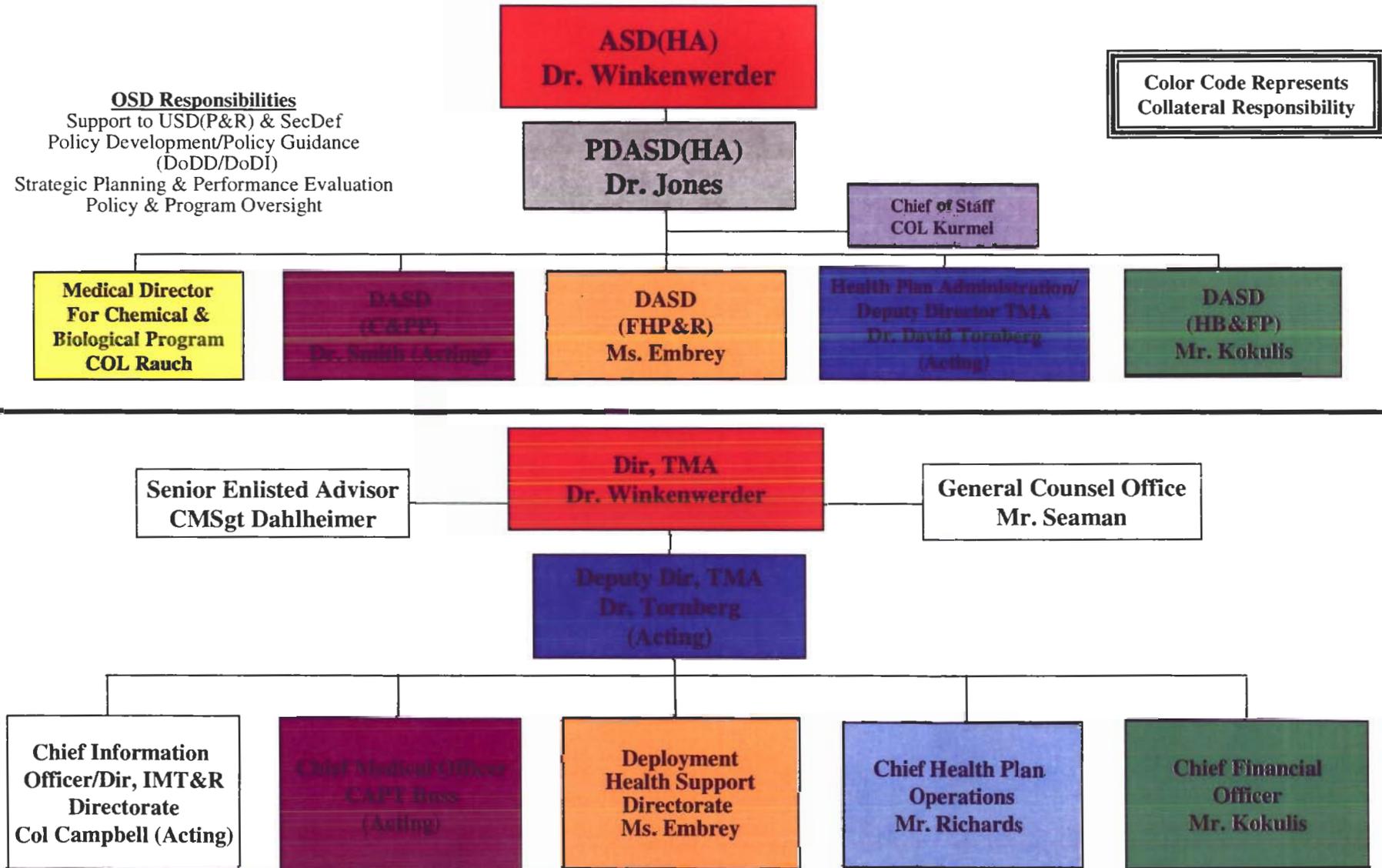
Mission

- The TRICARE Management Activity (TMA) mission is:
 - To manage TRICARE programs
 - To manage and execute the Defense Health Program (DHP) Appropriation and the DoD Unified Medical Program
 - Support the Uniformed Services to implement the TRICARE Program and the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS)
- FY05 Unified Medical Program value is \$30,683.432 (dollars in millions)

↓ 36B → 50B in FY 12
for all TRICARE



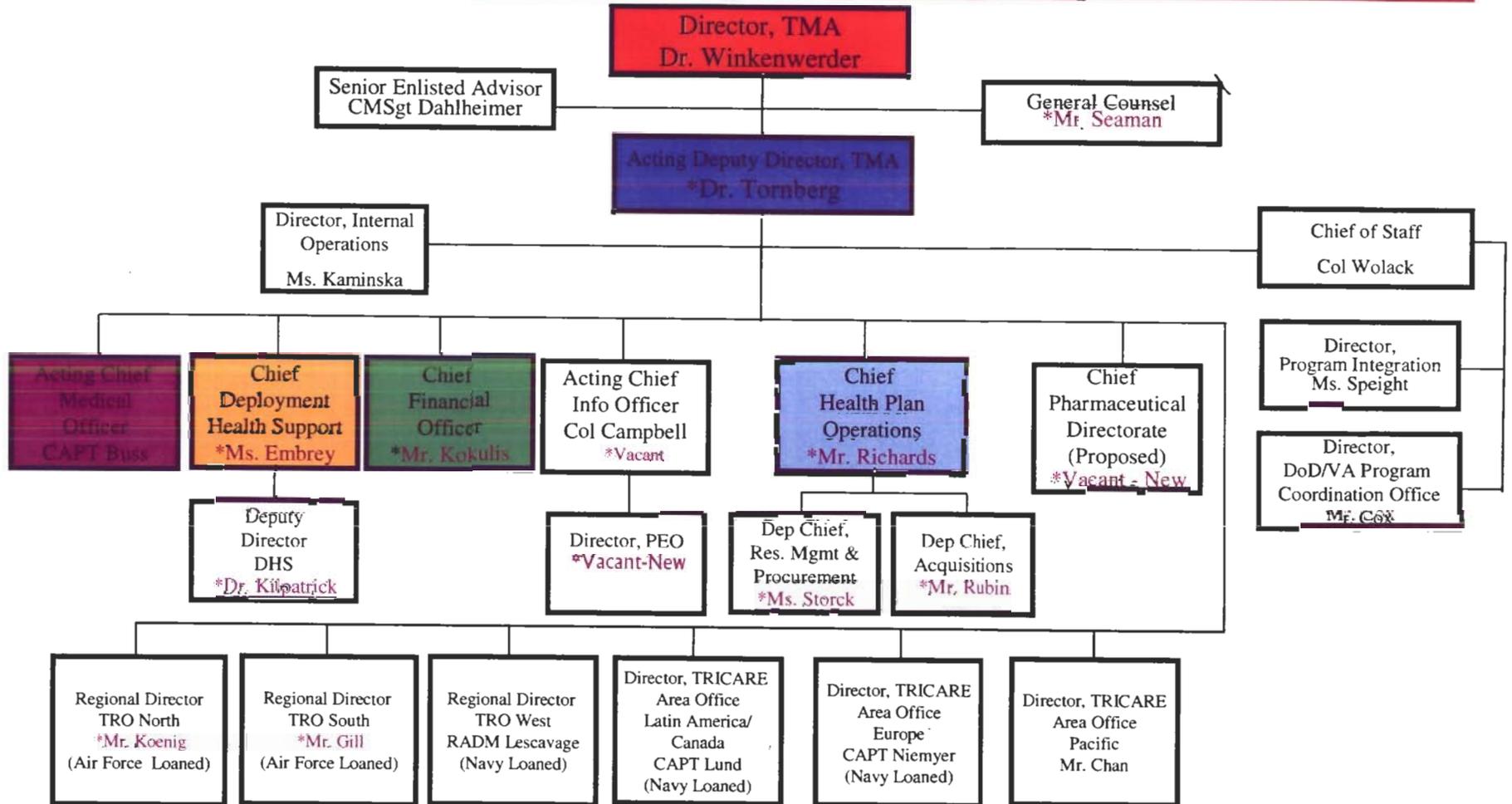
ASD (Health Affairs) & TMA Organizational Structure





Organizational Structure

TRICARE Management Activity (TMA)



* Senior Executive Service



TMA Plus JMISO Staffing

All Locations

Total Billets for FY 2005

	Military	Government Civilians	Contractors	Total
TRICARE Management Activity	117	486	744	1347
Joint Medical Information Systems Office (JMISO)*	47	50	379	476
Total	164	536	1123	1823

*JMISO supports the TMA PEO. JMISO military and civilian staffing consists of personnel attached to individual UICs of each of the three military Services to carry out central information management procurement activity for joint medical systems used by the Services. TMA funds JMISO office spaces, equipment, utilities, travel, etc.



TMA Plus JMISO Staffing National Capital Region

NCR Billets for FY 2005

TRICARE Management Activity

Military	75
(includes 8 loaners: TRO-N)	
Government Civilians	222
Contractors in Government Spaces	248
Contractors in Contractor Spaces	264

Subtotal **809**

Joint Medical Information Systems Office (JMISO)

Military (all loaners)	46
Government Civilians	50
Contractors in Government Spaces	52
Contractors in Contractor Spaces	290

Subtotal **438**

Total **1247**

As of FY 2005 civilian and military data remain constant, contractor labor may fluctuate



TMA Plus JMISO Staffing

Other Locations

Billets In Other Locations For FY 2005

Activity	Location	Military	Government Civilians	Contractors	Total
TMA	Aurora, CO	7 (6 loaner)	156	198	361
PEO/JMISO	Aurora, CO	1 (loaner)		37	38
TRO-West	San Diego, CA (54) Alaska (5) Tacoma, WA (2) Phoenix, AZ (1) Colorado Springs, CO (2) Honolulu, HI (1)	10 (all loaners)	43 (1 loaner)	12	65
TRO-South	San Antonio, TX (56) Ft. Gordon, GA (2) Kessler AFB, MS (2)	8 (all loaners)	43 (1 is loaner)	9	60
TRO-Overseas					
TAO Pacific	Okinawa, Japan (17)				
TAO Europe	Sembach AB, Germany (24)	17	22	13	52
TAO Latin America/Canada	Ft. Gordon, GA (11)				
Total		43	264	269	576

Current Organizational Issues

- Military Medical Support Office (MMSO)
- Pharmacoeconomic Center (PEC)
- Patient Safety Center
- Uniformed Services University of the Health Sciences (USUHS)

not established yet

in San Antonio

in Silver Spring

in ASD Health Care budget. Now under Navy EA. To be under TMA organization



Potential Future Realignment to NCR Staffing

Potential Additional Billets

Source	Current Location	Military	Government Civilians	Contractors	Total
Military Medical Support Office (MMSO)	Great Lakes, IL	33	74	5	112
Pharmacoeconomic Center (PEC)	San Antonio, TX	9	6	1	16
Patient Safety Center	Silver Spring, MD	1	1	8	10
Uniformed Services University of the Health Sciences (USUHS)	Bethesda, MD	277*	745	380	1402*
Total		320*	826	394	1540*

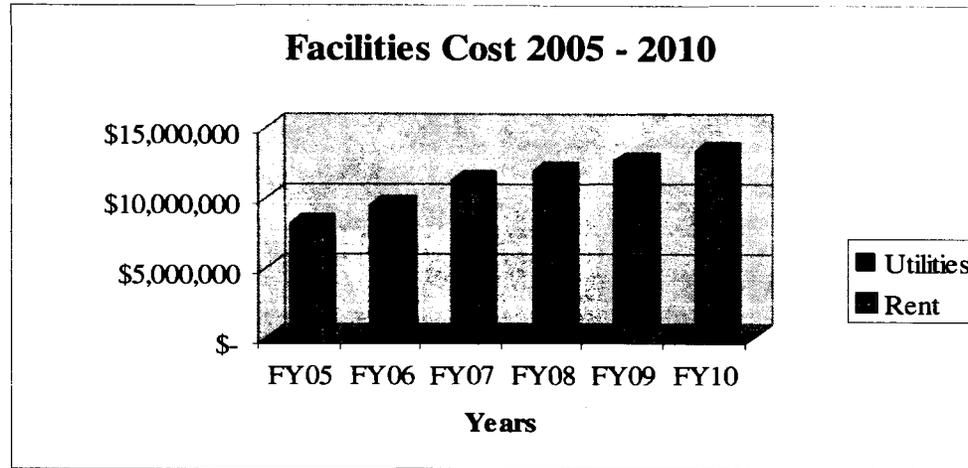
**Does not include uniformed students*

Military Construction Projects

- Leased space
- No military construction projects budgeted
 - Does not address USUHS



Annual Operating Costs TMA (All Locations)



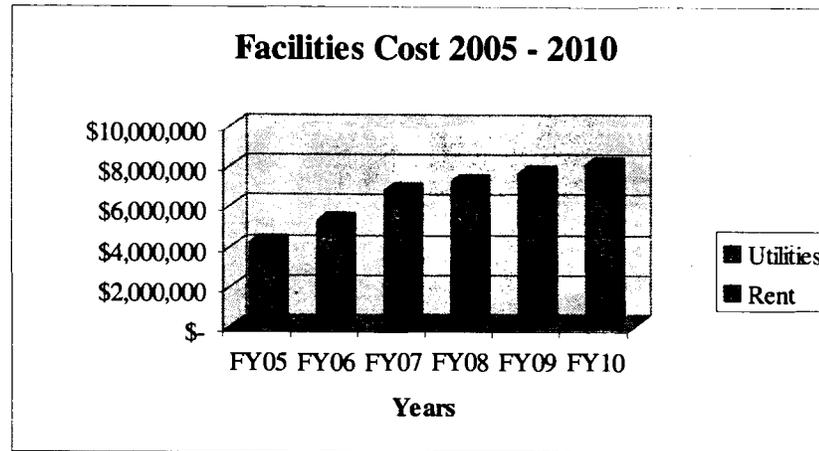
Year	Rent	Utilities	Total Facilities Cost
FY05	\$ 7,288,749.00	\$ 897,910	\$ 8,186,659
FY06	\$ 8,576,361.00	\$ 924,847	\$ 9,501,208
FY07	\$ 10,321,356.00	\$ 952,592	\$ 11,273,948
FY08	\$ 10,940,637.00	\$ 981,170	\$ 11,921,807
FY09	\$ 11,597,075.00	\$ 1,010,605	\$ 12,607,680
FY10	\$ 12,292,900.00	\$ 1,040,923	\$ 13,333,823

FY06 through FY10 is estimated on a 6% rent & 3% utilities increase per yr.



Annual Operating Costs

TMA (National Capital Region)



Year	Rent	Utilities	Total Facilities Cost
FY05	\$ 3,707,749.00	\$ 504,000	\$ 4,211,749
FY06	\$ 4,780,500.94	\$ 519,000	\$ 5,299,501
FY07	\$ 6,297,744.00	\$ 539,500	\$ 6,837,244
FY08	\$ 6,675,608.64	\$ 546,100	\$ 7,221,709
FY09	\$ 7,076,145.15	\$ 567,600	\$ 7,643,745
FY10	\$ 7,500,713.86	\$ 574,300	\$ 8,075,014

FY06 through FY10 is estimated on a 6% rent & 3% utilities increase per yr.

Other Facility Issues

- Excess Capacity
 - No excess capacity - *lease to need*
 - Leased space for existing requirements only
- Force Protection Requirements
 - Facility does not meet DoD anti-terrorism force protection requirements
- Force Protection Requirement Compliance Cost
 - Cost to comply with DoD anti-terrorism force protection requirements are unable to be determined
- Defense Information Systems Network (DISN) Point of Presence
 - TMA has both the Non-Classified but Sensitive Internet Protocol Router Network (NIPRNET) and Secure Internet Protocol Router Network (SIPRNET) connections

Quality of Life in NCR

- High cost of living*
- Quality educational systems*
- Average commute to work over 45 minutes*
- Low unemployment rate*
- Culturally rich – museums, theaters, historic sites*
- Easy access to Pentagon Shuttle Bus
- Inadequate access to public transportation (Skyline)
- Parking is a problem
- Skyline complex does not meet the DoD anti-terrorism force protection requirements



**Office of The Surgeon General
Infrastructure
Overview**

Presented to

Chairman Principi and Commissioner Turner

BRAC Commission

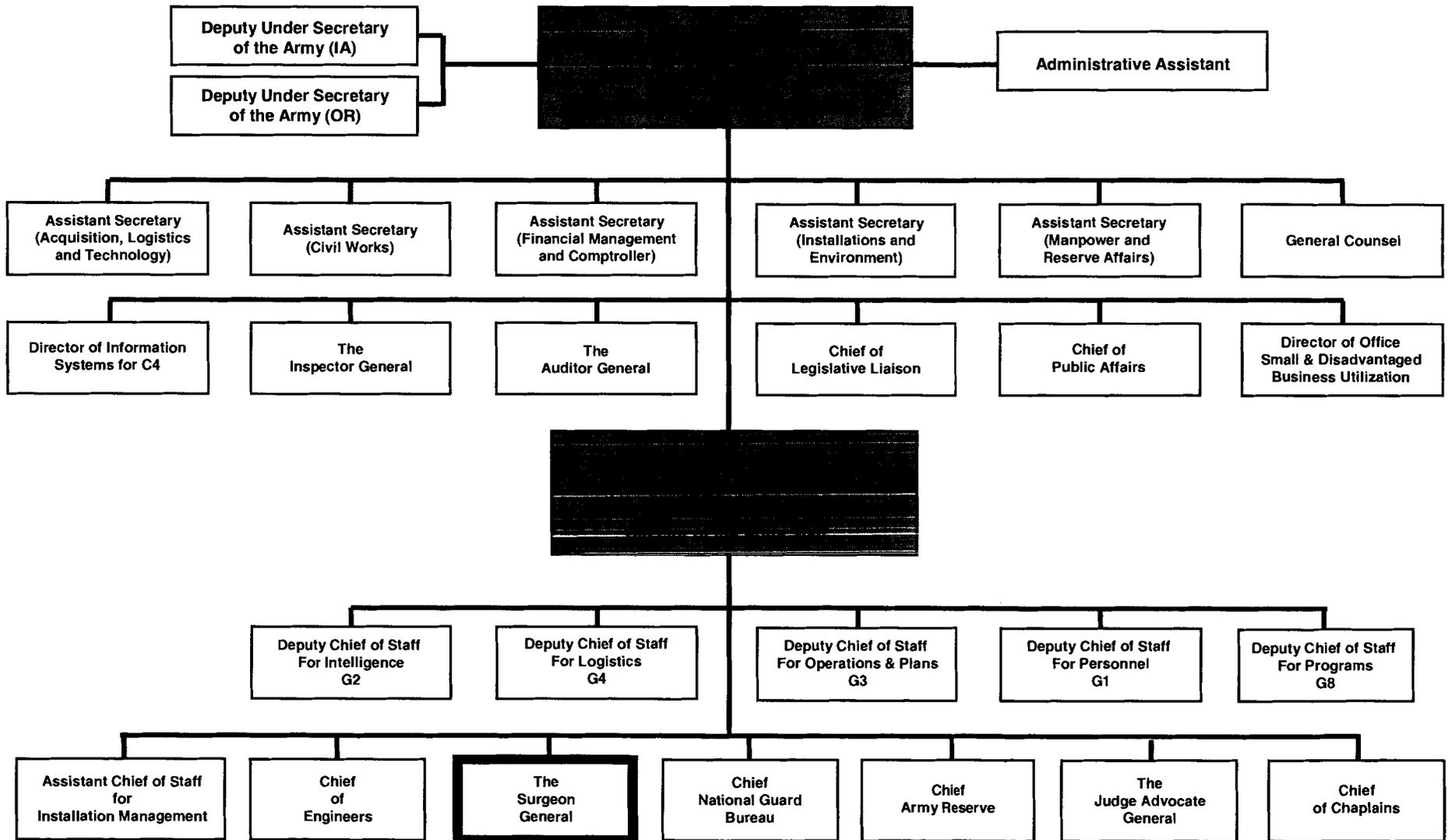
28 July 2005

Roles and Mission of the Office of The Surgeon General



- ❑ Assist CSA and SECARMY in discharging Title 10 responsibility.
- ❑ Advise and assist CSA and SECARMY and other principal officials on all matters pertaining to the military health service system.
- ❑ Represent the Army to the Executive Branch, Congress, DoD agencies and other organizations on all health policies affecting the Army.

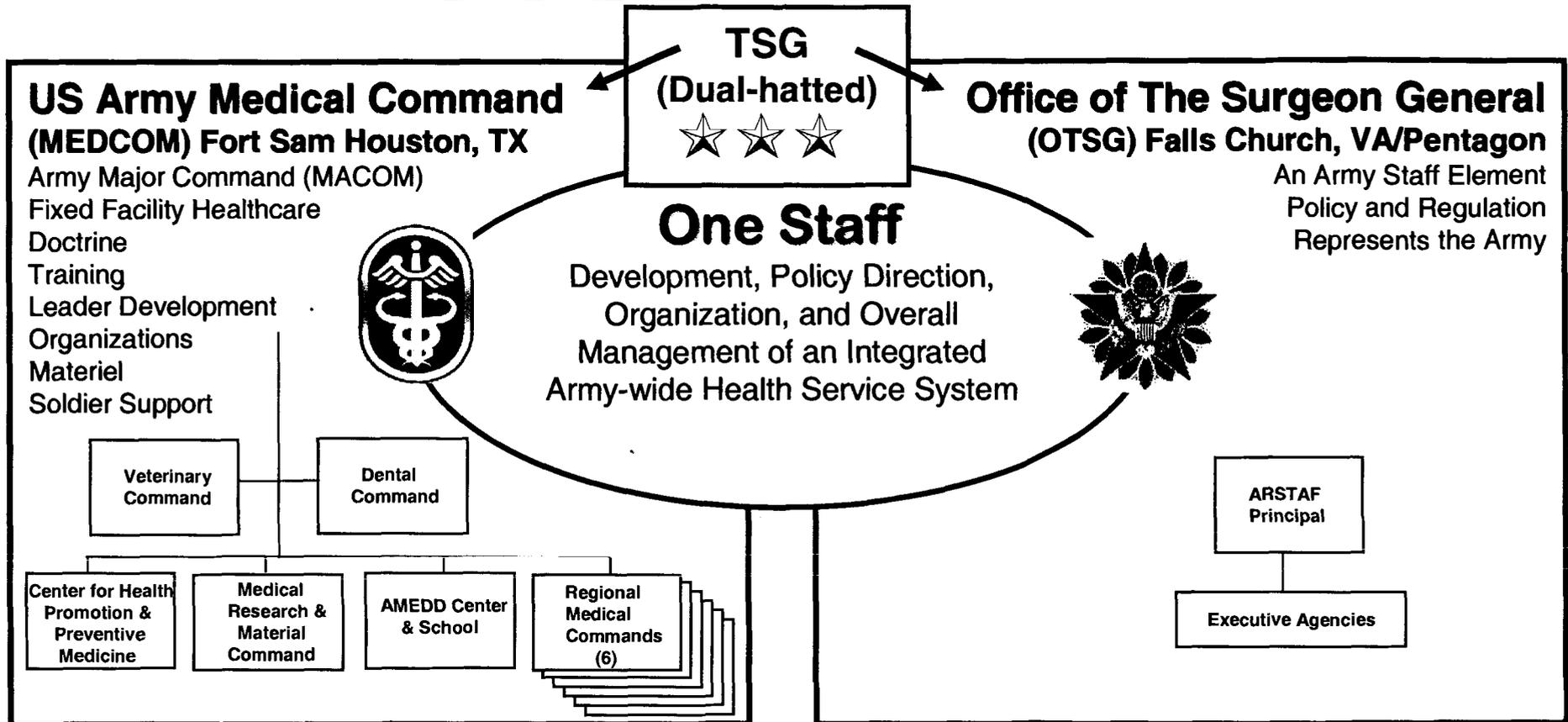
Headquarters, Department of the Army



July 2005

AMEDD Organization

The Department of the Army



Deployable Medical Units Found In:

US Army Forces Command (FORSCOM), US Army Europe (USAREUR)
 US Army South (USARSO), US Army Pacific (USARPAC), 8th US Army





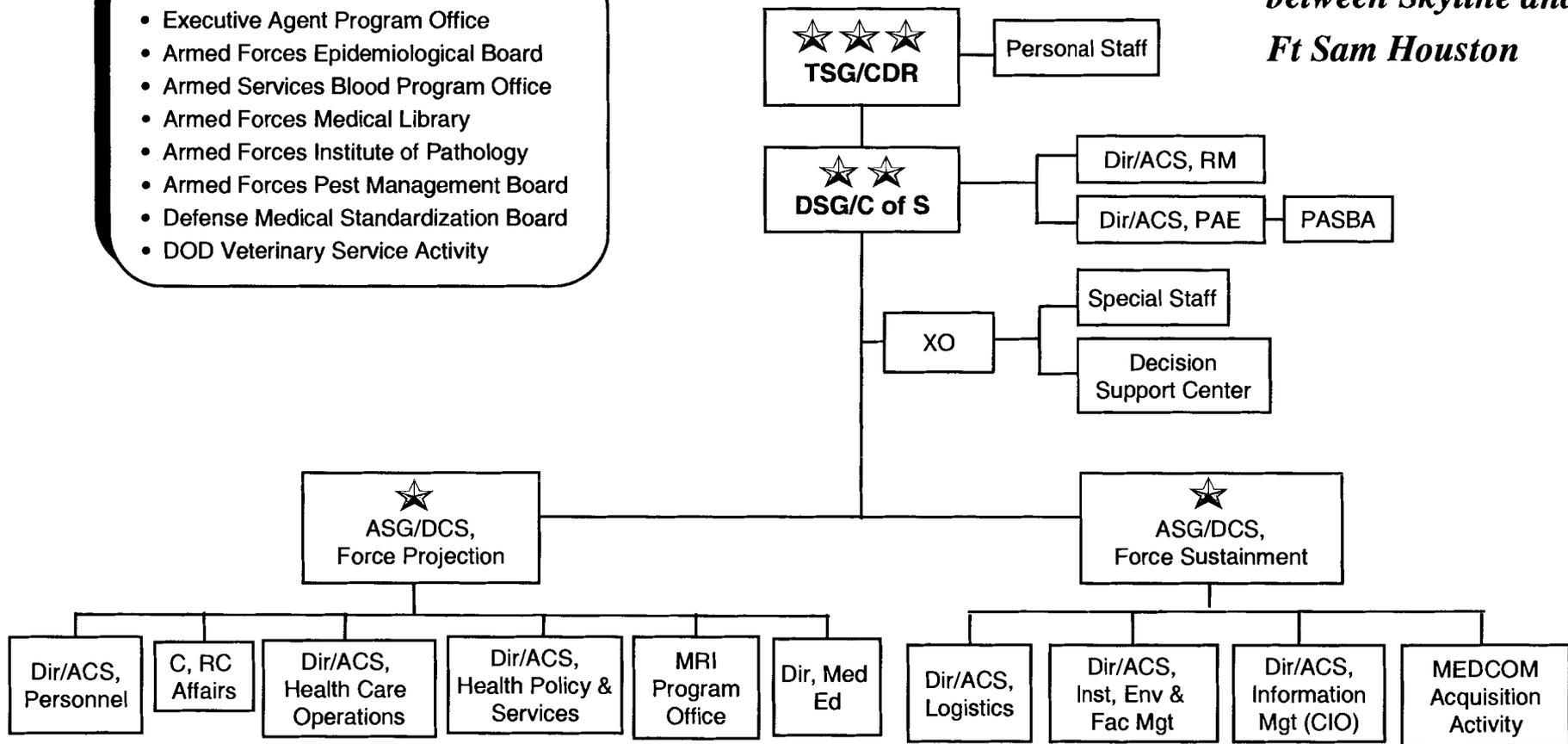
Office of The Surgeon General / HQs MEDCOM



One Staff Concept

- Executive Agent Activities**
- Executive Agent Program Office
 - Armed Forces Epidemiological Board
 - Armed Services Blood Program Office
 - Armed Forces Medical Library
 - Armed Forces Institute of Pathology
 - Armed Forces Pest Management Board
 - Defense Medical Standardization Board
 - DOD Veterinary Service Activity

Locations split between Skyline and Ft Sam Houston



FY05 MEDCOM Organization



**HQs, US Army
Medical Command**
Ft Sam Houston
MIL CIV
116 245

**US Army Medical
Research &
Materiel
Command**
Ft Detrick
MIL CIV
1102 1659

**US Army Dental
Command**
Ft Sam Houston
MIL CIV
1929 1686

**US Army
Veterinary
Command**
Ft Sam Houston
MIL CIV
1078 124

**US Army Center for
Health Promotion &
Preventive
Medicine**
**Aberdeen Proving
Ground**
MIL CIV
245 554

**US Army Medical
Department Center
& School**
Ft Sam Houston
MIL CIV
1483 710

**US Army Regional
Commands
(6 RMCs)**
**WRAMC, Ft
Gordon, Ft Sam
Houston, Ft Lewis,
Hawaii, Landstuhl**
MIL CIV
17647 18504

Leased Space at Skyline

ARMY SURGEON GENERAL / MEDCOM HQS

Building	Sq Ft	Annual Amount
Skyline IV	4,193	\$133 K
Skyline V	11,830	\$382 K
Skyline VI	36,209	\$1,419 K
TOTAL	52,232	\$1,934 K

Personnel Numbers

As of 22 July 2005

ACTIVITY	DIRECTORATE	OFF	WO	ENL	DAC	CONTRACTORS	IMA	RR	Grand Total
Office of The Surgeon General	The Surgeon General	4		3	1	1			9
	Deputy Surgeon General	3			1	0			4
	Assistant Surgeon General for Force Projection	4			1	1			6
	Executive Support Office	2		1	5	0			8
	BRAC	1				2			3
	Decision Support Center	4			4	3			11
	Health Care Operations	32		4	9	66	12	1	124
	Health Policy & Services	24		1	10	4	7		46
	Information Management	13			12	65	3		93
	Logistics	7	1		6	3	4	3	24
	Medical Education	2			19	1			22
	Medical Reengineering Initiative	4			2	11			17
	Program Analysis & Evaluation	5			6	3			14
	Personnel	9		2	11	2	4		28
	Reserve Affairs	5		1		1	6	1	14
	Resource Management	5			7	0			12
	Special Staff	8			10	1			19
DASG Total		132	1	12	104	164	36	5	454
Defense Medical Human Resources System	Defense Medical Human Resources System	1							1
DHMRSi Total		1							1
Joint Health Service Activity	Armed Forces Epidemiological Board	2			1				4
	Armed Forces Medical Library				5				5
	Armed Services Blood Program Office	3		1	1		1		7
	DoD Veterinary Service Activity	7	1		1				9
	Executive Agent Program Office	1			2				5
JHSA Total		13	1	1	10		1		30
Health Facility Planning Agency	Health Facility Planning Agency	15	1		23	15			54
MCMR-FP Total		15	1		23	15			54
Proponency Office for Preventive Medicine	Proponency Office for Preventive Medicine	7			2		4		13
POPM Total		7			2		4		13
U.S. Military Health System Information Technology Organization	Clinical Information Technology Program Office	6			1				7
	Defense Medical Logistics Standard Support	2							2
	Executive Information / Decision Support	3							3
	Tri-Service Infrastructure Management Program Office	1			2				3
	Theater Medical Information program	1							1
	U.S. Military Health System Information Technology Organization	3			2				5
USMHSITO Total		16			5				21
Grand Total		184	3	13	144	183	41	5	573

Skyline Location

- ◆ OTSG realigned to Skyline from Pentagon in 1986
- ◆ Approx 65% of OTSG workforce live in Northern Virginia
- ◆ Amenities at Skyline for workforce are excellent
 - ✓ DoD bus service to Pentagon every 20 minutes
 - ✓ Smith bus service every hour on half hour
 - ✓ Indoor parking
 - ✓ Sports & Health Club
 - ✓ Restaurants
- ◆ Defense Information System Network (DISN): OTSG is provided DISN connectivity through TRICARE Management Activity
- ◆ Anti-Terrorism Force Protection: Per discussion with Defense Facilities Directorate, Washington Headquarters Services, Skyline facility is currently not in compliance

Proposal to Consolidate Service Medical HQs and TMA

OTSG Concerns

- ◆ Marginal savings / significant turmoil
- ◆ Separate service systems may not generate expected synergy
- ◆ Cost of move, combined with MILCON requirement, may not generate significant payback
- ◆ Scope of U.S. Army MEDCOM HQs is not fully captured in the proposal
 - HQs MEDCOM – Ft Sam Houston, TX
- ◆ Complexity of medical mission management at this time of war requires HQ stability
- ◆ Depending on future location of consolidated medical HQs, may affect interface with HQDA/Pentagon
- ◆ OTSG civilian workforce may elect to seek employment elsewhere, impacting continuity of operation

- ◆ **Bottom line: Significant savings from reorganization will not occur until DoD medical overhead activities are structured correctly!**

BRAC 2005 AMEDD Impact

◆ BRAC Recommendations

- Realign Health Care Activities in National Capital Area
 - ✦ Walter Reed National Military Medical Center at Bethesda
 - ✦ Belvoir Army Community Hospital
- Disestablish inpatient services at Ft. Eustis, Ft. Knox
- Realign Medical Activities in San Antonio
 - ✦ Wilford Hall inpatient realigned to Brooke Army Medical Center
- Establish Joint Center for Medical Enlisted Training at Ft. Sam Houston
- Establish Joint Centers of Excellence in Biomedical Science
- Closure of Medical Treatment Facilities at Ft. Monmouth, Ft. McPherson, Ft. Monroe, Red River Army Depot

Projected major increases in costs of construction are significantly different from BRAC calculations