

**Joint Task Force
National Capital Region Medical**



Agenda

- JTF CapMed Overview
- NCR Clinical BRAC Overview
- Comprehensive Master Plan Overview
- Questions

JTF CapMed Establishment

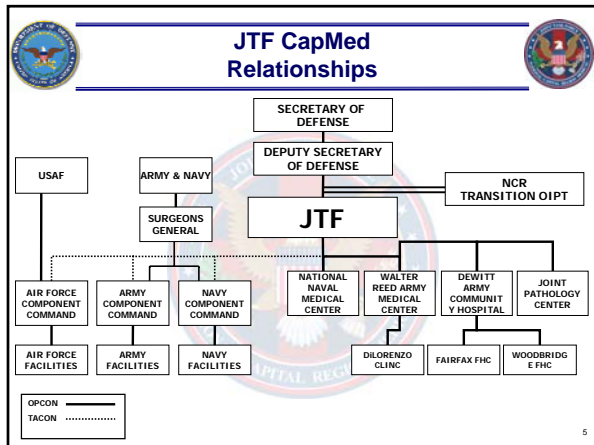
- 14 SEP 07 - JTF CAPMED established
- 01 OCT 07 - Initial Operational Capability (IOC)
- 30 SEP 08 - Full Operational Capability (FOC)
- Fully functional Standing Joint Task Force reporting directly to the SECDEF through the DEPSECDEF
- Commander O-9 Medical Officer
 - Responsible under Section 601 of Title 10, US Code
 - Acts as senior medical officer in the JOA with responsibility for military healthcare in the NCR

Source Document: DEPSECDEF's Establishing Authority for JTF CapMed and JTF CapMed Transition Team memo dtd 12SEP07

JTF CapMed Mission and Authorities

- **Oversee, manage, and direct all health care delivery by military medical units within the Joint Operations Area (JOA) and ensure the military medical readiness of personnel in the JOA.**
- **Develop a Joint NCR Transition plan and oversee BRAC implementation and related military construction projects.**
- **Coordinate the scheduling and funding of clinical and non-clinical work with Services, MHS BRAC Program Integration Office, US Army Corps of Engineers and NAVFAC.**
- **Oversee, manage, and distribute resources to military health care assets within the JOA.**
- **Develop and maintain interagency and private partnerships.**
- **Other tasks as assigned.**

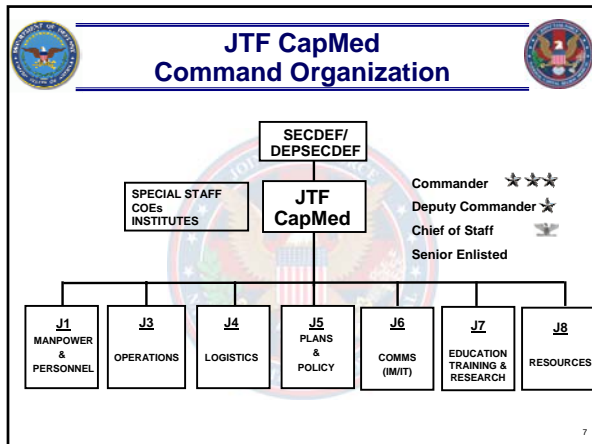
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JTF CapMed NCR Transition OIPT Members

- ASD(HA) - Co-Chair
- DUSD (AT&L/I&E) - Co-Chair
- Vice Chief of Staff of the Army
- Vice Chief of Naval Operations
- Vice Chief of Staff of the Air Force
- Assistant Commandant of the Marine Corps
- OSD, Comptroller
- Director of the Joint Staff
- Joint Staff Senior Enlisted Advisor
- Assistant Secretary of Defense (Public Affairs)
- Assistant Secretary of Defense (Legislative Affairs)
- Assistant Secretary of the Army (Installations and Environment)
- Assistant Secretary of the Navy (Installations and Environment)
- Assistant Secretary of the Air Force (Installations and Environment)
- Assistant Secretary of the Army (Manpower & Reserve Affairs)
- Assistant Secretary of the Navy (Manpower & Reserve Affairs)
- Assistant Secretary of the Air Force (Manpower & Reserve Affairs)
- Army Surgeon General
- Navy Surgeon General
- Air Force Surgeon General

DEPSECDEF tasked USD (P&R) and VCJCS to oversee the effort within the Department



JTF CapMed Staff Summary

Staff Distribution:

- > Command: 4
- > Personal Staff: 12
- > Special Staff: 4
- > Functional Staff:
 - J1: 15
 - J3: 47
 - J4: 13
 - J5: 29
 - J6: 11
 - J7: 7
 - J8: 10

PERS Allocations:

- 63 military (41%)
 - 14 Air Force
 - 16 Army
 - 16 Navy
 - 17 Nominative
- 86 civilian (57%)
- 3 contractors (2%)

Total: 152

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JTF CapMed Assigned Forces

<p>Army Component CDR: MGEN Hawley-Bowland</p> <ul style="list-style-type: none"> *Walter Reed Army Medical Center, Washington, DC *DeWitt ACH, FT Belvoir, VA Andrew Rader FHC, FT Meyer, VA AP Hill AHC, Bowling Green, VA Fairfax FHC, Fairfax, VA Woodbridge FHC, Woodbridge, VA Kimbrough AHC, FT Mead, MD Barquist AHC, FT Detrick, MD Dunham AHC, Carlisle, PA Defense Distribution Center AHC, New Cumberland, PA FT Indiantown Gap AHC, Annville, PA Letterkenny Army Depot AHC, Chambersburg, PA Kirk AHC, Aberdeen Proving Ground, MD Edgewood OHC, Edgewood, MD Troop Medical Clinic, Aberdeen, MD McNair AHC, Washington, DC Pentagon HC, Arlington, VA (DiLorenzo) Tri-Serv Dental Clinic, Pentagon (DiLorenzo) 	<p>Navy Component CDR: RADM Nathan</p> <ul style="list-style-type: none"> *National Naval Medical Center, Bethesda, MD BHC Carderock, Anacostia, MD BHC/DC Dahlgren, VA BHC/DC Earle, Colts Neck, NJ BHC/DC Indian Head, MD BHC/DC Lakehurst, Lakehurst, NJ BHC Mechanisburg, PA BHC/DC NAF Washington, DC BHC NRL, Washington, DC BHC Philadelphia Naval Bus Ctr, PA BHC/DC Sugar Grove, WV BHC/DC Washington Navy Yard, DC BHC/DC Willow Grove, PA NHC Annapolis, MD BHC Bancroft Hall NHC Pax River, Patuxent River, MD NHC Quantico, Quantico, VA BHC Basic School BHC OCS Brown Field
<p>Air Force Component CDR: MAJ GEN Graham</p> <ul style="list-style-type: none"> 79th MDW, Andrews AFB, MD 779th MDG, Andrews AFB, MD 	<ul style="list-style-type: none"> 579th MDG, Bolling AFB, DC AF Flight Medicine Clinic, Pentagon

*JTF CapMed Operational Control
Source Document: DEPSECDEF's Establishing Authority for JTF CapMed and JTF CapMed Transition Team memo dtd 12SEP07

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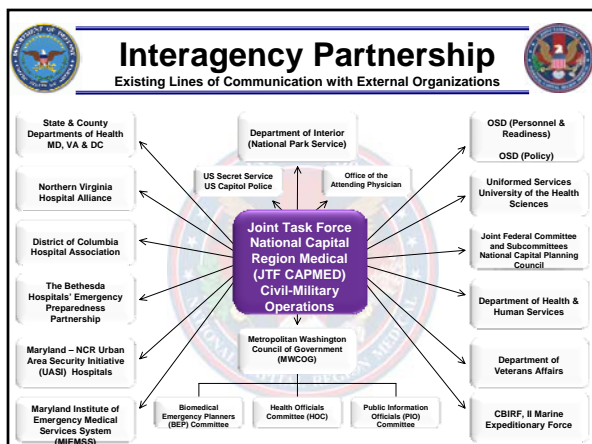
JTF CapMed JOA Profile

- 550K Eligible Beneficiaries
- 284K MTF Enrollees
- 3.1M MTF RVUs
- 108K MTF Bed-days
- 24K MTF Dispositions
- 27K MTF RWPs
- \$1.3B MTF Budget
- 12K Military and GS employees
- \$588M Purchased Care

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Support to NORTHCOM & JTF NCR

- Plans
 - SUPPLAN 3400 Homeland Defense
 - SUPPLAN 3500 CBRNE Consequence Management
 - SUPPLAN 3502 Civil Disturbance Operations
 - SUPPLAN 3591 Pandemic Influenza
 - SUPPLAN 3600 Emergency Preparedness in the NCR
 - State Funeral Plan
 - Continuity of Operations Plan
- Medical Functional Component for JTF NCR





JTF CapMed Commander's Priorities



- Casualty Care
- Caring for the Caregiver
- "Be Ready Now"
- Regional Healthcare Delivery
- Common Standards and Processes

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NCR BRAC



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BRAC is an Opportunity



- BRAC rationalizes and recapitalizes NCR medical facilities
 - Closes the aging Walter Reed Army Medical Center (WRAMC) facility and inpatient capabilities at Malcolm Grow Medical Center (MGMC), realigns functions to:
 - Establish world-class medical center at Bethesda (renaming it Walter Reed National Military Medical Center)
 - A new, larger, Fort Belvoir medical facility serving the military demographic that has shifted south (Fort Belvoir Community Hospital)
 - Realigns the bed structure in the NCR to best meet the needs of the patient population

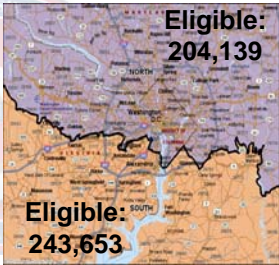
Care for Wounded Warriors Is Top Priority

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Methodology Used for Joint Service NCR Clinical BRAC Planning

- Divided NCR into North and South based on distance/drive time to Bethesda and Fort Belvoir
- Pulled data (visits, admits, RVUs/RWPs) for NMMC, WRAMC, and Fort Belvoir based on geographic distribution (patients home zip code)
- Redistributed South "tertiary care" workload to the North based on a combination of qualitative and quantitative clinical service data and input
- Approximately 20% of South-generated inpatient activity (13% Ambulatory care) is subspecialty tertiary care and will migrate to the North

North and South Markets



Objective: Alignment of MTFs to achieve an Integrated Delivery System

Healthcare Delivery in NCR Current State vs. Future State

Current State: Two Large Medical Centers, Two Hospitals; Service Specific

National Naval Medical Center
Large Medical Center

Walter Reed Army Medical Center
Large Medical Center

DeWitt Army Community Hospital
Hospital

Malcolm Grow Medical Center
Medical Center

Merge and Expand

Merge and Expand

Remove Inpatient Capacity

Walter Reed National Military Medical Center, Bethesda, MD
Joint Military Medical Center
345 Inpatient Beds

Fort Belvoir Community Hospital
Large Joint Hospital
Expanded Inpatient
120 Inpatient Beds

Malcolm Grow Clinic
Air Force Clinic
No Inpatient

Key

- Navy
- Army
- Air Force
- Joint Staffing

Future State: One Large Medical Center, One Large Hospital, One Clinic; Joint Staffing

Walter Reed National Military Medical Center



- 345 Inpatient Beds
- Warrior Transition Lodging
- New parking facilities (3,000 spaces)
- National Intrepid Center of Excellence
- 3 New Fisher Houses
- Fitness Center (Gym, Pool, Aerobics Ctr., Integrated Cardiac Health Project)

Walter Reed National Military Medical Center



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New Capabilities at WRNMMC

- Vision Centers of Excellence
- National Intrepid Center of Excellence
- Level I Trauma Care
- Consolidated Cancer Center
 - Gynecological Oncology
 - Prostate Oncology
 - Breast Cancer
 - Medical Oncology
 - Surgical Oncology
- Comprehensive Warrior Transition Support Services
- Joint Pathology Center

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National Intrepid Center of Excellence
(Artist's Rendering)



- 75,000 square foot, two-story facility being built next to new WRNMMC
- Advanced diagnostics, initial treatment plan and family education, introduction to therapeutic modalities
- Provides referral and reintegration support for military personnel and veterans with TBI, post traumatic stress disorder, and/or complex psychological health issues

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Admin, Gym and Parking Complex

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Fort Belvoir Community Hospital

120 Inpatient Beds
 1.275 M GSF Hospital Complex
 Central Utility Plant (CUP)
 Helipad/ Ambulance Shelter
 3500 Parking Spaces

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New Capabilities at FBCH

- Adult Oncology Services
- Radiation Oncology
- Intensive Care Unit
- Inpatient Behavioral Health
- Inpatient Pediatric
- Breast Center
- Nuclear Medicine
- Laser Eye Center
- Oral Surgery
- Chiropractic Services
- Pain Clinic
- Rheumatology
- Comprehensive Warrior Transition Support Services
- Vascular
- Cardiac Catheter Lab
- Neurology
- Endocrinology
- Pulmonary Clinic
- Patient Resource Library
- Infectious Disease Clinic
- Interventional Radiology
- VA Health Clinic
- Executive Medicine Clinic
- Residential Substance Abuse Treatment
- Multidisciplinary Interventional Services

Evidence Based Design (EBD)

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Care for Wounded, Ill and Injured Service Members

- Warriors will remain at WRAMC until recovery, support, and management services at WRNMMC and FBCH are in place
- Bethesda will have sufficient Americans with Disabilities Act (ADA) lodging to support 350 of the most severely injured casualties including all amputees, open traumatic brain injury, and complex trauma cases as well as 150 NMAs
- Both Bethesda and Fort Belvoir will have new facilities to provide warrior transition services such as an ADA compliant fitness center, dining facility, resident support center, and administrative functions
- JTF CapMed is developing integrated WRNMMC CONOPS for Wounded Warriors support, to include: Medical Regulation, WI programs, and military service specific requirements
- War Game 17-18 August 2010

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WII Beds in the NCR (On/Off-base) by Location

Occupant Data	WI (On-base)	NMA (On-base)	WI (Off-base)	NMA (Off-base)	Occupant Data	WI (On-base)	NMA (On-base)	WI (Off-base)	NMA (Off-base)
Alamo Hall	27	18	N/A	N/A	Alamo Hall	51	N/A	N/A	N/A
Abraham Hall (Barracks)	250	N/A	N/A	N/A	Estimote Hall	N/A	N/A	N/A	N/A
Stone Mansions	73	8	N/A	N/A	Combs Hall	N/A	N/A	N/A	N/A
Madigan House	150	98	N/A	N/A	Navy Lodge	N/A	2	N/A	N/A
Palmer House 1	2	N/A	N/A	N/A	Palmer House 1	N/A	N/A	N/A	N/A
Palmer House 2	5	N/A	N/A	N/A	Palmer House 2	N/A	N/A	N/A	N/A
Palmer House 3	1	N/A	N/A	N/A	Off-Post Family Lodging	N/A	N/A	N/A	N/A
Off-Post Family Lodging	N/A	N/A	41	30	Off-Post Family Lodging	N/A	N/A	85	N/A
Off-Post Family Housing	N/A	N/A	100	N/A	Total Occupants	51	2	85	0
Total Occupants	448	124	141	30					

Fort Belvoir					Fort Meade				
Occupant Data	WI (On-base)	NMA (On-base)	WI (Off-base)	NMA (Off-base)	Occupant Data	WI (On-base)	NMA (On-base)	WI (Off-base)	NMA (Off-base)
MCJEE Barracks	49	N/A	N/A	N/A	Barracks	98	N/A	N/A	0
The Fort Belvoir Lodge	0	N/A	N/A	N/A	Off-Post Lodging	12	2	N/A	N/A
Off-Post Family Housing	0	N/A	N/A	N/A	Off-Post Family Housing	17	N/A	N/A	N/A
Off-Post Family Lodging	N/A	N/A	82	N/A	Off-Post Family Lodging	N/A	N/A	85	N/A
Total Occupants	49	0	82	0	Total Occupants	127	2	85	0

Total WI Occupants				Total NMA Occupants			
Occupant Data (On-base)	WI (On)	WI (Off)	Total	Occupant Data (On-base)	NMA (On)	NMA (Off)	Total
WRAMC	448	141	589	WRAMC	124	30	154
Bethesda	51	85	136	Bethesda	0	0	0
Fort Belvoir	88	82	148	Fort Belvoir	2	0	2
Fort Meade	127	85	212	Fort Meade	0	0	0
Andrews	0	0	0	Andrews	0	0	0
Total WI Occupants	682	382	1074	Total NMA Occupants	131	30	161

As of 24 July 2010
 Data Sources: WRAMC WTB, NSA Bethesda, WTU Fort Belvoir, Services Representatives
