
National Capital Region Medical Update Brief

to
The Defense Health Board

by
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Agenda



- Background
- NCR Medical BRAC Summary
- NCR Medical BRAC Hospital Projects
- Comprehensive Master Plan
- Integrated Delivery System



Background

- BRAC consolidated four NCR inpatient hospitals into two
 - Most complex and largest Base Realignment and Closure project in the history of the Department of Defense. The combined projects for the Walter Reed National Military Medical Center and Fort Belvoir Community Hospital - \$2.8 billion in construction and outfitting of over three million square feet of new and renovated medical and administrative space and relocation of over 4,200 personnel and 224 Wounded Warriors and their families.
- Joint Task Force National Capital Region Medical (JTF CapMed)
 - In September 2007, JTF CapMed was established to oversee the NCR Medical BRAC Mission as well as the establishment of an integrated healthcare system anchored by two world-class treatment facilities - Walter Reed National Military Medical Center and Fort Belvoir Community Hospital.
 - ✓ Execute Medical BRAC Actions
 - ✓ Execute Guaranteed Placement Program
 - ✓ Establish Single Civilian Personnel Workforce





NCR Medical BRAC Summary (slide 1 of 2)

INFRASTRUCTURE CAPABILITY/CAPACITY	FBCH	WRNMMC
Total New Square Feet	1,515,000	1,103,000
Total Renovated Square Feet	0	472,000
Increased Parking Spaces	3,500	2,693
Increased Wounded Warriors Lodging	288	306

Hospital Outfitting

- Consolidated initial outfitting and transition contract for two Service Hospitals
 - Achieved bid saving of \$77M against independent government cost estimate
 - Estimate 9.5% (\$32M) savings in the execution of \$341M General Dynamic Initial Outfitting & Transition Contract
- Re-used 10,781 equipment items resulting in cost of avoidance of \$114M
- Procured 158,250 medical and non-medical items (including new medical technologies)
- Issued 46 Authorizations to Proceed which increased quantity of outfitting items from 101,492 to 158,250 items

Patient Reassignment and Appointing

- Reassigned 34,206 enrollees from WRAMC to NCR MTFs - accommodated all patient preference to date
- Established single appointing number for Integrated Referral Management and Appointing Center serving all WRNMMC & FBCH Enrollees



NCR Medical BRAC Summary (slide 2 of 2)

Transition and Relocation

- 5,748 Staff Received Orientation training
- 5,474 Staff trained on new equipment
- 2,153 Staff Attended 5 Day in the Life Training Exercises
- 160 Clinical Services Relocated
- 750,000 cubic feet of material relocated
- 168 Inpatients moved (Including internal NNMC, WRAMC to NNMC, DACH to FBCH moves)
- 224 Outpatient Wounded Warriors moved to Fort Belvoir or NSA Bethesda

Manpower and Personnel

- Successfully implemented Guaranteed Placement Program for 2,300 WRAMC employees without displacing any of the 1,930 NNMC or DACH employees
- Successful conversion of 4,410 Service Civilians to DoD
- Developed Workforce Mapping migration for 9,618 employees
- Created 4,446 movement orders for personnel in transition

IM/IT

Executed \$19.3M installation of an Integrated Healthcare Data Network (JMED) which provides a common desktop and a standardized suite of IT tools for providers across the NCR. Improves visibility of patient information (patient data, radiology images, and email). Reduces sustainment costs throughout all NCR medical facilities.



Before and After

Walter Reed National Military Medical Center

BEFORE

AFTER



Fort Belvoir Community Hospital

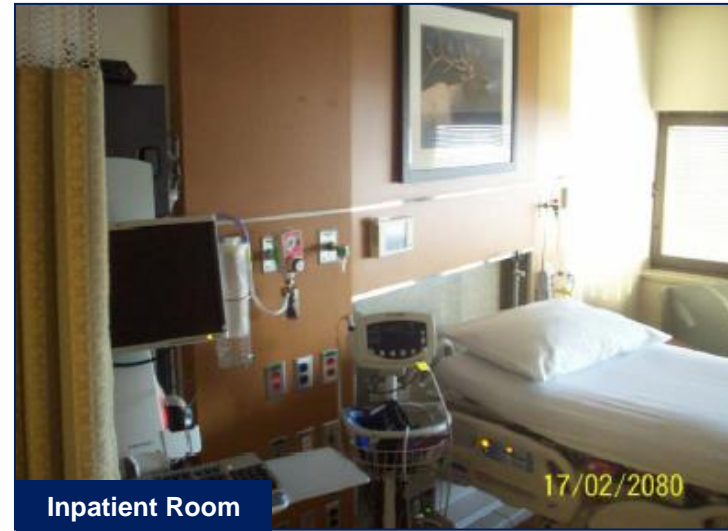
BEFORE

AFTER





WRNMMC Construction and Outfitting *BRAC Renovations – Single Patient Rooms*



CONSTRUCTION: Complete
EQUIPMENT: 17,539 items outfitted
SPACE: 450,000 SQFT
NOTES: 66 single patient rooms



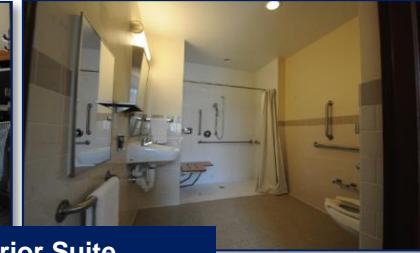
WRNMMC Construction and Outfitting

Warrior Transition/Lodging

Intermediate Rehabilitation Capability



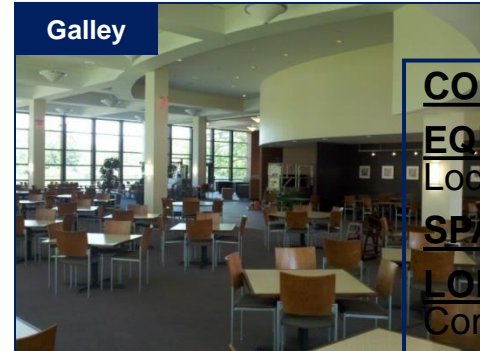
Exterior



Warrior Suite



Galley



CONSTRUCTION: Complete
EQUIPMENT: Fully outfitted Dining, Admin & Lodging Complex
SPACE: 295,000 SQFT
LODGING: 306 Americans with Disabilities Act Compliant Rooms (153 Suites)
LEED STANDARD: Silver
NOTES: Dedicated galley, warrior support services on-site (center building), close proximity to Warrior Clinic and Fitness Center



Austin's Room

Healing Garden





WRNMMC

Comprehensive Master Plan Components

MILCON (in \$M)	
WRNMMC Central Clinical Expansion	
Design	\$56
Temporary Facilities and Parking Garage	\$69
New Construction/Replacement/Demolition	\$492
Subtotal \$617	

Bethesda Installation	
Design	\$10
Child Development Center	\$18
Utility Upgrades	\$47
Base Installation Appearance Plan	\$6
Traffic and Parking Improvements	\$4
Subtotal \$85	
MILCON TOTAL \$702	

Operations & Maintenance (in \$M)	
Medical Technology Upgrade	
SMART Suites/Beds * <i>Funded in FY10</i>	\$10
Real Time Location System * <i>Funded in FY10</i>	\$3
Equipment Relocation and Acquisition	\$10
Subtotal \$23	

Installation and Medical Center Environment	
Master Planning	\$2
Campus Wayfinding and ADA Accessibility	\$11
Pedestrian Improvements	\$2
Subtotal \$15	

WRNMMC Central Clinical Expansion	
Initial Outfitting and Transition	\$89
Subtotal \$89	
O&M TOTAL \$127	

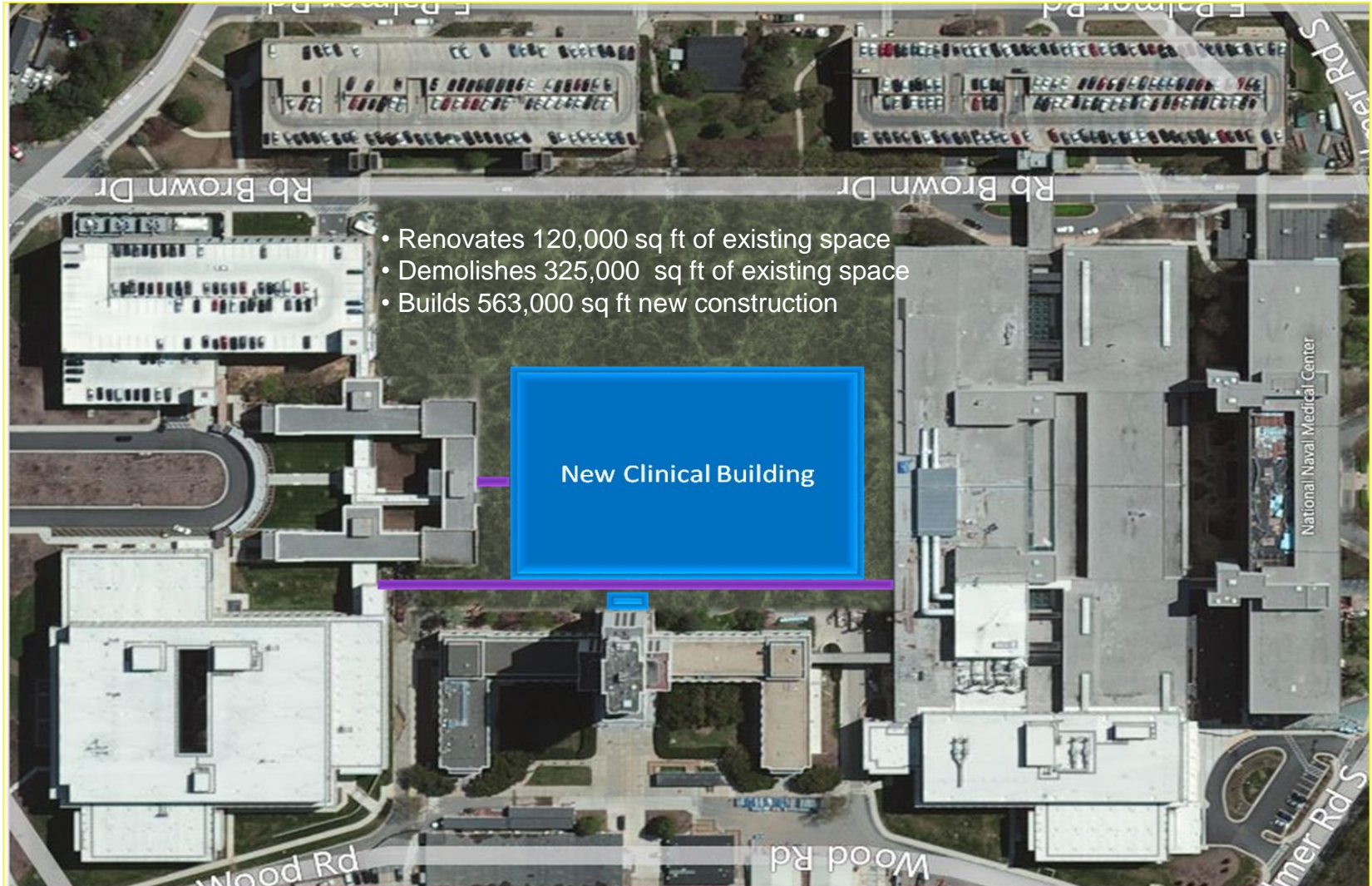
TOTAL = \$829M

Also:

- \$65M Special Project Phase 1 renovation of 10 WRNMMC operating rooms completed Aug 2011, Phase 2 renovation for remaining 7 ORs started Nov 2011.
- Special Project for Bulk Transport/Central Sterilization Phase 1: On-going will complete Jan 2012 and Phase 2 designed and awarded.



WRNMMC Comprehensive Master Plan Clinical Infrastructure





NCR Medical Integrated Delivery System Anchored by Joint Hospitals



New WRNMMC Capabilities

- Vision Centers of Excellence
- National Intrepid Center of Excellence
- Level 2B Nursery
- Level I Trauma Care
- Consolidated Cancer Center
- Military Advanced Training Center
- Gynecological Oncology
- Prostate Oncology
- Breast Cancer Center
- Medical Oncology
- Surgical Oncology
- Comprehensive Warrior Transition Support Services
- Joint Pathology Center



FBCH Capabilities

- Adult and Radiation Oncology Services
- ICU
- IP Behavioral Health
- Inpatient Pediatric
- Breast Center
- Nuclear Medicine
- Laser Eye Center
- Oral Surgery
- Chiropractic Services
- Pain Clinic
- Rheumatology
- Vascular
- Cardiac Catheter Lab
- Neurology
- Endocrinology
- Pulmonary Clinic
- Interventional Radiology
- Comprehensive Warrior Transition Services
- And more....

WRNMMC

Staff: ~6000
 Total Beds: 345
 ICU Beds: 50
 Operating Rooms: 20
 Projected Wounded Warriors: 350

FBCH

Staff: ~3000
 Total Beds: 120
 ICU Beds: 10
 Operating Rooms: 10
 Projected Wounded Warriors: 400



Objectives of NCR Medical Integrated Delivery System



- **Joint Hospitals provide the foundation for the NCR Medical Integrated Delivery System...the military's first network under a single authority**
- **Objectives of the Integrated Delivery System**
 - **Quality Improvement and Cost Reduction:**
 - Reducing administrative/overhead costs
 - Sharing risk
 - Eliminating cost-shifting
 - Outcomes management and continuous quality improvement
 - Reducing inappropriate and unnecessary resource use
 - Efficient use of capital and technology systems & support
 - Standardization of equipment and business practices
 - **Consumer Responsiveness:**
 - Seamless continuum of care
 - Focus on the health of enrollees
 - **Community Benefit:**
 - Improvement of community health status
 - Addressing the prevention of social issues which affect community health
- **Standardized systems and common processes/practices will allow for smooth movement of staff between the hospitals**



NCR Medical Integrated Delivery System

- **Operational and Fiscal Control of NCR Hospitals**
 - Walter Reed National Military Medical Center
 - Fort Belvoir Community Hospital
 - Hospital Staff - 9,497 (Milpers - 3,783, Civpers - 4,204, Contractors - 1,510)
 - ~\$1.35B Operating Budget , ~ 9 % of MHS Direct Care System Budget
 - FY 10 Workload as % of MHS: RVUs - 15%, RWPs - 11%, Non-MH BDs - 12%, MH BDs - 13%
- **TACON Medical Clinics #: 32, FY10 RVUs 1,076, 531, 3.6% of MHS RVUs**
- **GME: 63 GME programs, 2011/12 - 711 trainees**
 - Forty-six percent (46%) of all Army GME programs and 34% of all Navy GME programs are based in the NCR. These programs include 28% of all Army and 23% of all Navy GME trainees
- **Patient Population**

Category	AD	ADD	RET	Others
Beneficiaries	79,059	134,671	121,544	184,758
Enrollees	82,879	92,748	44,304	59,447



NCR Integrated Referral Management and Appointing Center (IRMAC)



- **Cornerstone of Regional IDS**
- **Consolidated call center personnel from WRAMC, NNMC and FBCH to create NCR Integrated Referral Management and Appointing Center**
 - **Sixty-six call agents support NCR Integrated Delivery System**
- **IRMAC will control leakage to private sector**

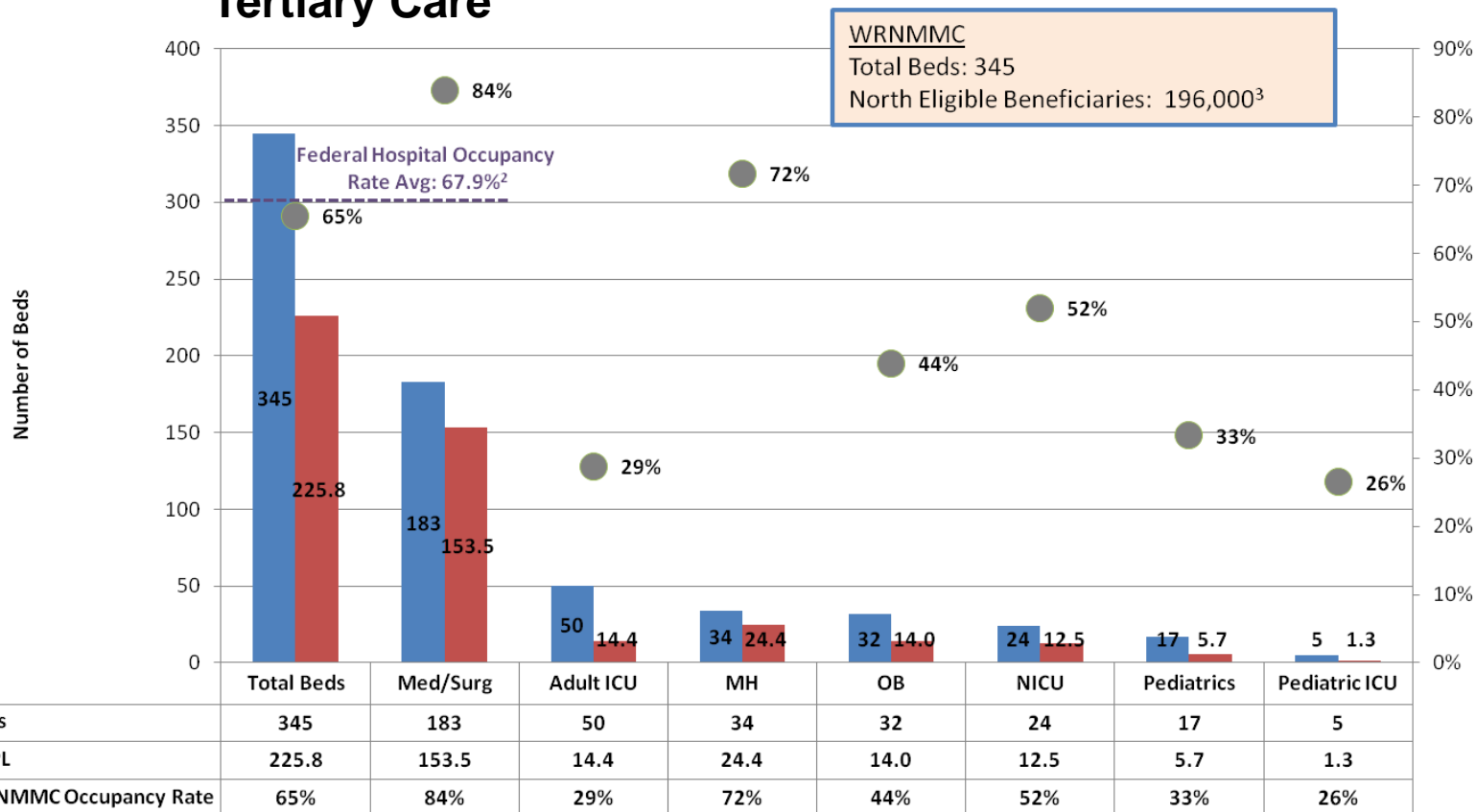
Central Appointing Center	Per Week
Average Daily Call Volume	3,339
Highest Daily Call Volume	3,831

Referral Management	Per Week
Referrals to IRMAC	4,068
Appointed to MTF	3,015



FY12 WRNMMC Projected Average Daily Patient Load (ADPL) and Occupancy Rate¹

Tertiary Care



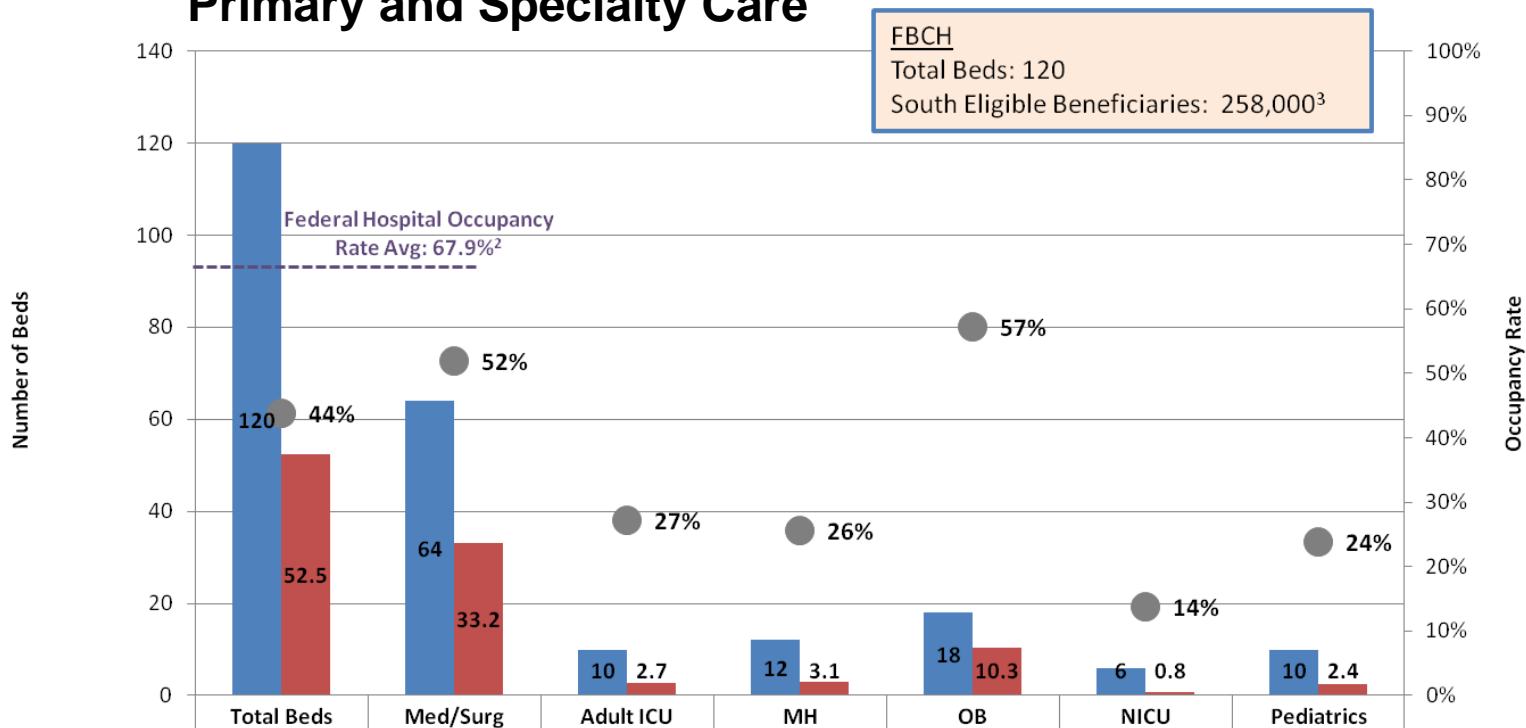
1. Based on FY10 Actual workload at NNMC + WRAMC, and BRAC Beneficiary Reassignment Projections of Workload
2. American Hospital Association (AHA) Annual Surveys of Hospitals, 2008 Hospital Occupancy Rates
3. Eligible beneficiaries within Catchment of NNMC or WRAMC



FY12 FBCH Projected Average Daily Patient Load (ADPL) and Occupancy Rate¹



Primary and Specialty Care



■ Beds	120	64	10	12	18	6	10
■ ADPL	52.5	33.2	2.7	3.1	10.3	0.8	2.4
● FBCH Occupancy Rate	44%	52%	27%	26%	57%	14%	24%

1. Based on FY10 Actual workload and BRAC Beneficiary Reassignment Projections of Workload
2. American Hospital Association (AHA) Annual Surveys of Hospitals, 2008 Hospital Occupancy Rates
3. Eligible beneficiaries within Catchment of FBCH or Andrews



Patient Centered Medical Home

- **Organizing Integrated Delivery System Medical Home Operations**
 - **Communication, Education and Training of MTF Staff**
 - **Communication and Education Outreach to Stakeholder Groups**
 - **Communication and Education Outreach to Patients**
- **Metrics**
 - **Timely Care**
 - **Primary Care Manager Continuity**
 - **Enrollee Satisfaction**
 - **Emergency Department Utilization**
 - **Improvement in HEDIS Measures**
 - **Staff Satisfaction**



Shared Services

- ✓ **Integrated Referral Management and Appointing Center**
- ✓ **Civilian Human Resources**
- ✓ **Information Management and Information Technology**
 - **Joint Medical Network will increase system stability/reliability, enable IDS access to all systems, increase speed of application response time, provide redundant data failover for multiple share applications, decrease cost of the IT lifecycle costs and speed insertion of new technology**
- **Supply Chain and Contracting**
- **Planning, Programming, Analysis & Evaluation**



NCR Medical Integrated Delivery System

Unity of Command & Unity of Effort



Provision of high quality, integrated medical care	<input checked="" type="checkbox"/>
Maintenance of trained and deployable medical force	<input checked="" type="checkbox"/>
Achievement of significant cost-savings	<input checked="" type="checkbox"/>

Command & Control Model has inherent advantages for IDS

