San Antonio Military Health System (SAMHS)

Presented by:
Maj Gen Byron Hepburn
Commander, 59th Medical Wing
Report Documentation Page

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Standard Form 298 (Rev. 8-98)
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Overview

• Pre-BRAC
• Post-BRAC
• Shaping the future
Pre-BRAC

- Two inpatient facilities in San Antonio
- Inpatient and outpatient medical care provided at both
- OB/GYN and Pediatrics were integrated
- Some GME programs were integrated
Positive Changes Since BRAC Law

• All GME programs are fully integrated
  • Highest average accreditation length
  • Highest board scores Nationally

• Progress toward service integration initiatives continue

Opportunities for synergy and creating a High Quality Health System
MOA signed by respective Service Chiefs 27 Sep 10 (effective 15 Sep 11) establishes SAMHS in order to provide oversight for clinical, educational, and business operations for the San Antonio market/catchment area.

MOA Par 2.b., 2.e., c., 4.a.(1)
SAMHS Objectives

- The objective of these two organizations, working in concert, is to:
  - Sustain Readiness Skills of the medical force
  - Provide Health Improvement & Healthcare Services
  - Support GME and other Ed & Trng
  - Support Basic/Clinical Biomedical Research

  MOA Par 3.c.

- SAMHS will drive efficiencies and optimization of the direct care system and use of the network

  MOA Par 4.a.
SAMHS Structure

SAMHS
(Army & AF GOs rotate Director/Dep Director)

BAMC
(Army GO)

SAUSHEC*
(Maintain current GHE governance bylaws)

59MDW
(AF GO)

SAMHS
(Army & AF GOs rotate Director/Dep Director)

Other Army Clinics

SAMMC
(AF DCCS)

WHASC
(Army Deputy)

Other Air Force Clinics

- Alternating/shared SAMHS leadership
- Oversight of San Antonio military healthcare
- Fully integrated SAMMC/WHASC
- Continued Service Lead at WHASC (59MDW CC) and SAMMC (BAMC CG)

* SAUSHEC: San Antonio Uniformed Services Health Education Consortium
Military Health System
Quadruple Aim

Enabling a medically ready force, a ready medical force, and a resiliency of all MHS personnel

Patient and family centered care that is seamless and integrated. Providing patients the care they need, exactly when and where they need it; safe care

Improving quality and health outcomes for a defined population. Advocating and incentivizing healthy behaviors.

Managing the cost of providing care for the population. Eliminate waste and reduce unwarranted variation; reward outcomes, not outputs.

SAMHS Synergies Advance the MHS Quadruple Aim
FY12 Predicted SAMHS Population

**FY11 San Antonio Population**
- Eligible Beneficiaries = 214,026
- TRICARE Enrollment = 151,397
  - 51,269 BAMC
  - 57,079 WHMC
  - 21,688 Randolph
  - 21,361 Network
- Non-enrolled student population:
  - 8,160 Lackland BMTs/Tech
  - 9,823 FSH Students

**FY12 San Antonio Population**
- Eligible Beneficiaries = 227,115
- SAMHS Enrollment = 155,550
  - Network = 22,000
- Non-enrolled student population:
  - 8,160 Lackland BMTs
  - 9,823 FSH Students
Inpatient Staff/Equip Transition

- **Pediatrics Ward and PICU**: 59th MDW Pediatric Ward, PICU, Hematology/Oncology and Subspecialty Clinics to 5th floor at BAMC
- **ICU/Medical/Surgical Beds**: Through attrition, beds will close at WHMC and open at BAMC.
- **Psychiatric Ward**: Moves from WHMC to 7th floor BAMC West Bedtower.
- **Trauma and General Surgery**: WHMC Trauma assets relocate to BAMC and city of SA goes from 3 to 2 Level 1 Trauma Centers.
- **Bone Marrow Transplant Unit and Clinic**: Moves from WHMC to BAMC.
- **Labor and Delivery Unit Post-Partum and NICU**: Moves from WHMC to BAMC 5th floor.

**ALL 59th MDW INPATIENT SERVICES WILL HAVE RELOCATED TO BAMC RENOVATED SPACE PRIOR TO THE BRAC DEADLINE.**

**BRAC Deadline**: Sept 15, 2011
BAMC
San Antonio Military Medical Center, SAMMC (15 Sept 11)

- Army GO Lead
- AF O-6 Deputy (DCCS)
- In/Outpatient Services
- Key for
  - Readiness
  - GME
  - Research
  - Education & Training

MILCON on track for completion 15 July 2011
• Army Personnel TBD
• AF Personnel: 2.6K+
• AF GO Lead
• Army O-6 Deputy
• Primary/Specialty Care
• Outpatient Surgery
• Sleep Center
• Eye Care COE
• Diabetes COE
Wilford Hall Ambulatory Surgical Center

MILCON Phasing

Phase 1A – FY10
Phase 1B – FY10
Phase 2 – FY11
Phase 3 – FY15
Phase 4 – FY17
(Demolition & site work for existing Wilford Hall Hospital)
QUESTIONS?