

Department of the Air Force

**Presentation to the Committee on Veterans' Affairs
Subcommittee on Health
United States House of Representatives**

Subject: Status of Military and VA Healthcare

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Good afternoon. I am Brigadier General Charles B. Green, Commander of the 59th Medical Wing, Wilford Hall Medical Center. I also serve as the Lead Agent of TRICARE Southwest, Region 6, which encompasses the states of Texas, Oklahoma, Louisiana, and Arkansas. Mr. Chairman and Members of the House Committee on Veterans' Affairs, Subcommittee on Health and distinguished visitors, thank you for allowing me to appear before you today and offer my thoughts on military healthcare and Department of Defense (DoD)/Department of Veterans Affairs (VA) collaborative efforts in the greater San Antonio area. I hope you will see today how this federal collaboration is meeting the needs of our Sailors, Airmen, Marines and Soldiers returning from contingency operations.

Over the first year of my command, I have truly come to appreciate San Antonio as one of the most ideal communities in the nation for delivering medical care in a cost effective and efficient manner. World-class medical centers and research facilities combine to offer a unique opportunity to share resources and improve the quality of health care for our community. In addition to this unparalleled opportunity to share resources, San Antonio VA and military medical facilities play a key role in the support of casualties and returning troops from overseas.

As Commander of Wilford Hall Medical Center, I am keenly aware of how important San Antonio is to the war fighter. Wilford Hall operates the largest graduate medical education program and the only Level 1 trauma center in the Air Force. Wilford Hall is also home to a very active Aeromedical Staging Flight that receives military patients for treatment or transfers them to other military medical facilities. During calendar year 2003, and to date in 2004, the 59th MDW provided Aerovac reception for 609 OEF and OIF patients. WHMC treated 127 patients and arranged care for 482 with other branches of the Armed Services. Many have been transferred to Brooke Army Medical Center's world-renowned burn unit.

I am very proud of my staff's commitment to our nation's men and women serving in harm's way. We have some of the best trauma surgeons in the world. Recently, our surgeons put their skills to use to help a critically wounded soldier who suffered a bullet wound to the face. His wound required significant facial reconstruction. Our surgeons have also provided hand surgery for several wounded soldiers. This world-class care is possible because of the excellent trauma programs maintained at both Wilford Hall and Brooke Army Medical Centers.

I also want to assure the committee we in San Antonio take very seriously the need to provide pre- and post-deployment surveillance for our military personnel. In the Air Force, all personnel deploying and returning from deployment are required to process through the local Air Force Public Health Office. Public Health ensures a post deployment health assessment was conducted in theater when Airmen return, even prior to their beginning rest and reconstitution leave. Eight hundred and thirty-seven members processed through Wilford Hall Public Health in 2003. This documentation helps Mr. Coronado and the VA ensure military members receive seamless medical care when they leave active duty. As most casualties returning to San Antonio are provided definitive care at Brooke Army Medical Center, the VA has placed a full-time social worker at the Army facility to ensure this flawless transition.

This history of DoD/VA cooperation in San Antonio goes back to the Spring of 1991 when the San Antonio Health Care Coordinating Council was established to maximize cooperation and coordination within the military medical community and the other Federal, State, local government, and civilian providers of health care. Soon after my arrival at Wilford Hall, I contacted Brigadier General Fox and Mr. Coronado to talk about this history of cooperation and to explore opportunities to take it to the next level. The San Antonio Federal Health Consortium was created in February of this year to promote sharing among the member

medical facilities and monitor progress toward mutual goals and projects. We are pleased to report many great successes.

VA and military command authorities recently notified us that three San Antonio proposals were selected to progress to the second level of review for funding under the DoD/VA Health Care Sharing Incentive Fund. Of 57 proposals submitted nationwide, 28 were selected for further consideration.

Several sharing activities that we are moving towards include a potential northside DoD/VA clinic that could make primary medical care more convenient for beneficiaries. I have directed my staff to partner with Brooke Army Medical Center to move some primary care capability to an existing clinic at Camp Bullis. I anticipate having staff at the Camp Bullis Clinic this month.

At Wilford Hall, I currently have a shortage of Intensive Care Unit (ICU) nurses that causes my emergency room to divert trauma patients due to lack of adequately staffed beds. This impacts Wilford Hall's trauma program from both a currency and training standpoint. The diversion affects Mr. Coronado and the VA when their patients cannot be seen in my emergency room. To address this issue, we are exploring having the VA staff these ICU nurse positions in return for a commensurate commitment by Wilford Hall to see the VA's patients. We feel very confident we can recapture approximately \$1 million annually spent by the VA downtown for this same care.

We also have been approved as joint demonstration sites for the sharing of lab and credentialing information. Our staffs are working on a joint purchasing contract for pagers and exploring the possibility of bringing certain lab tests in house to save dollars. These initiatives are just a few examples of how we are assisting each other to leverage our individual institutional

strengths to benefit our beneficiaries and maintain a strong system for caring for military personnel.

Activities are built on an impressive base of already existing agreements. Currently Wilford Hall and Brooke Army Medical Center have 21 sharing agreements with the South Texas Veterans Health Care System. One of these agreements is a blood services arrangement between South Texas Veterans Health Care System and Wilford Hall Medical Center. The VA provides half of the personnel (9 Full Time Equivalents) for the Blood Donor Center at Lackland AFB in exchange for a one-third share of packed cells, plasma and platelets. Wilford Hall also provides complete maternity care, and on a space available basis, endoscopic ultrasound, strabismus and lithotripsy services.

Brooke Army Medical Center provides burn unit support and pathology lab tests for VA patients. In the event of a backlog at the VA, standing agreements exist for Brooke Army Medical Center to provide nuclear medicine scans and GYN services. The VA reciprocates and provides laundry and sterilization services for the Army. There are also agreements for Brooke Army Medical Center to utilize VA contracts for bio-medical equipment repair and hearing aids.

The sharing relationship can alleviate manpower crises and improve graduate medical education. For instance, Wilford Hall Medical Center currently has a general surgeon at the VA full-time. Obviously, the VA benefits from the addition of a surgeon and Wilford Hall Medical Center benefits from an additional training and currency opportunity. We continue to explore these types of mutually beneficial arrangements.

The Tri-Service Regional Business Office (TRBO) carries sharing to an even higher level by bringing together the National Acquisition Office of the Veteran's Administration and the VHA Standardization Office, as well as the Tricare Southwest and Central Regions (6, 7, and 8),

creating a consortium of 163 VA hospitals and 46 DoD facilities. At this time, we forecast a DoD cost-avoidance of \$6.5 million over a period of 5 years and look forward to even more savings as we further develop other initiatives currently being explored. The TRBO office recently sponsored a tri-service and VA surgical equipment standardization conference in San Antonio.

Mr. Chairman, I am very optimistic San Antonio is leading and will continue to lead the nation in DoD/VA sharing efforts. The Air Force, Army and VA are currently building on a long history of cooperation. The projects we have proposed will strengthen our system for providing medical services and ensuring our service men and women receive the best care in the entire spectrum of the federal health care system. Thank you for allowing me to appear before your Subcommittee.