

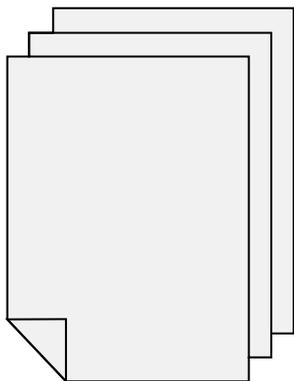


# Organizational Overview

**MG Jimmie O. Keenan**  
**Commanding General, SRMC**  
**Director, SAMHS**

# MHS Governance Reform Journey

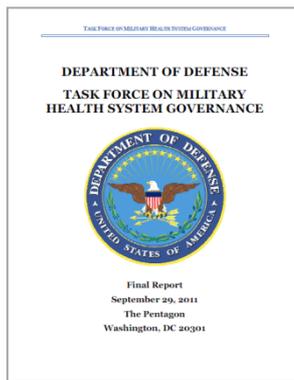
## Historical MHS Governance Studies



**1949 - 2006**

- 17 studies over 57 years
- 8 recs for unified service/unified joint command
- 6 recs for added central authority
- 3 recs “keep separate Service lines

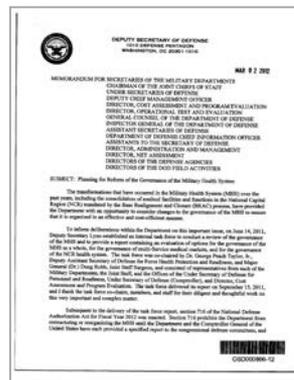
## DoD Task Force on MHS Governance



**September 2011**

- 18th study over 62 years
- 7th rec “added central authority”
- DHA model for MHS governance

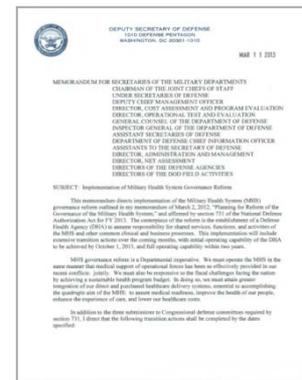
## DepSecDef Planning Memo



**March 2012**

- Directed I-Planning for MHS Governance Reform—
  - OASD(HA)
  - DHA
  - Shared Services
  - JTF-CapMed transition
  - eMSMs

## DepSecDef “Nine Commandments” Memo



**March 2013**

- Directed implementation of MHS Governance Reform—
  - OASD(HA) & TMA transition
  - DHA (as CSA)
  - Shared Services
  - NCR Directorate
  - eMSMs

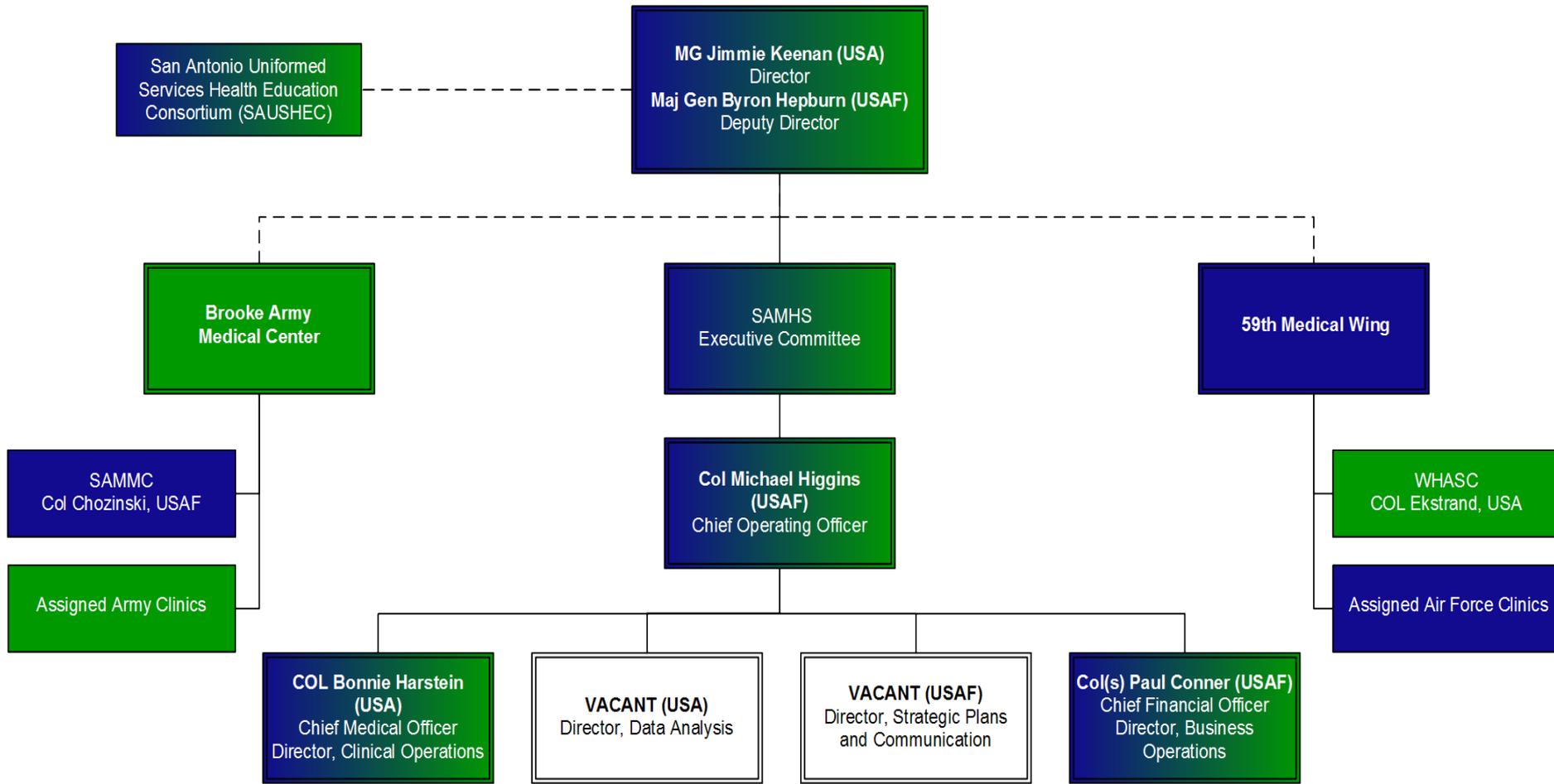
# eMSM Locations and Leads

1. National Capital Region  
*(Defense Health Agency)*
2. Colorado Springs, Colorado  
*(rotate Air Force/Army)*
3. Tidewater, Virginia  
*(Navy)*
4. **San Antonio, Texas**  
*(rotate Air Force/Army)*
5. Puget Sound, Washington  
*(Army)*
6. Oahu, Hawaii  
*(Army)*



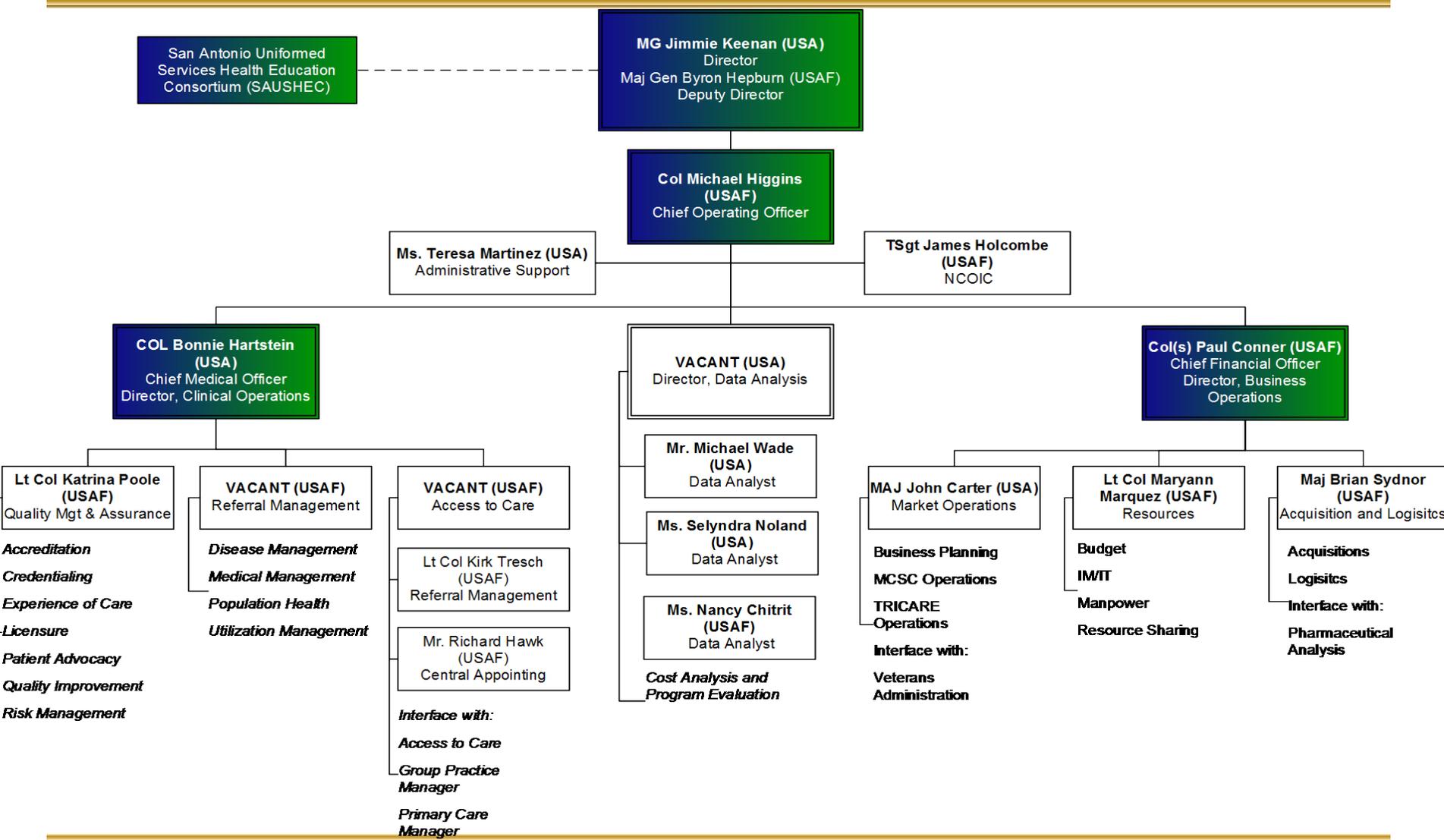
**eMSMs provide over 40% of all MHS Healthcare Delivery**

# Key Healthcare System Structures





# Key Governance Office Structures



# Air Force and Army Components

## *SAMHS eMSM*



- North Central Federal Clinic
- Randolph Clinic
- Reid Clinic
- WHASC



**WHASC**



- FSH Primary Care Clinic
- McWethy TMC
- SAMMC
- Schertz Clinic
- Taylor Burk Clinic



**SAMMC**

# Our MTFs

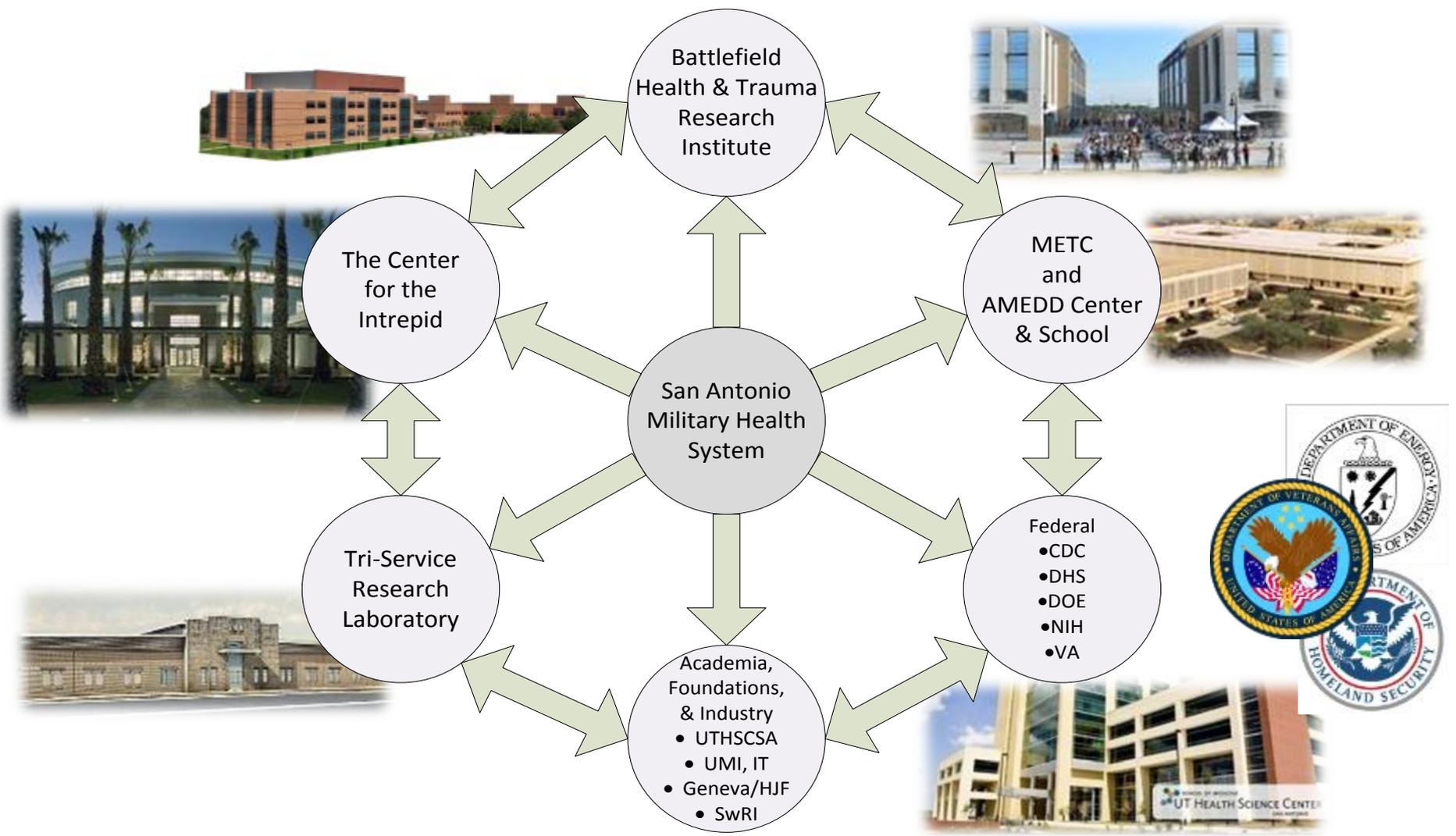


# Critical National and Local Resource

- **Strategic Asset**
  - “Home of Military Medicine”—SA Chamber of Commerce assessed \$3B direct, \$1B indirect economic impact
- **9 MTFs/\$1.18B O&M/12,000 staff/240,000 beneficiaries**
- **\$1.4B MilCons completed/pending FY06-FY16**
- **37 GME programs w/ 592 residents—92% 1st time pass rate**
- **Contingency/Humanitarian response—4 CCATs on call 24/7**
- **San Antonio Military Medical Center**
  - DoD’s largest inpatient facility
  - DoD’s only CONUS Level 1 Trauma Center
  - DoD’s only Bone Marrow Transplant Unit
  - DoD’s only Burn Center
  - Center for the Intrepid
- **Wilford Hall Ambulatory Surgical Center**
  - DoD’s largest outpatient facility
  - DoD’s largest Blood Donor Center
- **DoD’s largest centralized appointing/referral management**



# The Cutting Edge of Innovation and Research



---

## Short Term Focus

- *eMSM IOC*
- Achieve initial BPP targets (\$237M 5-year network cost savings) and develop next submission
- Develop eMSM metrics used MHS-wide
- Continue OSD, Interservice, and VA relationship building
- Implement DHA shared services across eMSM
- Continuous SAMHS branding and community outreach (STRATCOM)

## Long Term Focus

- *eMSM FOC*
- Apply best practices from across MHS and other eMSMs
- Fully leverage all civilian and US government resources to support patients and taxpayers
- Transition from System of Healthcare to System for Health

**CONTINUOUS FOCUS ON PATIENTS AND WORLD CLASS HEALTHCARE!**