



# **San Antonio Military Health System (SAMHS)**

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# Overview

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- Pre-BRAC
  - Post-BRAC
  - Shaping the future
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# 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*



# San Antonio Military Health System (SAMHS)

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- 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)

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# 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

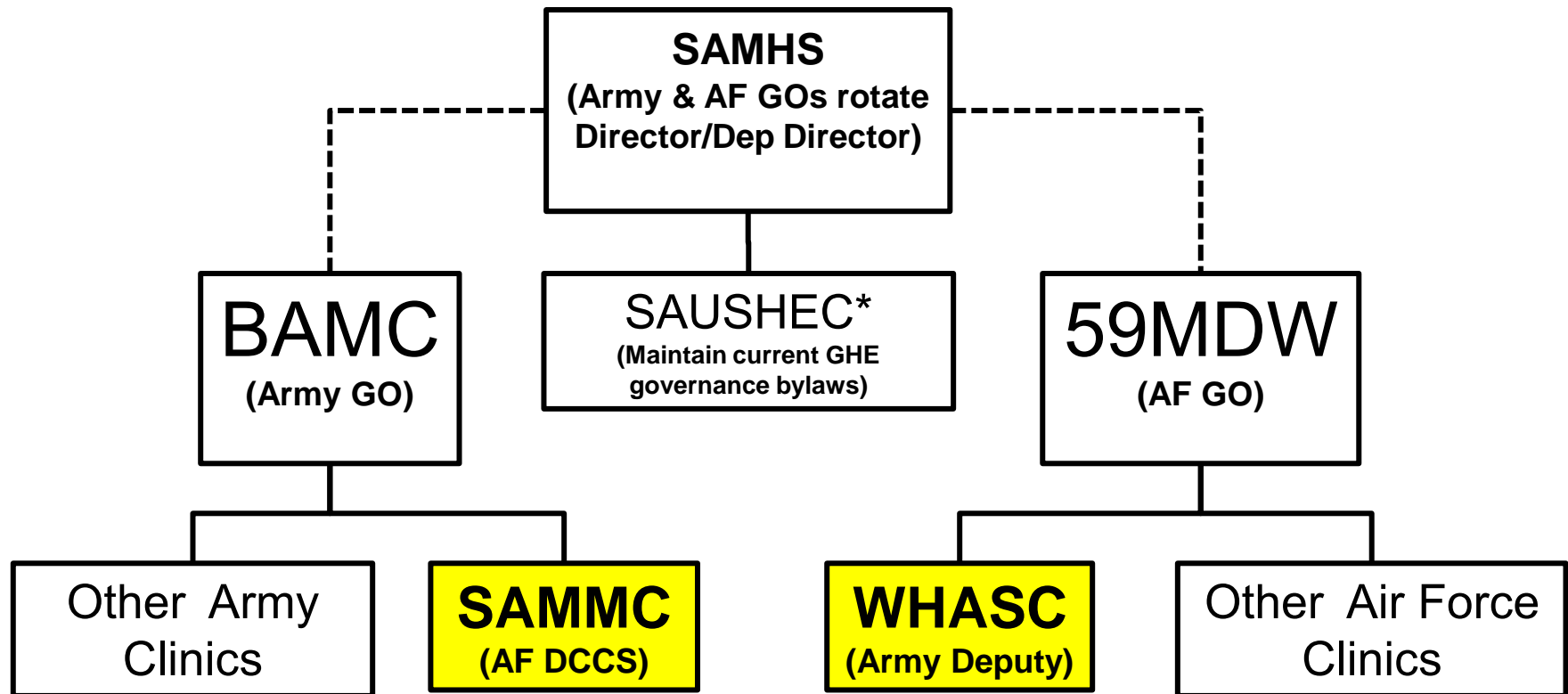
MOA Par 3.c.

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

MOA Par 4.a.



# SAMHS Structure



- 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





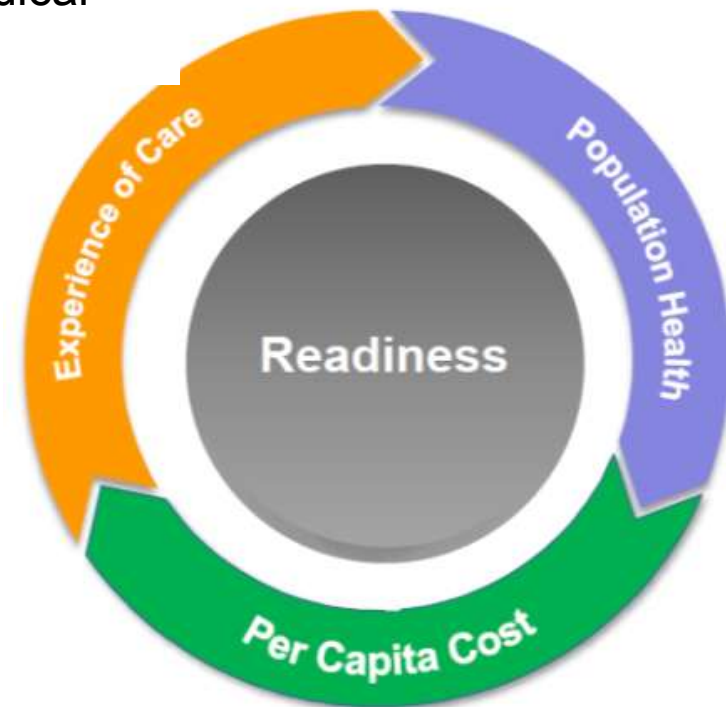
# Military Health System Quadruple Aim

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.

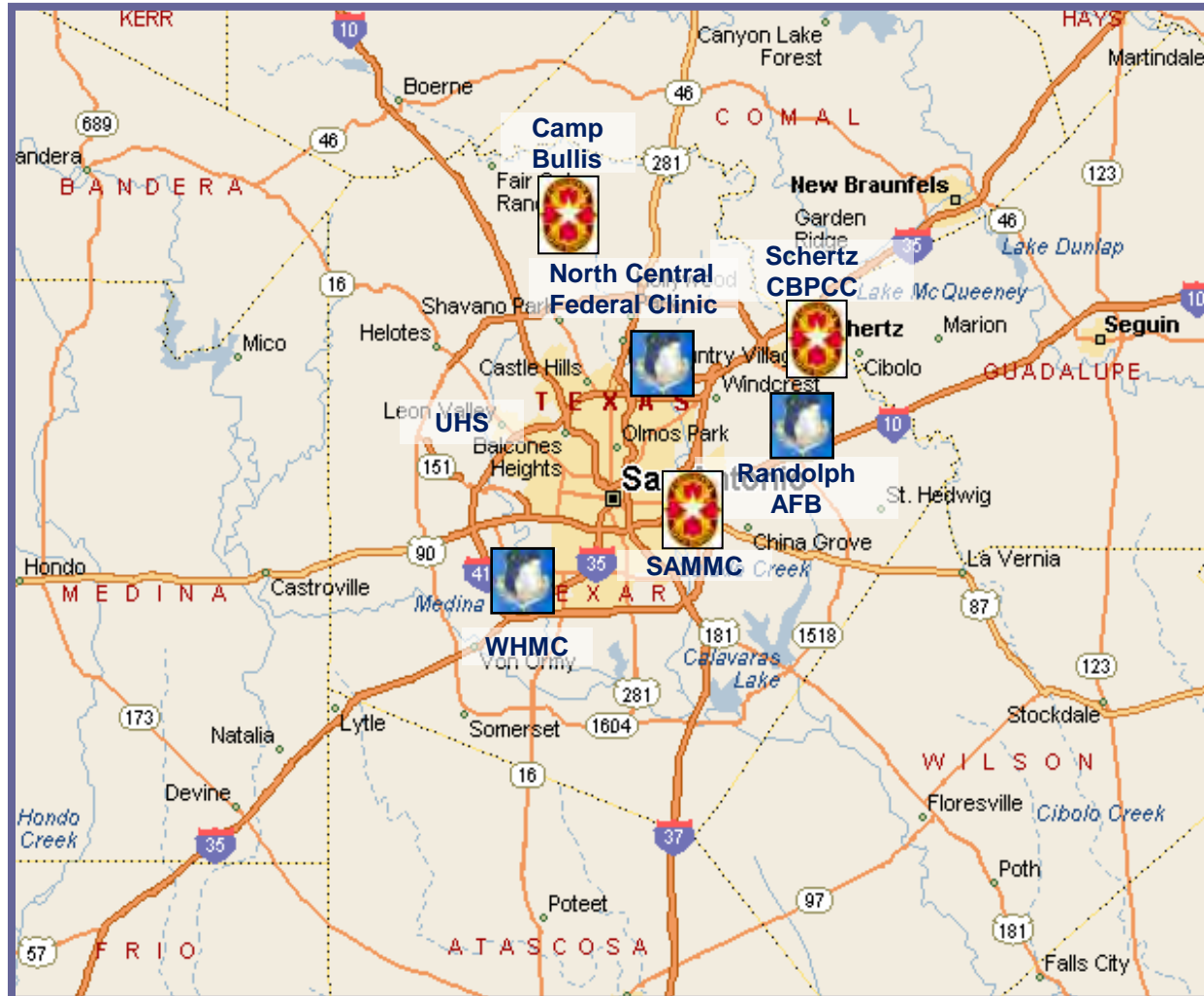
Managing the cost of providing care for the population. Eliminate waste and reduce unwarranted variation; reward outcomes, not outputs.



***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**

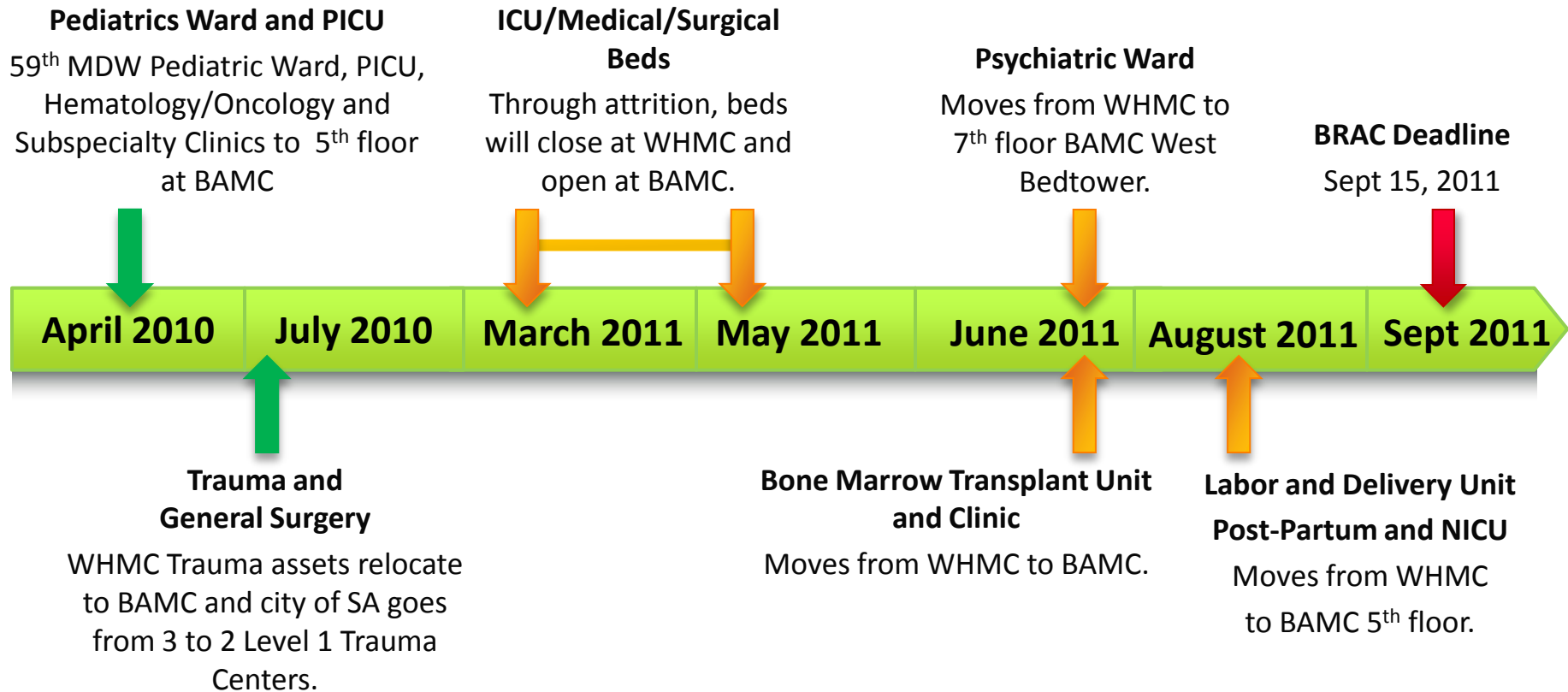
Network = 22,000

Non-enrolled student population:

- 8,160 Lackland BMTs
- 9,823 FSH Students



# Inpatient Staff/Equip Transition



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



**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***





# WHMC

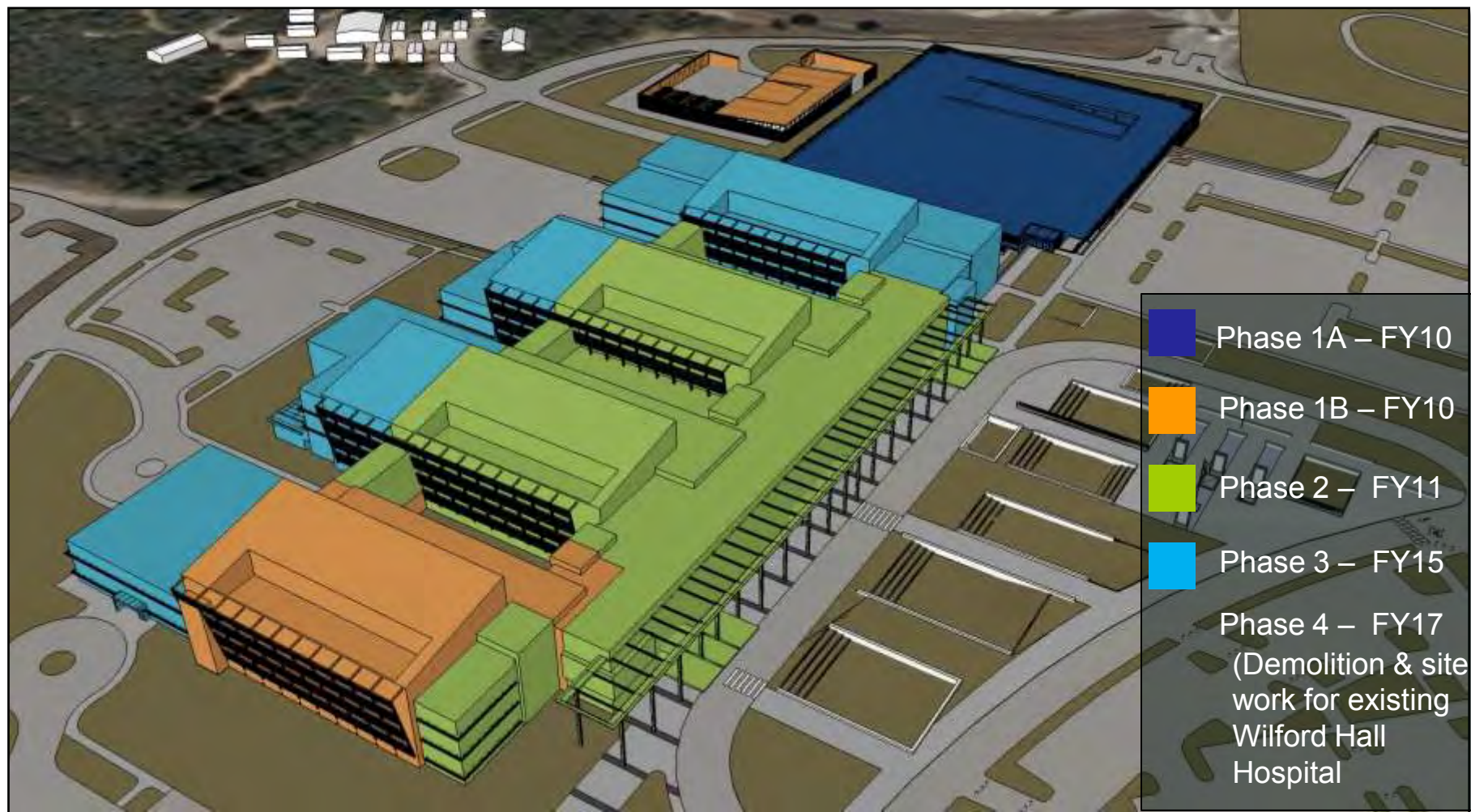
## Wilford Hall Ambulatory Surgical Center, WHASC (15 Sept 11)



- 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*





# San Antonio Military Health System

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***QUESTIONS?***

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