



JOINT PATHOLOGY CENTER WORK GROUP (JPCWG)

INFORMATION BRIEF

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DASD (C&PP)
April 24, 2008**



JPC WORK GROUP MEMBERSHIP

- **Deputy Assistant Secretary of Defense (Clinical & Program Policy)-Chair;**
- **Deputy Under Secretary of Defense (Installations & Environment);**
- **Assistant Secretary for Health, Department of Health and Human Services;**
- **Chief Medical Director, Department of Veterans Affairs;**
- **Deputy Assistant Secretary of Defense (Health Budgets & Financial Policy);**
- **Deputy Director, TRICARE Management Activity;**
- **Surgeon General of the Army;**
- **Surgeon General of the Navy;**
- **Surgeon General of the Air Force;**
- **Commander, JTF CapMed;**
- **President, Uniformed Services University of the Health Sciences;**
- **Director, Armed Forces Institute of Pathology.**



JPCWG MISSION

**Develop options for establishing a
JPC in accordance with NDAA 2008,
Section 722 & BRAC Law**



JPC

MINIMUM SERVICES

- As specified in the statute, the JPC shall provide, at a minimum, the following services:
 - (1) Diagnostic pathology consultation services;
 - (2) Pathology education;
 - (3) Diagnostic pathology research;
 - (4) Maintenance and continued modernization of the Tissue Repository.



SECTION 722 DEADLINE

If the President determines within 180 days that the JPC can not be established in DoD, then the JPC must be established in another Federal agency (August 28, 2008).



OPTIONS

- **Option 1: Minimal Change to Current Business Plan.**
- **Option 2: Redo Business Plan Consistent with BRAC and 722.**
- **Option 3: Establish JPC in Another Agency.**
- **Option 4: Additional options may be developed and considered.**



DELIVERABLES

- **A work group plan of action with milestones**
- **A written final report to the ASD (HA) - June 30, 2008**



MEETING 1:

April 8, 2008

- **Work group mission, goals, products**
- **Status of AFIP BRAC**
- **Legal Implications of NDAA 2008 Sec 722 & BRAC Law**



MEETING 2:

April 21, 2008

- **Discussion of options to consider:**
 - Option 1: w/in current BRAC Business Plan (Army EA)
 - Option 2: w/in USUHS (USUHS)
 - Option 3: w/in JTF CapMed (JTF CapMed)
 - Option 4: Outside NCR-Single Service (Navy-San Diego)
 - Option 5: Outsite NCR-Multi-Market (AF-San Antonio)
 - Option 6: “Privatized” (GOCO) Model (C&PP)
 - Option 7: Alternative Model (AFIP)
- Next meeting: May 8, 2008



BACK UP SLIDES



OPTIONS

- **Option 1: Minimal Change to Current Business Plan.** Assume realignment and closure of current AFIP functions consistent with current business plan. Identify remaining assets associated with the four JPC functions listed in section 722. Establish JPC in DoD using those assets without major supplementation.
- **Option 2: Redo Business Plan Consistent with BRAC and 722.** Assume realignment and closure of current AFIP functions consistent with BRAC Commission report. AFIP capabilities not specified in the Commission report are eligible to be absorbed into the JPC. Establish JPC in DoD from some or all of those assets, along with some or all of any other assets devoted to the four JPC functions listed in section 722.
- **Option 3: Establish JPC in Another Agency.** Same as option 2, except assume that by establishing the JPC in another agency, DoD's Program Management Office (specified in the BRAC Commission report) could fulfill DoD's second opinion consultation needs by acquiring them from the JPC.
- **Option 4: Other alternatives.**



POSSIBLE REVIEW GROUPS

- **AFIP BOARD OF GOVERNORS (BOG)**
- **DEFENSE HEALTH BOARD (DHB)**
- **SENIOR MILITARY MEDICAL ADVISORY COUNCIL (SMMAC)**