To establish within the Office of the Secretary of Defense an office responsible for implementing all recommendations and requirements regarding military medical facilities in the National Capital Region, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 25, 2010

Mrs. Davis of California (for herself, Mr. Ortiz, and Mr. Wilson of South Carolina) introduced the following bill; which was referred to the Committee on Armed Services

A BILL

To establish within the Office of the Secretary of Defense an office responsible for implementing all recommendations and requirements regarding military medical facilities in the National Capital Region, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; FINDINGS.

(a) Short Title.—This Act may be cited as the “World Class Military Medical Facilities Act”.

(b) Findings.—Congress makes the following findings:
(1) The Department of Defense lacks a complete plan for the entirety of facilities at the new Walter Reed National Military Medical Center in Bethesda, Maryland.

(2) The Department of Defense has not established an integrated operating structure, has not provided clear and appropriate budget authorities, and has not designed either joint military or civilian personnel structures to staff the new Walter Reed National Military Medical Center.

(3) There are differing standards and levels of construction and funding that could result in a facility that is not in totality a world class military medical facility.

(4) The Department of Defense lacks a unified construction standard for military construction and repairs to military medical facilities.

(5) In the report referred to in section 8(2), the National Capital Region Base Realignment and Closure Health Systems Advisory Subcommittee of the Defense Health Board identified numerous deficiencies in the current plan for the new Walter Reed National Military Medical Center.
SEC. 2. DISESTABLISHMENT OF JOINT TASK FORCE NATIONAL CAPITAL REGION MEDICAL.

Not later than 30 days after the date of enactment of this Act, the Secretary of Defense shall disestablish the organization known as Joint Task Force National Capital Region Medical. Upon such disestablishment, all personnel, property, and functions of the Joint Task Force National Capital Region Medical shall be transferred back to the military department from which the personnel, property, or functions were transferred or to the Office of the Secretary of Defense.

SEC. 3. ESTABLISHMENT OF OFFICE RESPONSIBLE FOR IMPLEMENTING NATIONAL CAPITAL REGION MILITARY MEDICAL FACILITIES RECOMMENDATIONS AND REQUIREMENTS.

(a) Establishment.—Not later than June 1, 2010, the Secretary of Defense shall establish within the Office of the Secretary of Defense an office responsible for implementing all recommendations and requirements regarding military medical facilities in the National Capital Region contained in—

(1) the report of the Defense Base Closure and Realignment Commission transmitted to Congress on September 15, 2005, under section 2903(e) of the Defense Base Closure and Realignment Act of
1990 (part A of title XXIX of Public Law 101–510; 10 U.S.C. 2687 note);

(2) section 2714 of the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111–84; 123 Stat. 2656); or

(3) any other provision of law.

(b) Organization.—

(1) Director.—The director of the office shall be the Deputy Secretary of Defense. The responsibilities of the director may not be delegated to another individual, office, command, field agency, or field activity.

(2) Deputy Director.—The deputy director of the office shall be the Assistant Secretary of Defense for Health Affairs. The responsibilities of the deputy director may not be delegated to another individual, office, command, field agency, or field activity.

(c) Responsibilities and Authorities.—

(1) Missions.—The office shall define the medical missions and responsibilities of the Office of the Secretary of Defense and the military departments in the National Capital Region.

(2) Budget and Operational Authority.—The office shall retain overall budget and operational
authority to provide and operate world class military medical facilities in the National Capital Region. This authority includes the development of budgets, prioritization of requirements, and the allocation of funds to provide and operate world class military medical facilities.

(3) PERSONNEL.—The office, in consultation with the Secretaries of the military departments, shall specify personnel authorizations and personnel systems required to provide and operate world class military medical facilities in the National Capital Region.

SEC. 4. COMPLETION OF NATIONAL CAPITAL REGION HEALTH CARE DELIVERY MASTER PLAN.

Upon the establishment of the office under section 3, the office shall assume responsibility for the development and implementation of the comprehensive master plan to provide sufficient world class military medical facilities and an integrated system of health care delivery for the National Capital Region required by section 2714 of the National Defense Authorization Act for Fiscal Year 2010 (Public Law 111–84; 123 Stat. 2656).
SEC. 5. ESTABLISHMENT OF UNIFIED CONSTRUCTION
STANDARD FOR MILITARY CONSTRUCTION
AND REPAIRS TO MILITARY MEDICAL FACILITIES.

Not later than June 1, 2010, the Secretary of Defense shall establish a unified construction standard for military construction and repairs for military medical facilities that provides a single standard of care. This standard shall also include a size standard for operating rooms and patient recovery rooms.

SEC. 6. AUTHORIZATION OF APPROPRIATIONS FOR
IMPLEMENTATION OF UNIFIED CONSTRUCTION
STANDARD AT WALTER REED NATIONAL
MILITARY MEDICAL CENTER.

There is authorized to be appropriated to the Secretary of Defense $400,000,000 to implement at Walter Reed National Military Medical Center the unified construction standard for military construction and repairs for military medical facilities established under section 5.

SEC. 7. INDEPENDENT REVIEW PANEL.

(a) Establishment of Review Panel.—The Secretary of Defense shall establish an advisory committee to be known as the “Independent Review Panel for Military Medical Care in the National Capital Region” to advise the Secretary regarding whether the proposed design and organizational structure for military medical facilities
in the National Capital Region will achieve a world class military medical facility.

(b) MEMBERS.—

(1) CONGRESSIONAL MEMBERS.—The advisory committee is constituted annually of the following:

(A) The chairman of the Committee on Armed Services of the Senate or the chairman’s designee.

(B) Three other members of the Senate designated by the Vice President or the President pro tempore of the Senate, two of whom are members of the Committee on Appropriations of the Senate.

(C) The chairman of the Committee on Armed Services of the House of Representatives or the chairman’s designee.

(D) Four other members of the House of Representatives designated by the Speaker of the House of Representatives, two of whom are members of the Committee on Appropriations of the House of Representatives.

(2) OTHER MEMBERS.—The advisory committee shall also include six persons designated by the President who are not employees or appointed political officials of the executive branch. These members
shall be medical facility experts, military health-care professionals, representatives of premier health care organizations in the United States, retired senior military officers or non-commissioned officers, or patient representatives. Not more than two members designated under this paragraph may be retired members of the Armed Forces. The term of office of these members shall be three years, except that the President may stagger the initial terms.

(3) **Successors.**—Any member of the advisory committee whose term of office expires may continue to serve until a successor is appointed. If a member dies or resigns, a successor shall be appointed for the unexpired portion of the term.

(c) **Meetings.**—

(1) **In general.**—The advisory committee shall meet not less than monthly. The committee or its members may make other visits to military treatment facilities and military headquarters in connection with the duties of the committee. The committee may call in advisers for consultation.

(2) **Compensation.**—While performing duties on behalf of the advisory committee, a member of the committee and any adviser referred to in para-
graph (1) shall be reimbursed under Government travel regulations for necessary travel expenses.

(d) DUTIES.—The advisory committee shall review—

(1) the plans for the design and organizational structure for military medical facilities in the National Capital Region to ensure that the facilities and organizational structure will result in a world class military medical facility; and

(2) the execution of the plans and such other matters relating to military medical care in the National Capital Region as the committee considers appropriate.

(e) REPORTS.—

(1) INITIAL REPORT.—Not later than 60 days after the first meeting of the advisory committee, the committee shall submit to the Secretary of Defense a written report containing an assessment of military medical care in the National Capital Region and the views and recommendations of the committee to improve such care.

(2) ADDITIONAL REPORTS.—Not later than December 31, 2010, and December 31, 2011, the advisory committee shall submit to the Secretary of Defense a report on the findings and recommendations
of the committee to address any deficiencies identified by the committee.

(f) ASSESSMENT OF RECOMMENDATIONS.—Not later than 30 days after the date of the submission of each report under subsection (e), the Secretary of Defense shall submit to the congressional defense committees a report including—

(1) an assessment by the Secretary of the findings and recommendations of the panel; and

(2) the plans of the Secretary for addressing such findings and recommendations.

SEC. 8. DEFINITIONS.

In this Act:

(1) NATIONAL CAPITAL REGION.—The term “National Capital Region” has the meaning given the term in section 2674(f) of title 10, United States Code.

(2) WORLD CLASS MILITARY MEDICAL FACILITY.—The term “world class military medical facility” has the meaning given the term by the National Capital Region Base Realignment and Closure Health Systems Advisory Subcommittee of the Defense Health Board in appendix B of the report titled “Achieving World Class—An Independent Review of the Design Plans for the Walter Reed Na-
tional Military Medical Center and the Fort Belvoir Community Hospital” and published in May 2009, as required by section 2721 of the Military Construction Authorization Act for Fiscal Year 2009 (division B of Public Law 110–417; 122 Stat. 4716).